

Utah Department of Health & Human Services Licensing & Background Checks		Inspection Checklist				This inspection checklist is the tool OL licensors use to ensure consistency for every inspection. (Revised 12/2023)	
Provider Name:	Lava Heights Academy	Facility ID:	F22-94202	Phone Number:	(256) 880-3339	Notes	
Site Name or Address:	730 Spring Dr Toquerville, UT, 84774			Email Address:	jeff.rinard@rop.com		
Approved Capacity:	48	nt Residents\Clients:	24				
Please review the following items prior to the inspection: (Mark with a check mark if completed and make and necessary notes)				Please review the following items during the inspection: (Mark with a check mark if completed and make and necessary notes)			
X	Current backgrounds in DACS			X	Any active rule variances	NA	
X	Current staff roster collected			X	Introduce yourself and any DHHS staff		
X	Any license restrictions or conditions			X	Staff Interviews	3	
X	Any needed rule variances			X	Clients Interviews	3	
Inspection Information:							
<p>- The licensor will email you this inspection checklist after the inspection is completed. This checklist is not an official compliance statement. The licensor will send you an official Inspection Report once this inspection has been approved by management. Only items checked here as noncompliant can be part of your Inspection Report, and the Inspection Report is to be considered the results of this inspection.</p> <p>- If the only non compliance items are documentation and/or records, please submit them by the correction required date listed. A licensor may conduct a follow-up inspection to verify compliance and maintenance of any noncompliance.</p>							
Signature Information							
Inspection Type:	Announced	Date:	1/18/2024	Time Started On-site:	10:00 AM	Time Ended On-site:	3:00 PM
Number of Non Compliant Items:		1	Name of Individual Informed of this Inspection:			Amy Dazel	
Licensor(s) Conducting this Inspection:		MeRee Jacobsen			OL Staff Observing Inspection:	NA	
X	The Licensor explained noncompliance items (if any).	Please sign/type individual informed name and date of review: Signing this checklist does not constitute agreement with the statements, only that the inspection was conducted and noncompliances, if any, were explained.					Amy Dazel

General Provisions - Inspection Checklist (Revised 12/2023)						
C = Compliant NC = Not Compliant NA = Not Assessed during this inspection						
New and Renewal Licensing Procedures	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R380-600-3(1) An applicant or provider may not accept any fee, enter into any agreement to provide a client service, or provide any client service until a license or certificate is approved by the office.	X					
R380-600-3(2) Each applicant and provider shall comply with any applicable administrative rule, statute, zoning, fire, safety, sanitation, building and licensing laws, regulations, ordinances, and codes of the city and county in that the facility or agency will be or is located.	X					
R380-600-3(3) An applicant or a provider shall permit the office to have immediate, unrestricted access to: (a) each site subject to licensing or certification; (b) any unaltered on and off-site program or facility and client records; and (c) each staff and client.	X					
R380-600-3(12) A provider approved by the office to certify their own program or facility sites shall register each certified site using the licensing provider portal.	X					
R380-600-3(14) The license or certificate holder shall adhere to any individualized parameter on a program or facility license or certificate to promote the health, safety, and welfare of any client. Parameters may include: (a) an age restriction; (b) admission or placement restriction; or (c) adequate square footage to determine capacity.	X					
R380-600-3(23) Each license or certificate is not transferable.	X					
Variances	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R380-600-6(2) The provider may not deviate from any administrative rule before receiving written approval signed by the office director or the director's designee.	X					
R380-600-6(5) The provider shall sign the approved variance and comply with the terms of the written variance, including any conditions or modifications contained within the approved written variance.	X					
Inspection and Investigation Process	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R380-600-7(6) The provider shall ensure that the integrity of the office's information gathering process is not compromised by withholding or manipulating information or influencing any specific response of staff or clients.	X					
R380-600-7(7) The provider shall allow the office to access any program or facility record or staff at an administrative or certified location that is not located at the licensed site.	X					
R380-600-7(16) When a critical incident occurs under the direct responsibility and supervision of the program or facility, the licensee or certificate holder shall: (a) submit a report of the critical incident to the office in format required by the office within one business day of the critical incident occurring; (b) notify the legal guardian of each involved client within a 24-hour period from the time of the incident; (c) if the critical incident involves any client in the custody of the department or under contract with the department, notify the involved department division immediately; and (d) collect, maintain, and submit original witness statements and supporting documentation, including video footage if available, regarding each critical incident to the office upon request.	X					
Program Policies, Procedures, and Safe Practices	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R501-1-4(2) The licensee shall develop, implement, and comply with safe practices that: (a) ensure client health and safety; (b) ensure the needs of the client population served are met; (c) ensure none of the program practices conflict with any administrative rule or statute before implementation; and (d) inform staff of how to manage any unique circumstances regarding the specific site's physical facility, supervision, community safety, and mixing populations.	X					
R501-1-4(3) The licensee shall submit any change to an office approved policy or curriculum to the office for approval before implementing the proposed change.	X					
Residential Programs Additional Safe Practices	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R501-1-5(1) A licensee that manages, stores, or administers client medications shall develop and ensure compliance with the following medication management safe practices: (a) inform staff and clients of program and client responsibility for medication including storage and administration of medications on-site and, as applicable, when staff and clients are offsite in program related activities; (b) if applicable, inform staff and clients of the medication self-administration process; (c) if storing and administering medications, train staff to administer medication and the process to be followed; (d) how staff read medication dosages according to prescriptions; (e) how staff monitor for and record effects and side effects of medications; and (f) how staff log doses and record and report medication errors.	X					
R501-1-5(2) The licensee shall ensure 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.	X					
R501-1-5(3) The licensee shall have separate space for clients showing symptoms of an infectious disease.	X					
R501-1-5(4) The licensee shall ensure that a ratio of one staff to one client during transports is only utilized when the program has conducted a safety assessment that indicates that client and staff safety is reasonably assured.	X					
Program Administrative and Direct Service Requirements	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes

R501-1-6(1) The licensee shall clearly 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) the program's mission statement; (d) each program requirement and expectation; (e) eligibility criteria outlining behavior, diagnosis, situation, population, and age that can be safely served, including: (i) an outline of the behaviors and presenting issues that would be reason for discharge or exclusion from the program; and (ii) a statement that the program may not take placement of a child whose needs exceed the scope or ability of the program to reasonably manage; (f) each cost, fee, and expense for a service and refund policy; and (g) identification of each non-clinical, extracurricular, or supplemental service offered or referred.	X					
R501-1-6(2) The licensee shall post the following in conspicuous places where each visitor, staff, and client may view: (a) abuse reporting laws as described in Sections 80-2-609 and 26B-6-205; (b) civil rights notice; (c) Americans with Disabilities Act notice; (d) the program license; (e) emergency notice of agency action; (f) a client rights poster in a residential setting except in a foster home or where prohibited by Settings Final Rule; and (g) department code of conduct poster.	X					
R501-1-6(3) The licensee shall maintain compliance with or documentation of an exemption from any of the following requirements: (b) capacity determinations that include each staff and client on premises and may not exceed the capacity limits placed by local authorities; (d) licensure and registration of any vehicles used to transport clients.	X					
R501-1-6(5) The licensee shall maintain and make the following available to the department upon request: (d) vehicle insurance	X					
R501-1-6(6) The licensee shall ensure: (b) current staff and client lists are available at each licensed site; (c) the organizational and governance structure of the program is available to the department upon request and 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 R380-600-3; (f) the licensee maintains an opioid overdose reversal kit on-site with on duty staff trained in its use if the licensee is serving, or is likely to serve, a client with a substance use disorder.	X					
R501-1-6(8) A licensee offering school on-site shall: (a) maintain the established staff to client ratio with behavioral intervention trained staff in the school setting; (c) ensure each client is taught at their appropriate grade level.	X					
R501-1-6(9) The licensee shall ensure clinical and medical staff are licensed or certified in good standing and any unlicensed staff are appropriately supervised as described in Title 58 Occupations & Professions	X					
R501-1-6(12) A licensee that provides behavior interventions to people with disabilities shall comply with Rule R539-4, which supersedes any conflicting rule under Title R501, for the disabled populations served.		X			does not serve people with disabilities	
Residential Program Additional Administrations and Direct Services Requirements	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R501-1-7(1) A residential program licensee shall additionally: (a) ensure each staff shift list remains current and available to the office upon request; (b) ensure that each shift documents any illness, injury or critical incident and passes it on to the next shift and administration; (c) ensure at least two on-duty staff are present at all times; (d) ensure access to a medical clinic or a medical professional familiar with the program and population served; and (e) provide a separate space for clients who are showing symptoms of an infectious disease.	X					
R501-1-7(3) A congregate care program licensee may allow an individual turning 18 to remain in the program 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 licensee has a reasonable need for the individual to remain in the program; (c) the individual 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 licensee outlines a plan for the protection of younger clients by supervising and 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.	X					
R501-1-7(4) A congregate care program licensee shall ensure weekly confidential communication with family in accordance with Section 26B-2-123 and shall ensure that: (a) the frequency or form of the confidential communication requirement is only modified 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) the program is at risk of harm or danger to client safety by providing youth with unsupervised telephone access; (iii) the licensee offers an alternative that satisfies the requirement of weekly confidential two-way communication; or (iv) extenuating circumstances exist outside the individual treatment plans that are prohibitive to offering voice to voice communication; (b) a parent or guardian authorizes in writing an alternate means of confidential communication when voice to voice is unavailable; and (c) the licensee offers voice to voice confidential communication as soon as it can be safely offered.	X					
R501-1-7(6)(a) A residential program licensee, excluding a residential treatment program, may allow for client independence and responsibility for their own supplies, food, laundry, or transportation by outlining in writing resources and responsibility for the provision of these items. (b) Each residential program licensee shall assist clients on a limited basis if they are temporarily unable to provide the items or services listed in Subsection R501-1-7(6)(a) for themselves.		X				Provides food, laundry, and transportation services to clients.
Program Physical Facilities and Safety	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes

R501-1-8(1) The licensee shall ensure: (a) the appearance & cleanliness of the building/grounds are maintained & free from health/fire hazards; (b) any appliances, plumbing, electrical, HVAC, and furnishings are maintained in operating order and in a clean and safe condition; (c) fire drills in non-outpatient programs are conducted at least quarterly and documented, including feedback regarding response time and process; (d) a phone that can be used to call 911 is always available on-site when clients are present; (e) bathroom facilities for staff and clients allow for individual privacy and afford reasonable accommodation based on gender identity; (f) each bathroom is properly equipped with toilet paper, paper towels or a dryer, and soap; (g) each bathroom is ventilated by mechanical means or equipped with a window that opens; (h) non-prescription medication, if stored on-site, is stored in original manufacturer's packaging together with the manufacturer's directions and warnings; and (i) prescription medication, if stored on-site, is stored in original pharmacy packaging or individual pharmacy bubble pack together with the pharmacy label, directions, and warnings.	X				
R501-1-8(2) The licensee shall accommodate a client with physical disabilities as needed or appropriately refer to comparable services.	X				
R501-1-8(3) The licensee shall maintain medication and potentially hazardous items on-site lawfully, responsibly, and with consideration of the safety and risk level of the population served to include locked storage for each medication and hazardous chemical that is not in active use.	X				
R501-1-8(4) The licensee shall maintain a first aid kit that contains at least: (a) bandages of different sizes; (b) tweezers; (c) antiseptic; and (d) disposable sterile gloves.	X				
Residential Program Additional Facilities and Safety Requirements	C	NC	NA	Date to be corrected by	Corrected During Inspection
R501-1-9(1) A residential licensee shall ensure: (a) designated space is available for records, administrative work, & confidential phone calls for clients; (c) live-in staff have dedicated bedrooms & bathrooms separate from client use; (d) each bedroom designated for a client is comparable to other similarly utilized bedrooms with similar access, location, space, furnishings, and furnishings; (e) clients are not locked in bedrooms; (f) a mirror or safety mirror is secured to each bathroom wall at a convenient height; (g) each client has a placed all day access to each client without disturbing any other client during sleeping hours; (h) each bath or shower allows for individual privacy; (i) each client is supplied with hygiene supplies; (j) each sleeping area has a source of natural light and is ventilated by mechanical means or is equipped with a window that opens; (k) each client has a similar solid type of bed or sleeping equipment to any other client in the program; (l) each client is allowed to decorate & personalize their bedroom, while maintaining respect for other residents and property; (m) there are separate containers for soiled & clean laundry, if the program provides common laundry for towels, bedding or clothing; (n) bedding & towels are laundered weekly & after each client is discharged; (o) equipment and supplies for washing & drying laundry are provided, if the program permits clients to do their own laundry; (p) there is at least 60 sq ft per person in a multiple occupancy bedroom and 80 sq ft in a single occupant bedroom.	X				No live in staff.
R501-1-9(2) A residential program licensee serving individuals with disabilities shall house no more than two clients in each bedroom.			X		
Does not serve individuals with disabilities					
R501-1-9(3) The licensee utilizing seclusion rooms shall ensure the following: (a) seclusion rooms measure a minimum of 75 sq ft and have a minimum ceiling height of 7 ft with no equipment, hardware or furnishings that obstruct staff's view of the client or present a hazard; (b) a seclusion room has a minimum of 100% 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) a seclusion room 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; and (d) a bedroom may not be utilized as a seclusion room and a seclusion room may not be utilized as a bedroom.	X				
R501-1-9(4) The licensee shall ensure that dormitory space is only permitted in an emergency homeless shelter or a program serving only adults.			X		
R501-1-9(5) The licensee shall train staff and ensure that the use of any alternate sleeping arrangements other than the client's assigned bedroom is only done on an individualized, short-term basis with ongoing clinical or medical justification that: (a) preserves client dignity and confidentiality; (b) is not done as a standard, practice, or policy; (c) is not utilized due to staffing shortages or for staff convenience; and (d) is not used as behavior management or consequence.	X				
Food Service Requirements	C	NC	NA	Date to be corrected by	Corrected During Inspection
R501-1-10(2) A licensee that provides meals shall: (a) ensure that meals are not used as incentive or punishment; (b) provide nutritional counseling to staff and clients; (c) designate staff responsible for food service who: (i) maintain a current list of each client with special nutritional needs; and (ii) ensure that each client with special nutritional needs has food storage and a preparation area that is not exposed to any identified allergens or contaminants; (d) 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 are: (i) served from dietitian or nutritionist approved menus; or (ii) for programs serving individuals experiencing homelessness, serve meals as required by USDA standard homeless settings; (e) establish and post kitchen rules and privileges in a kitchen according to client needs and safe food handling practices; and (f) provide adequate dining space for clients that is maintained in a clean and safe condition.	X				
R501-1-10(3) A licensee that allows self-serve meals shall ensure that self-serve kitchen users are supervised, directed, and trained by a staff that has a food handler's permit or is trained by Serv-Safe, USDA, or a comparable program.	X				
R501-1-10(4) A licensee that serves parents and their children may allow a consenting adult client to maintain full responsibility for their, and their child's, special dietary needs, if consent is maintained in writing in the client record.			X		

R501-1-10(5) A licensee that offers meals for clients shall ensure there is documented training confirming staff are trained to and adhere to the following safe practices: (a) how to identify and accommodate clients with special dietary needs; and (b) allowances for nutritious snacks to be available during restricted hours if the program restricts access to food and kitchen equipment.	X					
R501-1-10(6) If meals are prepared by clients, the licensee shall inform staff and clients in writing of the following: (a) rules and privileges of kitchen use; (b) meal preparation and procedures; (c) storing self-prepared food; (d) nutrition and sanitation requirements; (e) schedule of responsibilities; and (f) shopping and storage responsibilities.	X					
Program Client Record Requirements	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R501-1-11(1) The licensee shall maintain client information to include the following: (a) client name, address, email address, phone number, 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 and telephone 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 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 in treatment services; (m) any grievance or complaint 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 agreement and consent form.	X					
Program Intake and Discharge Requirements	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R501-1-12(1) The licensee shall complete an intake screening before accepting a client into the program that includes at least: (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; and (d) suicide risk screening.	X					
R501-1-12(2) A licensee 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.	X					
R501-1-12(3) A licensee serving incarcerated or court-mandated justice involved clients shall: (a) conduct a criminogenic risk assessment; (c) separate high and low criminogenic risk populations.	X					Does not serve Utah court mandated clients.
R501-1-12(4) The licensee shall ensure that, the client, parent, or guardian signs and receives copies of the following agreements to be maintained as client records: (a) determination of eligibility; (b) fee agreement outlining costs of services including program, client, parent, or guardian responsibility for payment; and (c) 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.	X					
R501-1-12(5) The licensee shall ensure that a discharge plan identifies resources available to a client and includes: (a) reason for discharge or transfer; (b) aftercare plan; (c) summary of services provided; and (d) progress evaluation.	X					
Residential Additional Program Intake and Discharge Requirements	C	NC	NA	Date to be corrected	Corrected During	Notes
R501-1-13(1) A residential program licensee shall ensure an intake assessment is completed following an approved intake screening, no later than seven days from the admission date, and that the assessment considers and contains: (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.	X					
R501-1-13(2) A residential program licensee may not serve youth from out of state without a disruption plan as described in Section 26B-2-124 and, as applicable, Section 80-2-905, Interstate Compact Placement of Children (ICPC).	X					
R501-1-13(3) A congregate care program licensee shall ensure that each congregate care disruption plan complies with the following: (a) the program retains jurisdiction and responsibility for the youth while the youth remains in Utah; and (b) the program completes 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 person; (iii) a signed statement from parent or responsible person 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 person as identified in Subsection R501-1-13(3)(b)(i) or to another licensed congregate care program or higher level of care, as needed.	X					

R501-1-13(4) A congregate care program licensee may demonstrate compliance with Subsections R501-1-13(2) and R501-1-13(3) by producing the 100A and 100B forms and disruption plan as required by the ICPC.	X					
R501-1-13(5) A congregate care program licensee shall report private placements to the office as described in Section 26B-2-124 by completing the congregate care out of state placement survey on the office website no later than the fifth business day of each month. (b) A congregate care program licensee that does not comply with the disruption plan requirements stated in Section 26B-2-124 shall pay for the cost of care incurred by entities maintaining the youth for purposes of locating, housing, or transporting the youth.		X			Private placements are not being reported	
Program Clinical Services	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R501-1-14(1) A licensee that offers clinical treatment shall: (a) assign a clinical director to ensure that assessment, treatment, and service planning practices are: (i) regularly reviewed and updated; (ii) individualized; and (iii) designed to involve the participation of each client or each client's parent or guardian; (b) ensure each person working directly with a client is informed of the client's individual treatment needs and advised of the best approach to work with that client; (c) ensure client treatment plans are developed and signed by a licensed clinical professional within 30 days of admission; (d) ensure discharge goals are identified in the initial treatment plan and treatment goals are structured around the identified discharge goals and objectives; (e) ensure that each client identified for treatment receives individual treatment at least weekly; and (f) ensure any missing individual weekly treatment is justified, approved, and documented by the clinical director.		X				
R501-1-14(2)(a) A residential program licensee shall ensure that in addition to the required weekly individual therapy, frequency and need for family and group therapy and other clinical services are addressed in the individual's treatment plan. (b) A non-residential program licensee who offers clinical treatment may alter the weekly therapy requirement as designated in the individual's treatment plan.	X					
R501-1-14(4) A licensee who offers group counseling, family counseling, skills development, or other treatment shall offer and document these treatment services as prescribed in the treatment plan.	X					
R501-1-14(5) The licensee shall make any records available to the department for review upon request.	X					
Program Staffing	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R501-1-15(1) The licensee shall ensure adequate staffing to safely supervise the current population, including adding more staff than required by the usual staffing ratio as needed to manage behaviors, dynamics, and individual client treatment and supervision needs.	X					Program is ensuring to meet staffing ratios
R501-1-15(2) The licensee shall identify a manager or qualified designee who is immediately available when the program is in operation or there is a qualified and trained substitute when the manager is absent or unavailable.	X					
R501-1-15(3) A licensee 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.	X					
R501-1-15(4) The licensee shall ensure that before allowing a direct care staff to work unsupervised they have an approved background clearance except as excluded in Section R501-14-17.	X					
R501-1-15(5) A licensee who serves clients with substance use disorder shall ensure each staff is screened for tuberculosis.	X					
R501-1-15(6) A licensee who serves a client with substance use disorder may not offer, entice, refer, or recommend medical cannabis as treatment for substance use disorder.	X					
R501-1-15(7) A licensee who manages, stores, or administers client medication shall identify a medical professional to oversee the medication management, medication oversight, and staff training regarding medication management and administration.	X					
R501-1-15(8) The licensee shall ensure that each person involved with the prescription, administration, or dispensing of controlled substances maintains appropriate medical or pharmacy licenses and DEA registration numbers as described in the 21 CFR Part 1301.	X					
R501-1-15(9) The licensee shall create and maintain personnel information for each staff member, contracted employee, and volunteer.	X					
R501-1-15(10) The licensee shall ensure that personnel information includes: (a) any applicable qualification, experience, certification, or license; (b) any approved and current office background clearance, except as excluded in Rule R501-14; (c) a provider code of conduct that is signed by the staff member, contracted employee, or volunteer; (d) any pre-service and annual training records with the date completed, topic, and the individual's signed acknowledgment of training completion; (e) any grievances or complaints made by or against the individual and actions taken by the program; & (f) each crisis intervention or critical incident report involving the individual.		X				
R501-1-15(11) The licensee shall ensure that at least one CPR and First Aid-certified staff member is available when staff and clients are present unless a currently licensed healthcare professional is present.	X					
Personnel Training Requirements	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R501-1-16(1) The licensee shall ensure that each staff receives pre-serving training on the following topics before being left unsupervised and within 30-days of hire: (a) program policies, procedures and safe practices as outlined in Section R501-1-5; (b) basic emergency preparedness, response, and recovery plan, including at least: (i) 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; and (ii) instructions to staff regarding how to report and respond to significant criminal activity and significant medical emergencies; (c) CPR and First Aid; (d) client eligibility, emphasizing the behaviors and circumstances the program can safely manage; (e) staff involvement and responsibility in the intake, discharge, and unplanned discharge processes; (f) diet (if applicable); (g) supervision and ratios; (h) as applicable, medications management, storing, and administration; (i) as applicable, food handling as outlined in Subsection R501-1-10(3); (j) background checks; (k) prevention, signs and symptoms of abuse and neglect, including sexual abuse, and legal reporting requirements; (l) provider code of conduct as outlined in Rule 380-80; (m) non-discrimination policy in accordance with Section 26B-2-109 that includes a prohibition of abuse, discrimination, and harassment based on sex, gender identity, or sexual orientation; (n) staff and client grievance procedures; (o) crisis intervention; (p) appropriate use of restraint and sedusion;		X				

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|--|---|--|--|--|--|
| <ul style="list-style-type: none"> (q) de-escalation techniques; (r) appropriate searches; (s) appropriate and inappropriate behaviors of clients; (t) appropriate and inappropriate staff responses to client behaviors; and (u) if applicable, staff response to a client leaving a program without permission. | | | | | |
| <p>R501-1-16(2) The licensee shall ensure each staff completes the following training topics each year, based on the program's license date:</p> <ul style="list-style-type: none"> (a) program policies, procedures and safe practices as outlined in Section R501-1-4; (b) general provisions and applicable categorical licensing rule; (c) client eligibility, as outlined in Subsection R501-1-6(1)(e), emphasizing the behaviors and circumstances the program can safely manage; (d) staff involvement and responsibility in the intake, discharge, and unplanned discharge processes; (e) provider code of conduct as outlined in rule R501-1-6(1)(f); (f) infection 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; (g) 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; (h) program rules regarding firearms that does not conflict with constitutional or statutory rights regarding concealed weapons permit as described in Title 53, Chapter 5, Part 7, Concealed Firearms Act; (i) smoking rules in accordance with Title 26B, Chapter 7, Part 5, Regulation of Smoking, Tobacco Products, and Nicotine Products; (j) how to manage clients who screen with elevated suicide risk levels; (k) general incident reporting; (l) prevention, signs, and symptoms of abuse and neglect, including sexual abuse, and legal reporting requirements; (m) CPR and first aid; (n) if storing and administering medications, training required to administer medication and the process to be followed; (o) training to identify and address in a residential or congregate care program: <ul style="list-style-type: none"> (i) clients who are at risk of violence; (ii) what constitutes contraband, possession of contraband, and how the program ensures restriction of client access to contraband and dangerous weapons or materials; (iii) clients who are at risk for suicide; (iv) managing clients with mental health concerns; and (v) identifying the signs and symptoms of clients presenting under the influence of substances or alcohol; (p) if the licensee manages funds for client allowances, training to document each expense; and (q) appropriate use of any alternate sleeping arrangements in a residential or congregate care program. | X | | | | |

- (q) de-escalation techniques;
- (r) appropriate searches;
- (s) appropriate and inappropriate behaviors of clients;
- (t) appropriate and inappropriate staff responses to client behaviors; and
- (u) if applicable, staff response to a client leaving a program without permission.

Congregate Care Residential Treatment Programs - Inspection Checklist
 (Revised 12/2023)

C = Compliant
 NC = Not Compliant
 NA = Not Assessed during this inspection

Administration	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R501-19-3(2). The residential treatment program serving a child provides direct supervision that meets supervision and ratio requirements.	X					
R501-19-3(3). The residential treatment program serving a child has no less than two direct care staff on duty.	X					
R501-19-3(4). The residential treatment program serving a child maintains a staff to client ratio of no less than one staff to every four clients or as otherwise dictated in department contract.	X					
R501-19-3(5). Except as provided under Section R501-19-4, a residential treatment program serving a child may decrease the staff to client ratio during client sleeping hours to one staff to every 16 clients.	X					
R501-19-3(6). The residential treatment program serving a child only decreases the number of staff as described in Section R501-19-4 if: (a) each client is appropriately supervised to ensure health and safety at the ratio; and (b) each direct care staff remains awake while on duty.		X				
R501-19-3(7). The residential treatment program increases each staff to client ratio as necessary to ensure the health and safety of the current client population.	X					
R501-19-3(8). Direct supervision is only performed by direct care staff who are in physical proximity to the clients and actively supervising with line-of-sight check-ins no less frequently than every 15 minutes.	X					
R501-19-3(9). Except in an emergency situation that is caused by a client's behavior or medical needs, each direct care staff assigned to a one-on-one or line-of-sight supervision is not counted at the same time in the staffing ratio for any other client.	X					
R501-19-3(10). The program policy includes how the program will accommodate client privacy in each bedroom space while assuring client health and safety.	X					
R501-19-3(11). The residential treatment program may utilize on-site video surveillance to directly supervise a client in time out or seclusion or as an enhancement to minimum supervision ratio requirements. 15-minute physical check-ins must be conducted and documented when a client is being monitored by video.	X					
R501-19-3(12). Video surveillance in bedrooms is only used by a residential treatment program: (a) with client, parent, or guardian permission; (b) when there is a documented need; (c) when the programs monitor cameras or checks in at intervals of 15-minutes or less; and (d) in a program serving an individual with disabilities, where video surveillance is in compliance with Rule R539-3.	X					
R501-19-3(13). A residential treatment program serving a child may provide step-down privileges to include unsupervised time and authorized departures from the program if: (a) the program maintains a 1:4 direct care staff to client ratio; (b) the program ensures that the program communicates to each of the clients direct care staff individualized justification for the step-down privileges and which privileges are authorized by a clinical professional; (c) the program obtains written parental or guardian consent prior to allowing step-down privileges; and (d) the program provides to each client and parent or guardian a policy that includes: (i) a description of what constitutes authorized departure and unsupervised time; (ii) a description of how each step-down privilege, including authorized departure or unsupervised time, is achieved and rescinded; (iii) a policy that the program will immediately communicate to each client parent or guardian and direct care staff when the step-down privileges have been rescinded; and (iv) a statement that no step-down client is permitted to perform any direct care staff duties.	X					
R501-19-3(14). A residential treatment program serving adults may admit a 17-year-old under the following circumstances: (a) the program obtains written permission from the individual's parent or legal guardian; (b) the program provides clinical justification; (c) the program ensures that the individual sleeps in a separate room from adults or a room that the individual shares with adults no more than two years older than the individual; (d) the program ensures that any adult with direct access to the 17-year-old is directly supervised by a direct care staff; and (e) the program ensures enhanced safety and supervision measures for treating a minor in an adult setting.		X				does not serve adult population
R501-19-3(15). The residential treatment program providing services to a substance use disorder client: (a) only admits a substance use disorder client with a level of care that falls within American Society of Addiction Medicine levels 3.1 through 3.5; and (b) obtains any required licenses before providing any service to a substance use disorder client outside of the residential milieu with a level of care described in Subsection R501-19-3(16).	X					
R501-19-3(16). The residential treatment program makes any necessary accommodation before allowing a child to continue the child's education with a curriculum approved by the State Board of Education.	X					
R501-19-3(17). A program that provides education utilizes a curriculum that is recognized by an educational accreditation organization such as the State Board of Education or the National School Accreditation Board.	X					
R501-19-3(18). A program that allows a client to participate in meal preparation ensures proper training and justify the client's participation in writing.	X					
R501-19-3(19). The residential treatment program provides individual, group, and family counseling or other treatment, including skills development, at least weekly or as outlined in the individual's treatment plan.	X					
R501-19-3(20). A residential treatment program that provides therapeutic service such as life skill development, psychoeducation, or social coaching is included in the therapeutic environment and be overseen by a clinical professional.	X					
R501-19-3(21). The residential treatment program documents the time and date of each service provided to each client. Any documentation includes the signature of the individual providing service.	X					
R501-19-3(22). The residential treatment program provides indoor space for free and informal client activities.	X					
Requirements for Intermediate Secure Treatment	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R501-19-4(1). The intermediate secure treatment program clearly defines in policy the responsibilities of the manager described in Section R501-1-18.		X				

R501-19-4(2). Subsection R501-19-3(4) does not apply to an intermediate secure treatment program serving youth. Intermediate secure treatment programs serving youth maintain a staff to client ratio of no less than one staff to every five clients.		X			
R501-19-4(3). The manager described in Section R501-1-18:		X			
(a) is at least 25 years of age;					
(b) has a BA or BS degree or equivalent training in a human services related field; and					
(c) has at least three years management experience in a residential or secure treatment setting.					
R501-19-4(4). Each direct care staff working in an intermediate secure treatment program is trained to work with a child with behavioral or mental health needs and works under the supervision of a licensed clinical professional.		X			
R501-19-4(5). In addition to the direct care staff training requirements described in Subsection R501-1-14(5), each direct care staff working in an intermediate secure treatment program receives 30 hours of additional training annually that includes training on the following:		X			
(a) human relations and communication skills;					
(b) the special needs of children and families;					
(c) problem solving and guidance;					
(d) client rules and regulations;					
(e) client record and incident documentation;					
(f) maintaining staff, client, and visitor safety in a secure setting; and					
(g) universal precautions for bloodborne pathogens.					
R501-19-4(6). The intermediate secure treatment facility incorporates the use of fixtures and furnishings that help limit self-harm and suicide. Such fixtures and furnishings include:		X			
(a) plexiglass or safety glass;					
(b) recessed lighting;					
(c) sealed light fixtures;					
(d) non-exposed fire sprinkler heads; and					
(e) pressure release robe hooks.					
Specialized Services Required to Serve Clients Under the Division of Services for People with Disabilities					
R501-19-5(1). The residential treatment program made policy and procedures governing each facility daily operation and activity available to each client and visitor. Each policy and procedures governing facility daily operation and activity applies to any individual that enters the facility.	C	NC	NA	Date to be corrected by	Corrected During Inspection
				X	
R501-19-5(2). The residential treatment program specifies, in policy, the amount of time non-client individuals may stay as overnight guests.				X	
R501-19-5(3). The residential treatment program presents each client with an individual plan that addresses appropriate day treatment.				X	
R501-19-5(4). The residential treatment program shares with each client a monthly activity schedule.				X	
R501-19-5(5). The residential treatment program maintains a record of income earned and unearned, and client service fees.				X	
R501-19-5(6). The residential treatment facility is located within a reasonable distance from school, church, recreation, and other community facilities.				X	
R501-19-5(7). The residential treatment program maintains an accurate record of each fund deposited with the residential facility for client use. This record contains a list of each deposit and withdrawal.				X	
R501-19-5(8). The residential treatment program substantiates client purchase of over \$20 with receipts signed by the client and professional staff. The residential treatment program keeps a record of each client petty cash fund.				X	
R501-19-5(9). The residential treatment program, in conjunction with the support coordinator for the Division of Services for People with Disabilities and each client's parent or guardian, applies for unearned income benefits for which a client is entitled.				X	
R501-19-5(10). In the event of a conflict between licensing rule and the Federal Home and Community Based Settings Final rule, the settings rule shall prevail.				X	

Pre - Inspection Checklist <i>(Revised 12/2023)</i>						
C = Compliant NC = Not Compliant NA = Not Assessed during this inspection						
Program Policies, Procedures, and Safe Practices	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R501-1-4(1) The licensee shall submit to the office, before program implementation, policies and procedures that include: (a) a description of what constitutes sex and gender abuse, discrimination, and harassment; (b) procedures for preventing and reporting abuse, discrimination, and harassment; and (c) procedures for reaching effective and professional communication with individuals of any sexual orientations and genders.						
R501-1-4(2) The licensee shall develop, implement, and comply with safe practices that: (a) ensure client health and safety; (b) ensure the needs of the client population served are met; (c) ensure that none of the program practices conflict with any administrative rule or statute before implementation; and (d) inform staff of how to manage any unique circumstances regarding the specific site's physical facility, supervision, community safety, and mixing populations.						
R501-1-4(3) The licensee shall submit any change to an office approved policy or curriculum to the office for approval before implementing the proposed change.						
R501-1-4(4) A congregate care program licensee shall submit to the office any policies and procedures that describe behavior management, suicide prevention, restraint, or seclusion used in the program as described in Section 26B-2-123, before implementation.						
R501-1-4(5) In addition to complying with Section 26B-2-123, a congregate care program licensee shall ensure that the congregate care behavior management policy and practices reflect the following: (a) a congregate care program licensee uses behavior management techniques that are trauma-informed and appropriate for the client's age, behavior, needs, developmental level, and past experiences and defer to the least restrictive method of behavior management available to control a situation; (b) a congregate care program licensee only uses behavior management techniques that emphasize de-escalation and problem-solving, resiliency, and independence; (c) a congregate care program licensee identifies a behavior management curriculum that emphasizes de-escalation and is compliant with Section 26B-2-123; (d) only direct care staff familiar with the child and the child's needs conduct passive physical restraint; (e) restraint is only used if it does not cause undue physical discomfort, harm, or pain to the client; (f) intervention is not used as a general practice or as a punishment; (g) passive physical restraint is used only as an emergency temporary means of physical containment to protect the consumer, other persons, or property from immediate harm; (h) restraint only continues as long as the client presents an immediate danger to self or others; (i) passive physical restraint is not used as a convenience to staff, a substitute for programming or associated with punishment in any way; (j) a client, non-care staff member, or other unauthorized individual does not use any form of restraint; (k) staff do not use physical work assignments or activities that inflict pain as behavior management techniques; and (l) staff are trained to ensure the following safe practices: (m) appropriate de-escalation techniques and alternatives to restraint or seclusion; (n) thresholds for restraint or seclusion; (o) how to recognize signs of distress, positional asphyxia, and obtaining medical assistance; (p) how to intervene if another staff member fails to follow correct procedures when using a restraint; (q) the process for obtaining clinical approval for continued restraints; (r) the procedure for documenting and reporting restraints; (s) the procedure for processing restraints with clients; (t) the procedure for following up with staff after a restraint; (u) how staff address injuries and complaints; (v) staff code of conduct; and (w) client rights.						
R501-1-4(6) A congregate care program licensee shall ensure that congregate care seclusion policy and practices reflect the following: (a) seclusion is only used to ensure the immediate safety of the child or others and is 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 directly supervise the child during the seclusion; (c) staff supervising seclusion ensure that any potentially harmful items or objects are removed from the seclusion environment; (d) seclusion rooms measure a minimum of 75 square feet and have a minimum ceiling height of seven feet with no protrusions or obstructions that could injure the client or present a hazard; (e) seclusion rooms 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 do not have locking capability and are not located in closets, bathrooms, unfurnished areas or other areas not designated as part of residential living space; (g) bedrooms are not utilized as a seclusion room and seclusion rooms may not be utilized as bedrooms; (h) seclusion episodes are 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 are supported by clinical review and documentation regarding client suitability for remaining in the program; and (j) client time-out is used when addressing behavioral issues only: (k) a client in time-out is physically prevented from leaving the time-out area; (l) it takes place away from the area of activity or from other clients, such as in the client's bedroom; (m) staff monitors the client while in time-out; and (n) the reason for and duration of time-out is documented by staff on duty when it occurs.						
R501-1-4(7) A congregate care program licensee shall develop and follow a suicide prevention policy that complies with Subsection 26B-2-123(5).						
R501-1-4(8) A congregate care program licensee shall ensure that the program's licensed clinical professional conducts regular reviews of client restraints, seclusions, behavioral interventions, and time outs to inform processing discussions with clients and training for direct care staff.						
R501-1-4(9)(a) Before a congregate care program licensee may accept a client or send a discharging client who is transported by a youth transportation company as defined in Section 26B-2-101, the licensee shall ensure that the transport company is registered with the office. (b) A congregate care program licensee shall report private placements to the office as described in Section 26B-2-124 by completing the congregate care out of state placement survey on the office website no later than the fifth business day of each month.						

Program Administrative and Direct Service Requirements	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R501-1-6(1) The licensee shall clearly 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 the service program; (d) each program requirement and exception; (e) eligibility criteria outlining behavior, diagnosis, situation, population, and age that can be safely served, including: (i) an outline of the behaviors and presenting issues that would be reason for discharge or exclusion from the program; and (ii) a statement that the program may not take placement of a child whose needs exceed the scope or ability of the program to reasonably manage; (f) each cost, fee, and expense for a service and refund policy; and (g) identification of each non-clinical, extracurricular, or supplemental service offered or referred.						
R501-1-6(2) The licensee shall post the following in conspicuous places where each visitor, staff, and client may view: (a) abuse reporting laws as described in Sections 80-2-609 and 26B-6-205; (b) civil rights notice; (c) Americans with Disabilities Act notice; (d) the program license; (e) an office notice of agency action; (f) a client rights poster in a residential setting except in a foster home or where prohibited by Settings Final Rule; and (g) department code of conduct poster.						
Program Physical Facilities and Safety	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R501-1-8(1) The licensee shall ensure: (a) the appearance & cleanliness of the building/grounds are maintained & free from health/fire hazards; (b) any appliances, plumbing, electrical, HVAC, and furnishings are maintained in operating order and in a clean and safe condition; (c) fire drills in non-outpatient programs are conducted at least quarterly and documented, including feedback regarding response time and process; (d) a phone that can be used to call 911 is always available on-site when clients are present; (e) bathroom facilities for staff and clients allow for individual privacy and afford reasonable accommodation based on gender identity; (f) each bathroom is properly equipped with toilet paper, paper towels or a dryer, and soap; (g) each bathroom is ventilated by mechanical means or equipped with a window that opens; (h) non-prescription medication, if stored on-site, is stored in original manufacturer's packaging together with the manufacturer's directions and warnings; and (i) prescription medication, if stored on-site, is stored in original pharmacy packaging or individual pharmacy bubble pack together with the pharmacy label, directions, and warnings.						
R501-1-8(2) The licensee shall accommodate a client with physical disabilities as needed or appropriately refer to comparable services.						
R501-1-8(3) The licensee shall maintain medication and potentially hazardous items on-site lawfully, responsibly, and with consideration of the safety and risk level of the population served to include locked storage for each medication and hazardous chemical that is not in active use.						
R501-1-8(4) The licensee shall maintain a first aid kit that contains at least: (a) bandages of different sizes; (b) tweezers; (c) antiseptic; and (d) disposable sterile gloves.						
Residential Program Additional Facilities and Safety Requirements	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R501-1-9(1) A residential licensee shall ensure: (a) designated space is available for records, administrative work, & confidential phone calls for clients; (b) live-in staff have dedicated bedrooms & bathrooms separate from client use; (c) each bedroom designated for a client is comparable to other similarly utilized bedrooms with similar access, location, space, finishings, and furnishings; (d) clients are located in bedrooms; (e) a mirror or safety mirror is secured to each bathroom wall at a convenient height; (f) each bathroom is placed to allow access to each client without disturbing any other client during sleeping hours; (g) each bath or shower allows for individual privacy; (h) each client is supplied with hygiene supplies; (i) each sleeping area has a source of natural light and is ventilated by mechanical means or is equipped with a window that opens; (k) each client has a similar solid type of bed or sleeping equipment to any other client in the program; (m) there are separate containers for soiled & clean laundry, if the program provides common laundry for towels, bedding or clothing; (o) equipment and supplies for washing & drying laundry are provided, if the program permits clients to do their own laundry; (p) there is at least 60 sq ft per person in a multiple occupancy bedroom and 80 sq ft in a single occupant bedroom.						
R501-1-9(2) The licensee utilizing seclusion rooms shall ensure the following: (a) seclusion rooms measure a minimum of 75 sq ft and have a minimum ceiling height of 7 ft with no equipment, hardware or furnishings that obstruct staff's view of the client or present a hazard; (b) a seclusion room 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) a seclusion room 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; and (d) a bedroom may not be utilized as a seclusion room and a seclusion room may not be utilized as a bedroom.						
Food Service Requirements	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R501-1-10(2) A licensee that provides meals shall: (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; (c) establish and post kitchen rules and privileges in a kitchen according to client needs and safe food handling practices; and (f) provide adequate dining space for clients that is maintained in a clean and safe condition.						
Program Client Record Requirements	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R501-1-11(2) The licensee shall document a plan detailing how each program staff and client file is maintained and remains available to the office and other agencies legally authorized to access the files for seven years regardless of whether the program remains licensed.						

Rule Compliance, Penalties, Agency Action Reviews, and Appeals	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R380-600-8(11) Any owner identified in a license or certificate revocation action may not be approved for a license or certification of any other program or facility overseen by the office for five years from the date the revocation was made effective.						

Non-Residential General Provisions - Inspection Checklist
(Revised 12/2023)

C = Compliant

NC = Not Compliant

NA = Not Assessed during this inspection

New and Renewal Licensing Procedures	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R380-600-3(1) An applicant or provider may not accept any fee, enter into any agreement to provide a client service, or provide any client service until a license or certificate is approved by the office.						
R380-600-3(2) Each applicant and provider shall comply with any applicable administrative rule, statute, zoning, fire, safety, sanitation, building and licensing laws, regulations, ordinances, and codes of the city and county in that the facility or agency will be or is located.						
R380-600-3(3) An applicant or a provider shall permit the office to have immediate, unrestricted access to: (a) each site subject to licensing or certification; (b) any unaltered on and off-site program or facility and client records; and (c) each staff and client.						
R380-600-3(12) A provider approved by the office to certify their own program or facility sites shall register each certified site using the licensing provider portal.						
R380-600-3(14) The license or certificate holder shall adhere to any individualized parameter on a program or facility license or certificate to promote the health, safety, and welfare of any client. Parameters may include: (a) an age restriction; (b) an admission or placement restriction; or (c) adequate square footage to determine capacity.						
R380-600-3(23) Each license or certificate is not transferable.						
Variances	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R380-600-6(2) The provider may not deviate from any administrative rule before receiving written approval signed by the office director or the director's designee.						
R380-600-6(5) The provider shall sign the approved variance and comply with the terms of the written variance, including any conditions or modifications contained within the approved written variance.						
Inspection and Investigation Process	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R380-600-7(6) The provider shall ensure that the integrity of the office's information gathering process is not compromised by withholding or manipulating information or influencing any specific response of staff or clients.						
R380-600-7(7) The provider shall allow the office to access any program or facility record or staff at an administrative or certified location that is not located at the licensed site.						
R380-600-7(16) When a critical incident occurs under the direct responsibility and supervision of the program or facility, the licensee or certificate holder shall: (a) submit a report of the critical incident to the office in format required by the office within one business day of the critical incident occurring; (b) notify the legal guardian of each involved client within a 24-hour period from the time of the incident; (c) if the critical incident involves any client in the custody of the department or under contract with the department, notify the involved department division immediately; and (d) collect, maintain, and submit original witness statements and supporting documentation, including video footage if available, regarding each critical incident to the office upon request.						
Program Policies, Procedures, and Safe Practices	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R501-1-4(2) The licensee shall develop, implement, and comply with safe practices that: (a) ensure client health and safety; (b) ensure the needs of the client population served are met; (c) ensure none of the program practices conflict with any administrative rule or statute before implementation; and (d) inform staff of how to manage any unique circumstances regarding the specific site's physical facility, supervision, community safety, and mixing populations.						
R501-1-4(3) The licensee shall submit any change to an office approved policy or curriculum to the office for approval before implementing the proposed change.						
Program Administrative and Direct Service Requirements	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R501-1-6(1) The licensee shall clearly 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; (d) each program requirement and expectation; (e) a statement concerning behavior, diagnosis, situation, population, and age that can be safely served, including: (i) an outline of the behaviors and presenting issues that would be reason for discharge or exclusion from the program; and (ii) a statement that the program may not take placement of a child whose needs exceed the scope or ability of the program to reasonably manage; (f) each cost, fee, and expense for a service and refund policy; and (g) identification of each non-clinical, extracurricular, or supplemental service offered or referred.						
R501-1-6(2) The licensee shall post the following in conspicuous places where each visitor, staff, and client may view: (a) abuse reporting laws as described in Sections 80-2-609 and 26B-6-205; (b) civil rights notice; (c) Americans with Disabilities Act notice; (d) the program license; (e) any office notice of agency action; (f) a client rights poster in a residential setting except in a foster home or where prohibited by Settings Final Rule; and (g) department code of conduct poster.						
R501-1-6(3) The licensee shall maintain compliance with or documentation of an exemption from any of the following requirements: (b) capacity determinations that include each staff and client on premises and may not exceed the capacity limits placed by local authorities; (d) licensure and registration of any vehicles used to transport clients.						
R501-1-6(5) The licensee shall maintain and make the following available to the department upon request: (d) vehicle insurance						

R501-1-6(6) The licensee shall ensure: (b) current staff and client lists are available at each licensed site; (c) the organizational and governance structure of the program is available to the department upon request and 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 R380-600-3; (f) the licensee maintains an opioid overdose reversal kit on-site with on duty staff trained in its use if the licensee is serving, or is likely to serve, a client with a substance use disorder.						
R501-1-6(8) A licensee offering school on-site shall: (a) maintain the established staff to client ratio with behavioral intervention trained staff in the school setting; (c) ensure each client is taught at their appropriate grade level.						
R501-1-6(9) The licensee shall ensure clinical and medical staff are licensed or certified in good standing and any unlicensed staff are appropriately supervised as described in Title 58 Occupations & Professions						
R501-1-6(12) A licensee that provides behavior interventions to people with disabilities shall comply with Rule R539-4, which supersedes any conflicting rule under Title R501, for the disabled populations served.						
Program Physical Facilities and Safety	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R501-1-8(1) The licensee shall ensure: (a) the appearance & cleanliness of the building/grounds are maintained & free from health/fire hazards; (b) any appliances, plumbing, electrical, HVAC, and furnishings are maintained in operating order and in a clean and safe condition; (c) fire drills in non-outpatient programs are conducted at least quarterly and documented, including feedback regarding response time and process; (d) a phone that can be used to call 911 is always available on-site when clients are present; (e) bathroom facilities for staff and clients allow for individual privacy and afford reasonable accommodation based on gender identity; (f) each bathroom is properly equipped with toilet paper, paper towels or a dryer, and soap; (g) each bathroom is ventilated by mechanical means or equipped with a window that opens; (h) non-prescription medication, if stored on-site, is stored in original manufacturer's packaging together with the manufacturer's directions and warnings; and (i) prescription medication, if stored on-site, is stored in original pharmacy packaging or individual pharmacy bubble pack together with the pharmacy label, directions, and warnings.						
R501-1-8(2) The licensee shall accommodate a client with physical disabilities as needed or appropriately refer to comparable services.						
R501-1-8(3) The licensee shall maintain medication and potentially hazardous items on-site lawfully, responsibly, and with consideration of the safety and risk level of the population served to include locked storage for each medication and hazardous chemical that is not in active use.						
R501-1-8(4) The licensee shall maintain a first aid kit that contains at least: (a) bandages of different sizes; (b) tweezers; (c) antiseptic; and (d) disposable sterile gloves.						
Food Service Requirements	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R501-1-10(2) A licensee that provides meals shall: (a) ensure that meals are not used as incentive or punishment; (b) provide nutritional counseling to staff and clients; (c) designate staff responsible for food service who: (i) provide a meal to a client with special nutritional needs; and (ii) 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; (d) 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 are: (i) served from dietitian or nutritionist approved menus; or (ii) for programs serving individuals experiencing homelessness, serve meals as required by USDA standard homeless settings; (e) establish and post kitchen rules and privileges in a kitchen according to client needs and safe food handling practices; and (f) provide adequate dining space for clients that is maintained in a clean and safe condition.						
R501-1-10(3) A licensee that allows self-serve meals shall ensure that self-serve kitchen users are supervised, directed, and trained by a staff that has a food handler's permit or is trained by Serv-Safe, USDA, or a comparable program.						
R501-1-10(4) A licensee that serves parents and their children may allow a consenting adult client to maintain full responsibility for their, and their child's, special dietary needs, if consent is maintained in writing in the client record.						
R501-1-10(5) A licensee that offers meals for clients shall ensure there is documented training confirming staff are trained to and adhere to the following safe practices: (a) how to identify and accommodate clients with special dietary needs; and (b) allowances for nutritious snacks to be available during restricted hours if the program restricts access to food and kitchen equipment.						
R501-1-10(6) If meals are prepared by clients, the licensee shall inform staff and clients in writing of the following: (a) rules and privileges of kitchen use; (b) menu planning and procedures; (c) meal safety; (d) nutrition and sanitation requirements; (e) schedule of responsibilities; and (f) shopping and storage responsibilities.						
Program Client Record Requirements	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes

R501-1-11(1) The licensee shall maintain client information to include the following: (a) client name, address, email address, phone number, 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 that serves 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) client 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 in treatment services; (m) any grievance or complaint made by or against the client and actions taken by the program; (n) any crisis intervention or critical incident report involving the client; and (o) any signed agreement and consent form.					
Program Intake and Discharge Requirements	C	NC	NA	Date to be corrected by	Corrected During Inspection
R501-1-12(1) The licensee shall complete an intake screening before accepting a client into the program that includes at least: (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; and (d) suicide risk screening.					
R501-1-12(2) A licensee 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.					
R501-1-12(3) A licensee serving incarcerated or court-mandated justice involved clients shall: (a) conduct a criminogenic risk assessment; (b) separate high and low criminogenic risk populations.					
R501-1-12(4) The licensee shall ensure that , the client, parent, or guardian signs and receives copies of the following agreements to be maintained as client records: (a) determination of eligibility; (b) fee agreement outlining costs of services including program, client, parent, or guardian responsibility for payment; and (c) 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.					
R501-1-12(5) The licensee shall ensure that a discharge plan identifies resources available to a client and includes: (a) reason for discharge or transfer; (b) aftercare plan; (c) summary of services provided; and (d) progress evaluation.					
Program Clinical Services	C	NC	NA	Date to be corrected by	Corrected During Inspection
R501-1-14(1) A licensee that offers clinical treatment shall: (a) assign a clinical director to ensure that assessment, treatment, and service planning practices are: (i) regularly reviewed and updated; (ii) individualized; and (iii) discharge plan includes the participation of each client or each client's parent or guardian; (b) ensure each person working directly with a client is informed of the client's individual treatment needs and advised of the best approach to working with that client; (c) ensure client treatment plans are developed and signed by a licensed clinical professional within 30 days of admission; (d) ensure discharge goals are identified in the initial treatment plan and treatment goals are structured around the identified discharge goals and objectives; (e) ensure that each client identified for treatment receives individual treatment at least weekly; and (f) ensure any missing individual weekly treatment is justified, approved, and documented by the clinical director.					
R501-1-14(2)(a) A residential program licensee shall ensure that in addition to the required weekly individual therapy, frequency and need for family and group therapy and other clinical services are addressed in the individual's treatment plan. (b) A non-residential program licensee who offers clinical treatment may alter the weekly therapy requirement as designated in the individual's treatment plan.					
R501-1-14(4) A licensee who offers group counseling, family counseling, skills development, or other treatment shall offer and document these treatment services as prescribed in the treatment plan.					
R501-1-14(5) The licensee shall make any records available to the department for review upon request.					
Program Staffing	C	NC	NA	Date to be corrected by	Corrected During Inspection
R501-1-15(1) The licensee shall ensure adequate staffing to safely supervise the current population, including adding more staff than required by the usual staffing ratio as needed to manage behaviors, dynamics, and individual client treatment and supervision needs.					
R501-1-15(2) The licensee shall identify a manager or qualified designee who is immediately available when the program is in operation or there is a qualified and trained substitute when the manager is absent or unavailable.					
R501-1-15(3) A licensee 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.					
R501-1-15(4) The licensee shall ensure that before allowing a direct care staff to work unsupervised they have an approved background clearance except as excluded in Section R501-14-17;					
R501-1-15(5) A licensee who serves clients with substance use disorder shall ensure each staff is screened for tuberculosis.					
R501-1-15(6) A licensee who serves a client with substance use disorder may not offer, entice, refer, or recommend medical cannabis as treatment for substance use disorder.					

R501-1-15(7) A licensee who manages, stores, or administers client medication shall identify a medical professional to oversee the medication management, medication oversight, and staff training regarding medication management and administration.						
R501-1-15(8) The licensee shall ensure that each person involved with the prescription, administration, or dispensing of controlled substances maintains appropriate medical or pharmacy licenses and DEA registration numbers as described in the 21 CFR Part 1301.						
R501-1-15(9) The licensee shall create and maintain personnel information for each staff member, contracted employee, and volunteer.						
R501-1-15(10) The licensee shall ensure that personnel information includes: <ul style="list-style-type: none"> (a) any applicable qualification, experience, certification, or license; (b) any approved and current office background clearance, except as excluded in Rule R501-14; (c) a provider code of conduct that is signed by the staff member, contracted employee, or volunteer; (d) any pre-service and annual training records with the date completed, topic, and the individual's signed acknowledgment of training completion; (e) any grievances or complaints made by or against the individual and actions taken by the program; & (f) each crisis intervention or critical incident report involving the individual. 						
R501-1-15(11) The licensee shall ensure that at least one CPR and First Aid-certified staff member is available when staff and clients are present unless a currently licensed healthcare professional is present.						
Personnel Training Requirements	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R501-1-16(1) The licensee shall ensure that each staff receives pre-serving training on the following topics before being left unsupervised and within 90-days of hire: <ul style="list-style-type: none"> (a) program policies, procedures, and safe practices as outlined in Section R501-1-5; (b) program emergency preparedness, response, and recovery plan, including at least: <ul style="list-style-type: none"> (i) 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; and (ii) instructions to staff regarding how to report and respond to significant criminal activity and significant medical emergencies; (c) CPR and First Aid; (d) client eligibility, emphasizing the behaviors and circumstances the program can safely manage; (e) staff involvement and responsibility in the intake, discharge, and unplanned discharge processes; (f) client rights; (g) supervision and ratios; (h) as applicable, medications management, storing, and administration; (i) as applicable, food handling as outlined in Subsection R501-1-10(3); (j) background checks; (k) prevention, signs, and symptoms of abuse and neglect, including sexual abuse, and legal reporting requirements; (l) provider code of conduct as outlined in Rule 380-80; (m) non-discrimination policy in accordance with Section 268-2-109 that includes a prohibition of abuse, discrimination, and harassment based on sex, gender identity, or sexual orientation; (n) staff and client grievance procedures; (o) crisis intervention; (p) appropriate use of restraint and sedation; (q) appropriate documentation; (r) appropriate searches; (s) appropriate and inappropriate behaviors of clients; (t) appropriate and inappropriate staff responses to client behaviors; and (u) if applicable, staff response to a client leaving a program without permission. 						
R501-1-16(2) The licensee shall ensure each staff completes the following training topics each year, based on the program's license date: <ul style="list-style-type: none"> (a) program policies, procedures and safe practices as outlined in Section R501-1-4; (b) general provisions and applicable categorical licensing rule; (c) client eligibility, as outlined in Subsection R501-1-6(1)(e), emphasizing the behaviors and circumstances the program can safely manage; (d) staff involvement and responsibility in the intake, discharge, and unplanned discharge processes; (e) provider code of conduct as outlined in Rule R380-80; (f) 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; (g) 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; (h) program rules regarding firearms that does not conflict with constitutional or statutory rights regarding concealed weapons permits as described in Title 59, Chapter 5, Part 7, Concealed Firearms Act; (i) smoking rules in accordance with Title 26B, Chapter 7, Part 5, Regulation of Smoking, Tobacco Products, and Nicotine Products; (j) how to manage clients who screen with elevated suicide risk levels; (k) general incident reporting; (l) prevention, signs, and symptoms of abuse and neglect, including sexual abuse, and legal reporting requirements; (m) CPR and first aid; (n) if storing and administering medications, training required to administer medication and the process to be followed. 						

Day Treatment Programs - Inspection Checklist (Revised 12/2023)						
C = Compliant NC = Not Compliant NA = Not Assessed during this inspection						
Administration and Direct Service	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R501-20-4(1) In addition to the following rules, each day treatment licensee shall comply with Rules R501-1 and R501-14.						
R501-20-4(2) Non-residential licensees may meet less frequently than weekly only with individualized justification in the client record.						
R501-20-4(3) A licensee shall: <ul style="list-style-type: none"> (a) ensure that activity plans are prepared to meet individual client needs or link to applicable resources in the community; (b) design and implement a daily activity or service schedule based on client needs and not staff convenience; (c) ensure clients are supervised onsite and encouraged to participate in activities; and (d) ensure all clients are given the same quality of care. 						
R501-20-4(4) Except as outlined in Subsections R501-20-6(2) and R501-20-7(3), a licensee shall ensure that the minimum staffing ratio is one direct care staff to ten clients at all times.						
R501-20-4(5) Day treatment or day support services may not be offered within a residential setting unless: <ul style="list-style-type: none"> (a) each resident is a recipient of the day support services; or (b) the residential setting has a current residential treatment license. 						
R501-20-4(6) A licensee who utilizes restraints shall report each incident of restraint resulting in injury beyond basic first aid to the office as a critical incident.						
Physical Facility	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R501-20-5(1) Except as outlined in Subsection R501-20-6(3), a licensee shall ensure that the facility has a minimum of 50 square feet of floor space per client designated specifically for day treatment services. Hallways, office, storage, kitchens, and bathrooms may not be included in computation.						
R501-20-5(2) A licensee shall ensure that outdoor recreational space and compatible recreational equipment are available when necessary to meet treatment plans.						
Additional Considerations for Professional Licensees Providing ABA Day Treatment Services	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R501-20-6(1) An ABA licensee shall additionally adhere to Rule R539-4, if contracted for providing services to DSPD clients.						
R501-20-6(2) A licensee shall ensure that behavior support plans outline individual behaviors and staff responses to them.						
R501-20-6(3) The licensee shall submit a critical incident to the office for: <ul style="list-style-type: none"> (a) any self-directed violence not identified in the behavior support plan; and (b) any staff responses outside of the behavior support plan. 						
Additional Considerations for Licensees Providing Clubhouse Day Treatment Services	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R501-20-7(1) This section of rule supersedes any conflicting requirements of Rules R501-1 and R501-20.						
R501-20-7(2)(a) A clubhouse licensee accredited by Clubhouse International may apply a staff to client ratio of 1 staff to 15 clients in accordance with national standards. <ul style="list-style-type: none"> (b) A clubhouse licensee may apply the higher ratio only for specialized activities involving transports or for clients and their guests when: <ul style="list-style-type: none"> (i) staff and client safety has been assessed; and (ii) there is identified back-up for the staff in case of emergency. 						
R501-20-7(3) Square footage calculations in a clubhouse may include hallways, office, storage, kitchens, and bathrooms.						
R501-20-7(4) A clubhouse licensee may offer clients the option to bring their own food or purchase meals or snacks at a reduced rate.						
R501-20-7(5) A clubhouse licensee may allow clients cleaning chemicals as part of their work-ordered day. Clubhouse staff shall follow suicide prevention policy and safety protocols when assessing and allowing client access to chemicals.						
R501-20-7(6) Visitors to the clubhouse may only be exempt from background clearance in accordance with Subsection 26B-2-120(10).						
Additional Considerations for DSPD Home and Community Based Medicaid Waiver Licensees	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R501-20-8(1) This section of rule supersedes any conflicting requirements of Rules R501-1 & R501-20						
R501-20-8(2) A licensee serving clients of DSPD shall ensure staff to client ratios are determined by the DSPD worksheet and are individualized based on the person's need.						
R501-20-8(3) A licensee shall ensure a ratio of one staff to six persons is maintained at all times.						
R501-20-8(4) A licensee serving Home and Community Based Services (HCBS) Medicaid Waiver clients shall: <ul style="list-style-type: none"> (a) identify themselves as a Waiver provider on their licensing application and follow all attestation and survey requirements therein; (b) comply with the HCBS Settings rule and Rule R414-519 to include: <ul style="list-style-type: none"> (i) ensuring non-segregated bathrooms; (ii) providing individually stalled bathrooms with locking capability with only trained and authorized staff having access to keys for safety; (iii) ensuring the setting is fully accessible and affords access to the community; (iv) ensuring client information is not posted or stored in public spaces; (v) not restricting client access to food unless documented in the person-centered service plan or behavior support plan; (vi) allowing clients individual initiative, autonomy, independence and choices in regard to their daily activities, physical environment and with whom they interact as much as safely possible; and (vii) supervising clients and maintaining supporting documentation according to the person-centered service plan or behavior support plan; and (c) when there is a conflict between a rule under Title R501 and Settings rule, Settings rule shall supersede. 						

R501-20-B(5) A licensee shall identify any community-based supports provided under the day treatment license and ensure that community-based services are provided safely and in consideration of weather, transportation, emergencies and overall client needs for food, medicine and any other assistance necessary for safe participation in the program.						
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Outpatient Treatment Programs - Inspection Checklist
(Revised 12/2023)

C = Compliant

NC = Not Compliant

NA = Not Assessed during this inspection

Administration and Direct Services	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R501-21-4(2). Programs shall have current program information readily available to the Office and the public, including a description of: (a) program services; (b) the client population served; (c) program requirements and expectations; (d) information regarding any non-clinical services offered; (e) costs, fees, and expenses that may be assessed, including any non-refundable costs, fees or expenses; and (f) complaint reporting and resolution processes.						
R501-21-4(3). The Program shall: (e) disclose any potential conflicts of interest to the Office						
R501-21-4(8). Programs shall maintain documentation of all critical incidents; critical incident reports shall contain: (a) time of incident; (b) summary of incident; (c) individuals involved; and (d) program response to the incident.						
Physical Facility	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R501-21-5(1). Space shall be adequate to meet service needs and ensure client confidentiality and comfort.						
R501-21-5(2). The program shall maintain potentially hazardous items on-site lawfully, responsibly and with consideration of the safety and risk level of the population(s) served.						
R501-21-5(4). Programs offering supplemental services or activities in addition to outpatient treatment shall: (a) remain publicly transparent in the use of the equipment, practices and purposes; (b) ensure the health and safety of the consumer; (c) obtain informed consent for participation in supplemental services or activities; and (d) provide verification of all trainings or certifications as required for the operation and use of any supplemental equipment.						
R501-21-5(6). The program site shall provide access to a toilet and lavatory sink in a manner that ensures basic privacy, and shall be: (a) stocked with toilet paper, soap, and paper towels/dryer; and (b) maintained in good operating order and kept in a clean and safe condition.						
R501-21-5(7). The program shall ensure that the physical environment is safe for consumers and staff and that the appearance and cleanliness of the building and grounds are maintained.						
Substance Use Disorder Treatment Programs	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R501-21-6(1). All substance use disorder treatment programs shall develop and implement a plan on how to support opioid overdose reversal.						
R501-21-6(2). Maintain proof of completion of the National Survey of Substance Abuse Treatment Services (NSSATS) annually.						
R501-21-6(3). Medication-assisted treatment (MAT) in substance use disorder programs shall: (a) maintain a program-wide counselor to MAT consumer ratio of: 1:50; (b) assure all consumers see a licensed practitioner that is authorized to prescribe controlled substances at least once yearly; (c) show proof of completion of federally required physician training for physicians prescribing buprenorphine; (d) admit consumers to the program and prescribe, administer or dispense medications only after the completion of a face-to-face visit with a licensed practitioner having authority to prescribe controlled substances who confirms opioid dependence. A licensed practitioner having authority to prescribe controlled substances must approve every subsequent dose increase prior to the change; (e) require all consumers admitted to the program to participate in random drug testing. Drug testing will be performed by the program a minimum of 2x per month for the first 3 months of treatment, and monthly thereafter; except for a consumer whose documented lack of progress shall require more frequent drug testing for a longer period of time; (f) require all consumers admitted to the program to attend 1 counseling session per week for the first 90 days. Upon documented successful completion of this phase of treatment, consumers shall be required to participate in counseling sessions at least 2x monthly for the next 6 months. Upon documented successful completion of 9 months of treatment, consumers shall be seen by a licensed counselor at least monthly thereafter until discharge; and (g) require 1 hour of prescribing practitioner time at the program site each month for every 10 MAT consumers enrolled.						
R501-21-6(4). MAT Programs prescribing, administering or dispensing Methadone (Opioid Treatment Programs) shall: (a) obtain Substance Abuse and Mental Health Services Administration (SAMHSA) certification and accreditation as an opioid treatment program; (b) comply with DSAMH Rule R523-10 Governing Methadone and other opioid treatment service providers; (c) employ a: (i) licensed physician who is an American Society of Addiction Medicine certified physician; or (ii) prescribing licensed practitioner who can document specific training in current industry standards regarding methadone treatment for opioid addictions; (iii) prescribing licensed practitioner who can document specific training or experience in methadone treatment for opioid addictions; and (d) provide one nurse to dispense or administer medications for every 150 Methadone consumers dosing on an average daily basis.						
R501-21-6(5). Certified DUI Education Programs (a) Only programs certified with the Division of Substance Abuse and Mental Health (DSAMH) to provide Prime for Life education in accordance with R523-11 shall provide court ordered DUI education. (b) Certified DUI education programs shall: (i) conduct and maintain a mandatory screening for each participant prior to providing the education course; (ii) screenings may be shared between providers with client written consent; (iii) provide a workbook to each participant to keep upon completion of the course; (iii) ensure at least 16 hours of course education; and (iv) provide separate classes for adults and youth. (c) Any violations of this rule section will be reported to DSAMH for evaluation of certification.						

Domestic Violence	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R501-21-7(1). Domestic Violence (DV) treatment programs shall comply with generally accepted and current practices in domestic violence treatment, and shall meet the following requirements: (a) maintain and document cooperative working relationships with domestic violence shelters, treatment programs, referring agencies, custodial parents when the consumer is a minor, and local domestic violence coalitions; (i) treatment sessions for children and victims shall offer a minimum of ten sessions for each consumer, not including intake or orientation sessions; (b) if the consumer is a perpetrator, program contact with the victims, current partner, and the criminal justice referring agencies is also required, as appropriate; (ii) In accordance with UCA50-60-102(5), a Licensed Mental Health Therapist shall complete a domestic violence treatment evaluation for each offender to include individualized recommendations for the offender's treatment.						
R501-21-7(2). Staff to Consumer Ratio (a) The staff to consumer ratio in adult treatment groups shall be one staff to eight consumers, for a one hour long group; or one staff to ten consumers for an hour and a half long group. The maximum group size shall not exceed 16. (b) Child victim, or child witness groups shall have a ratio of one staff to eight children, when the consumers are under 12 years of age; and a ratio of one staff to ten children when the consumers are 12 years of age and older.						
R501-21-7(3). Client Intake and Safety (a) When a consumer enters a treatment program, the staff shall conduct an in-depth, face-to-face interview and assessment to determine the consumer's clinical profile and treatment needs. The evaluation in R501-23-7 shall count for this assessment when the consumer is an offender. (b) For perpetrator consumers, add'l info shall be obtained from the police incident report, perpetrator's criminal history, prior treatment providers, the victim, or victim advocate. (c) When appropriate, add'l info for child consumers shall be obtained from parents, prior treatment providers, schools, and Child Protective Services. (d) If information on the consumer cannot be obtained, the reason shall be documented. (e) The assessment shall include the following: (i) a profile of the frequency, severity, and duration of the domestic violence behavior, which includes a summary of psychological violence; (ii) documentation of homicidal, suicidal ideation/intentions, & abusive behavior towards children; (iii) a clinical diagnosis and a referral for evaluation to determine need for medication, if indicated; (iv) documentation of safety planning when the consumer is an adult victim, child victim, or child witness; and that they have contact with the perpetrator; (A) for victims who choose not to become treatment consumers, safety planning shall be addressed when they are contacted; and (V) documentation that appropriate measures have been taken to protect children from harm.						
R501-21-7(4). Treatment Procedures (a) Consumers deemed appropriate for a DV treatment program shall have an individualized treatment plan, which addresses all relevant treatment issues. (b) Consumers who are not deemed appropriate for DV programs shall be referred to the appropriate resource, w/referral reasons documented, & notification given to the referring agency. (c) DV counseling shall be provided concurrently with, or after other needed tx, when appropriate. (d) Conjoint or parallel sessions w/victims & perpetrators together, or with both co-perpetrators, shall not be provided until a comprehensive assessment has been completed to determine that the violence has stopped, & that conjoint treatment is appropriate. (e) The perpetrator must complete a minimum of 4 DV treatment sessions, unless otherwise noted in the offender evaluation recommendations prior to the provider implementing conjoint therapy. (f) A written procedure shall be implemented to facilitate the following, in an efficient & timely manner: (i) entry of the court ordered defendant into treatment; (ii) notification of consumer compliance, participation, or completion; (iii) identification of non-compliant consumers; (iv) notification of the occurrence of violence; and (v) identification of factors which may exacerbate an individual's potential for violence. (g) The program shall comply with the "Duty to Warn," Section 78B-3-502. (h) The program shall document specialized training in DV assessment & treatment practices, including 24 hrs of Utah Association for Domestic Violence Treatment (UADVT) pre-service training, within the last 2 years; & 16 hrs annual training thereafter for all individuals providing treatment service. (i) Clinical supervision for treatment staff that are not clinically licensed shall consist of a minimum of 1 hour per week to discuss clinical dynamics of cases.						
R501-21-7(5). Training (a) Training that is documented and approved by the designated Utah DHS DV Specialist Regarding assessment and treatment practices for treating: (i) DV victims; and (ii) DV perpetrators.						
R501-21-7(6). Programs must disclose all current DHSS contracts and actions against the contract to the Office.						
R501-21-7(7). Programs must disclose all current Accreditations and actions against accredited status to the Office.						

Outdoor Youth Program - Inspection Checklist (Revised 12/2023)						
C = Compliant NC = Not Compliant NA = Not Assessed during this inspection						
Administration	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R501-8-3(1) Each outdoor youth program shall provide an educational component as determined by the Utah State Board of Education for clients 18 years of age or younger who have been removed from their educational opportunities for more than one month. The administrators of the program shall meet and document cooperation with the State Board of Education.						
Program Requirements	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R501-8-4(4). Each client has clothing and equipment to protect them from the environment. This equipment is never be removed, denied, or made unavailable.						
R501-8-4(5). During an expedition, if a client refuses or cannot hike or to carry the client's equipment, the group ceases hiking. The program establishes, documents, and resolves the reasons for the client's refusal or inability to continue before hiking continues.						
R501-8-4(6). Deprivation of essential equipment or items is not used as a consequence.						
R501-8-4(7). The program conducts an individual assessment of each client's recommended backpack weight. Each backpack weight guideline may not exceed 20 % of the client's body weight. If a client is required to carry other items, the total weight carried must not exceed 30 % of the client's body weight unless individually documented with parental permission to exceed this ratio.						
R501-8-4(8). The program provides clients with clean clothing at least weekly and provides a means for each client to bathe or otherwise clean the client's body at least twice weekly.						
R501-8-4(9). Hiking does not exceed the physical capability of the weakest member of the group. Hiking is prohibited at temperatures above 90 degrees F. or at temperatures below ten degrees F.						
R501-8-4(10). A field staff in each group carries a means to accurately measure and display the current temperature.						
R501-8-4(11). Each expedition plan including map routes, anticipated schedules, and times is carried by the field staff and recorded in the field office.						
R501-8-4(12). A field staff in each group maintains a signed daily log or dictates a recorded log to be transcribed and signed immediately following termination of the activity to contain the following information: (a) each critical incident; (b) prescription compliance; (c) each medical concern; (d) each behavioral concern or refusal to hike and how the concern is addressed; (e) each unusual occurrence; and (f) each log entry that is recorded is in an un-editable format and remains available to the office upon request.						
R501-8-4(13). Each program staff is required to carry an accurate, reliable time piece accurately reflecting the time of day and for documentation purposes in log notes and incident reports.						
R501-8-4(14). Program administration trains each staff regarding the standards of this section and regularly monitors and ensures compliance.						
Staff, Interns, and Volunteers	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R501-8-5(1). The outdoor youth program has a governing body and an executive director who has responsibility and authority over the policies and activities of the program and coordinates office and support services and training. The executive director has the following qualifications: (a) be at least 21 years of age; (b) have a bachelor's degree or equal training and experience in a related field; (c) have at least two years of outdoor youth program administrative experience; (d) have at least 30 credit hours education in recreational therapy or related experience or one-year outdoor youth program field experience; (e) demonstrate knowledge and understanding of relevant licensing rules; and (f) have completed each required staff training.						
R501-8-5(2). The outdoor youth program has a direct care field director who has primary responsibility for coordinating field operations, managing field staff, operating the field office, and supervising emergency response procedures.						
R501-8-5(3). A field director or a qualified designee must: (a) be trained as a direct care staff in accordance with Section R501-1-14; (b) be at least 21 years of age; (c) have a bachelor's degree or equal training and experience in a related field; (d) have at least two years of outdoor youth program field experience; (d) visit in the field at least two days a week with no more than five days between visits; and (e) document each field visit, including: (i) the condition of each client; (ii) interactions with clients and staff; (iii) incidents and corrections to be reported to each client's guardian and the office; (iv) each report of compliance with Subsection 62A-2-123(6) regarding weekly confidential communication with family; and (v) staff compliance with each policy and rule.						
R501-8-5(4). The outdoor youth program has field support staff to be responsible for delivering supplies and mail to the field, communication with each client in the field, and first aid support.						
R501-8-5(5). Each outdoor youth program group has direct care senior field staff working directly with the clients and who meet the following qualifications: (a) be trained as a direct care staff in accordance with Section R501-1-14; (b) be at least 21 years of age; (c) have an associate's degree or high school diploma with 30 credit hours of education and training or comparable experience and training in a related field; and (d) have six months outdoor youth program field experience or comparable experience which shall be documented in the individual's personnel file.						
R501-8-5(6). The outdoor youth program has direct care field staff working directly with the clients and meet the following qualifications: (a) be at least 20 years of age; (b) have a high school diploma or equivalent; (c) have 48 field-days of outdoor youth program experience or comparable experience which shall be documented in the individual's personnel file; and (d) exhibit skilled leadership.						

R501-B-5(7). The outdoor youth program has direct care assistant field staff as required to meet or exceed staff to client ratios. Assistant field staff meet the following qualifications: (a) be at least 19 years of age; (b) have a high school diploma or equivalent; (c) have 24 field days of outdoor youth programs experience; and (d) exhibit skilled leadership.						
R501-B-5(8). The outdoor youth program has a licensed physician and mental health professional accessible to each client.						
R501-B-5(9). If the outdoor youth program has interns or volunteers who are learning the program practices while completing educational requirements: (a) Each intern must be at least 19 years of age. (b) Each volunteer must be at least 18 years of age. (c) Staff training must be completed by each incoming staff including interns and volunteers regardless of background experience. (d) Each volunteer and intern must be supervised by the clinical director, program administration, or senior direct care staff. (e) Each intern and volunteer may never directly supervise a client.						
Client Supervision and Ratios	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R501-B-6(1). Each youth group is directly supervised by at least two direct care staff, one of which is a direct care senior field staff.						
R501-B-6(2). Each field group does not exceed 16 people with a ratio of at least one staff per four clients. Staff counts towards the field group size.						
R501-B-6(3). Each volunteer is counted as a client in figuring staff to client ratios.						
R501-B-6(4). Field group size does not exceed the number specified by federal, state, or local agencies in whose jurisdiction the program is operated.						
Staff Training	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R501-B-7(1). The outdoor youth program provides at least 80 hours initial staff training.						
R501-B-7(2). Initial staff training is not considered completed until the staff have demonstrated to the field director proficiency in each of the following areas: (a) counseling, teaching and supervisory skills; (b) water, food, and shelter procurement, preparation, and conservation; (c) low impact wilderness expedition and environmental conservation skills and procedures; (d) client management, including containment, control, safety, conflict resolution, and behavior management; (e) instruction in safety procedures and safe equipment use, fuel, fire, life protection, & related tools; (f) navigation skills, including map and compass use and contour and celestial navigation; (g) sanitation procedures, water, trash, human waste, food handling; (h) wilderness medicine, including health issues related to acclimation, exposure to the environment, and anaphylaxis; (i) CPR, standard first aid, first aid kit contents and use, and the program's medication management policy and procedure; (j) navigation skills, including map and compass use and contour and celestial navigation; (k) local environmental precautions, including terrain, weather, spiders, ticks, scorpions, snakes, insects, predatory animals, poison ivy plants, hypothermia, heat exhaustion, dehydration, responses to adverse situations, and emergency evacuation; (l) leadership and judgment; (m) report writing, including required development and maintenance of logs; and (n) federal, state, and local regulations.						
R501-B-7(3). At least 80 hours of initial staff training is completed, documented, and maintained in each staff personnel file.						
R501-B-7(4). The field director or equally qualified designee documents in each personnel file how the field director or qualified designee determined that each staff has demonstrated proficiency in each of the required topic areas as listed in Subsection (2) of this section.						
R501-B-7(5). Each initial staff training and demonstration of proficiency is completed and documented before the staff may count in the staff client ratio.						
R501-B-7(6). The program provides and documents on-going staff training to improve proficiency in knowledge and skills and to maintain certifications.						
Staff Health Requirements	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R501-B-8(1). Before engaging in any field activity, each staff adheres to the following: (a) each staff, intern, and volunteer has an annual physical examination and health history signed by a licensed medical professional; (b) a recognized physical stress assessment is completed as part of the physical examination of each staff; (c) the physical examination of each staff is reviewed and maintained by the provider in the staff personnel file; and (d) each program staff, intern, and volunteer submits to drug and alcohol screening upon request.						
Client Admission Requirements	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R501-B-9(1). Clients are no younger than 13 years of age and no older than 17 years of age and have a current health history report which includes notation of client physical limitations and prescriptive medications.						
R501-B-9(2). The health history report is completed, submitted, and verified by each client's parent or guardian as part of the intake screening or assessment in accordance with Sections R501-1-18 and R501-1-23 and before entry into the field.						
R501-B-9(3). An admissions assessment is conducted by a treatment professional before each client enters into the field and includes the following: (a) a review of each client's social and psychological history with the client's parent or legal guardian before enrollment; and (b) an interview with the client before entrance into the field program.						

R501-B-9(4). Before entry into the field and within 15 days of admission to the program, the following requirements are met: (a) a licensed medical professional must review each client's health history report and conduct a physical examination; and (b) the program provides a physical examination form to a licensed medical professional that clearly states a description of the physical demands and environment of the program, and requires the following information before a client may enter the field: (i) a urinalysis drug screen; (ii) a complete blood count (CBC) unless waived in writing by the client's parent or guardian; (iii) a complete metabolic profile (CMP) unless waived in writing by the client's parent or guardian; (iv) a urinalysis for possible infections; (v) a pregnancy test; (vi) a physical status assessment; (vii) a physical examination by the physician if detoxification is indicated for client before entrance into field portion of the program; (viii) any other tests as necessary to assess fitness for the field portion of the program; and (ix) a medical professional shall review current and historical medical data and approve the client to enter the field with recommendations for any medical monitoring.						
R501-B-9(5). A copy of each client's medical forms and approvals are maintained at the field office and another copy is carried by staff members in a waterproof container throughout the field expedition.						
R501-B-9(6). The program clinically reviews each client's psychological history and conducts an additional psychological assessment as clinically necessary before the client's entry into the field.						
R501-B-9(7). Upon admission and for a period of no fewer than three days in the field, direct care field staff closely monitor each client for any health problems that may be a result of hiking or living outdoors.						
Water and Nutritional Requirements	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R501-B-10(1). At least six quarts of potable water are available per person per day, plus one additional quart per person for each five miles hiked. Although it is not required that the entire amount be hand carried, water is always accessible during hiking.						
R501-B-10(2). In temperatures above 90 degrees F., staff make sure each client's fluid intake is at least three quarts of water per day.						
R501-B-10(3). Each field group in the field always has electrolyte replacement available.						
R501-B-10(4). In temperatures above 80 degrees F., water is available for coating each client's body, and other techniques are available for cooling as needed.						
R501-B-10(5). Portable water is available at each campsite. Water cache location information is verified with field staff before the group leaves camp each day.						
R501-B-10(6). No expedition group depends on aerial drops for water. Aerial water drops are used for emergency situations only.						
R501-B-10(7). Water from natural sources is made safe to drink through boiling, filtering, or disinfection in accordance with the center for disease control guidance.						
R501-B-10(8). The outdoor youth program has a written menu describing food supplied to the client which provides at least 3,000 calories per day while in the field. There are fresh fruit and vegetables available at least twice a week. Food is never withheld from a client for any reason. If no fire is available, other food of equal caloric value, which does not require cooking, is available. (a) The menu is adjusted to increase minimum dietary needs as energy expenditure, including exercise and climate concerns, increases. (b) Food is from a balance of the food groups. (c) Forage items do not count toward the determination of caloric intake. (d) Multiple vitamin supplements are offered daily.						
Health Care	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R501-B-11(1). The outdoor youth program provides first aid treatment promptly.						
R501-B-11(2). When a client has an illness or physical complaint that does not respond to or cannot be treated by standard first aid, the program immediately arranges for the client to be seen and treated as indicated by a licensed medical professional.						
R501-B-11(3). Each client's physical condition is assessed at least every 14 days by a qualified medical professional. Blood pressure, heart rate, allergies, and general physical condition are checked and documented. Any assessment concerns are documented, and the client is taken to the appropriate medical professional for treatment. There are no consequences issued to a client for requesting to see a healthcare professional or for anything said to a health care professional.						
R501-B-11(4). Each prescription and over the counter medication is kept in the secure possession of designated staff and provided to clients in accordance with labels or prescription directions.						
R501-B-11(5). Staff are trained for medication administration in accordance with Rule R501-1 and communicate with the field director and document reason and plan for any lost or missing prescription medication.						
R501-B-11(6). A foot check is conducted at least twice daily and documented.						
Safety	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R501-B-12(1). Each first aid kits includes sufficient supplies for the activity, location, and environment as approved by the program's medical professional. First aid kit supplies are available during each field activity.						
R501-B-12(2). Each outdoor youth program has a support system that meets the following criteria: (a) reliable daily two-way radio communications between groups and with support staff, with additional charged battery pack as a minimum of four hours of talk time in case of battery failure; (b) the support vehicles and field office are equipped with first aid equipment; (c) the support and field staff have access to contact information including telephone numbers, locations, contact personnel, maps, medical forms, and procedures for an emergency evacuation or field incident; and (d) daily morning and evening contacts are completed between field staff, support staff, and the field office and contacts are documented in the field office log daily.						
Field Office	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R501-B-13(1). The program maintains a field office.						
R501-B-13(2). Communication systems between the field and the field office are monitored 24 hours a day when clients are in the field.						
R501-B-13(3). Support staff respond immediately to any emergency situation.						
R501-B-13(4). Support staff on duty are within one hour of any field group.						

R501-8-13(5). When staff are not present in the field office a contact telephone number is posted on the field office door and the field director designates responsible on-call staff who continually monitors communications and remains available and able to access all necessary equipment and files within 15 minutes.						
R501-8-13(6). Field office staff adhere to the following: (a) maintain current staff and client records in accordance with Rule R501-1; (b) maintain a master map of each activity area; (c) maintain copies of each expeditionary route with its schedule and itinerary to be immediately available to the office and emergency services, law enforcement or search and rescue agencies as needed; (d) maintain a log of daily communications; (e) be responsible for training and orientation, management of field personnel, related files, and records; and (f) be responsible for maintaining communications, inspecting equipment, and overseeing medical incidents.						
Environmental Requirements	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R501-8-14(1). The outdoor youth program adheres to land use agency requirements including sanitation and low impact camping.						
R501-8-14(2). Each client is continuously supervised in the observance of low impact camping requirements.						
R501-8-14(3). Personal hygiene supplies are of biodegradable materials or packed out and properly disposed of.						
Evaluation	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R501-8-15(1). Following the wilderness experience, each client receives a debriefing to include a written summary of the client's participation and the progress the client achieved.						
R501-8-15(2). Each guardian, client, or other involved individuals are provided the opportunity and be encouraged to submit a written evaluation of the wilderness experience, which is retained by the program in the client file record.						
Individual Experiences	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R501-8-16(1). If an outdoor youth program conducts an individual component for clients as part of the program, the program has and follows written policies and procedures, which include the following: (a) an assessment of each client's ability to safely participate in the experience; (b) a description of the individual component to ensure that each client is not exposed to an unreasonable risk; (c) guardian permission for the youth to participate in the experience; (d) a policy that individual experiences are not required and must be entered voluntarily by the client or only as clinically indicated; (e) a policy of providing preparatory instruction and guidance to the client before an individual experience; (f) an individual assessment of client readiness; (g) a description of the maximum duration of each individual experience; (h) a policy explaining that a solo experience may not be used as a punishment or general practice; (i) a policy that each staff shall be familiar with the area chosen to conduct individual experiences; (j) a supervision plan for each individual event with a frequent check-in to allow each client to rescind voluntary participation and go back to the group; (k) documentation of the duration of each individual event; (l) a plan for managing emergencies; and (m) documentation of how each individual program component is not used as seduction or in violation of Section 62A-2-123.						
Stationary Campsites	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R501-8-17(1). If the program offering a stationary camp that does not provide a 24-hour outdoor group living environment may require residential treatment licensure.						
R501-8-17(2). If the outdoor youth program maintains a designated building to serve a client, the program is subject to fire, health, and safety standards. (a) A stationary outdoor youth program camp shall be inspected by a certified fire inspector before being occupied and on an annual basis thereafter. A copy of the inspection shall be maintained at the outdoor youth program camp. (b) At least one 2A-1 BBB-type fire extinguisher shall be in a group of tents within a 75-foot travel distance. (c) Flammable liquids may not be used to start fires, be stored in structures within house clients, or be stored near ignition sources. If generators are used, they will only be refueled by staff when the generator is not running and cool to the touch. (d) A stationary outdoor youth program camp shall be inspected by the local health department before being occupied and on an annual basis thereafter. A copy of the inspection shall be maintained at the site of the camp. (e) Food shall be stored, prepared, and served in a manner that is protected from contamination. (f) Each water supply shall be from a source that is accepted by the local health authority according to Rule R392-300, Recreation Camp Sanitation, at the time of application and for annual renewal of such licenses. (g) Sewage shall be disposed of through a public system, or in absence of a public system, in a manner approved by the local health authority, according to Rule R392-300, Recreation Camp Sanitation.						

Therapeutic Schools - Inspection Checklist
(Revised 12/2023)

C = Compliant

NC = Not Compliant

NA = Not Assessed during this inspection

Administration	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R501-15-4(1). The therapeutic school developed, maintained, and followed a current policy and procedure manual which includes: (a) except as described in Title 53G, Chapter 9, Part 3, Immunization Requirements, a requirement that a client may not attend a therapeutic school unless the school has been presented a certificate of immunization for the client from a licensed physician or authorized representative of the state or local health department stating that the client has received immunization as required by Rule R396-100; (b) a procedure for quarterly evaluation and assessment of the needs of each client; and (c) an emergency transportation plan describing how the therapeutic school shall safely transport each client to the client's legal guardian within 48 hours once the plan has been initiated.						
R501-15-4(2). The manual described in this section includes detailed descriptions of the therapeutic school's client admission, exclusion, and expulsion criteria and procedures, including: (a) a requirement that the therapeutic school shall not admit or provide services to an individual who: (i) within the past two years, has attempted suicide or made serious self-harm gestures requiring medical or therapeutic treatment; (ii) has a mental health diagnosis of psychosis, schizophrenia, severe depression, mental retardation, or a severe mental illness requiring medical or therapeutic treatment; (iii) is violent, highly combative, or physically or sexually aggressive; (iv) presents substantial security risks; (v) requires medical detoxification; (vi) lacks the ability to engage in a rational decision-making process or exhibits severely impaired judgment; or (vii) runs away or has attempted to run away at least three times; (b) a requirement that the school shall expel a client who exhibits high risk behavior or conditions, including a client who: (i) attempts suicide or makes serious self-harm gestures requiring medical or therapeutic treatment; (ii) has a psychosis, schizophrenia, severe depression, mental retardation, or a severe mental illness requiring medical or therapeutic treatment; (iii) is violent, highly combative, or physically or sexually aggressive; (iv) presents substantial security risks; (v) requires medical detoxification; (vi) lacks the ability to engage in a rational decision-making process or exhibits severely impaired judgment; (vii) runs away or has attempted to run away more than two times; (viii) uses or attempts to use illegal substances more than two times; or (ix) exhibits any other behavioral or emotional conditions that require more intense supervision and treatment than that permitted in a therapeutic school; (c) the school's academic accreditation, or disclosure that the school is not accredited; (d) the school's curriculum; (e) the school's policies for awarding course credit, and whether credits are transferable; (f) the school's policy on grading, progress assessment, and testing; (g) the academic and career counseling provided by the school; (h) each school academic activity and method; (i) each school graduation requirement; (j) each school post-graduation planning service; (k) each school method of providing off-site specialized structure and supervision; (l) the method for providing off-site specialized structure and supervision; (m) each service or treatment related to a client's disability, emotional development, behavioral development, familial development, or social development; (n) each behavior management practice; (o) each individual, group, or family counseling service; (p) each therapeutic school rule; (q) each food service provider's weekly menu; (r) the school's education and recreational activity; (s) a client rights statement; (t) a statement on permitted and prohibited weapons; (u) a client grievance policy and appeal process for the grievance policy; and (v) contact information for the Office of Licensing.						
R501-15-4(3). The therapeutic school provides the client manual described in this section to each client and each client's legal guardian before the therapeutic school may accept any payment or process any application to provide services.						
Financial Requirements	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R501-15-5(1). The therapeutic school provides an itemized accounting of expenditures made on behalf of a client before requiring reimbursement from the client's guardian.						
R501-15-5(2). The therapeutic school maintains an accurate log of each fund deposited and each withdrawal made for the personal use of each client.						
Staff Requirements	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R501-15-6(1). The owners and board members of a therapeutic school successfully complete a minimum of eight hours of annual training relating to therapeutic school services.						
R501-15-6(2). The director or equally qualified acting director is immediately available to staff by telephone and able to arrive on-site within one hour after a staff telephone call for assistance and: (a) is at least 25 years of age; (b) has a Bachelor's degree in social work or a related field, or a minimum of three years of documented training or experience in providing therapeutic school or residential treatment services; and (c) has a minimum of two years of therapeutic school or residential treatment program supervisory experience.						
R501-15-6(3). The therapeutic school always has at least one direct care supervisor or supervisor designee on duty. A supervisor or supervisor designee: (a) has a minimum of six months of experience providing services to children in out-of-home placements; (b) has completed training in the skills described in Section R501-1-14; and (c) meets each qualification, including requirements for education, experience, licensing or certification, and current annual continuing education and training directly related to providing: (i) specialized structure and supervision of clients; and (ii) services or treatment related to a client's disability, emotional development, behavioral development, familial development, or social development.						

R501-15-6(4). The therapeutic school maintains a staff manual, which includes: (a) specific job descriptions for each staff position; (b) staff qualifications for each staff position, including requirements for education, experience, and licensing or certification; (c) a requirement for continuing education, competency and proficiency, & job-specific training; & (d) the required training for staff who will work with clients with a history of failing to function at home or school.						
R501-15-6(5). At all times, at least two direct care staff provide direct supervision to clients.						
R501-15-6(6). Each client who has earned the privilege of unsupervised time off-site is required to engage in two-way communication with on duty direct care staff once every four hours. The therapeutic school developed and adheres to a policy that specifies what measures shall be taken if a client fails to check-in with staff as required by this subsection.						
R501-15-6(7). Support staff are not included in the minimum staff to client ratios.						
R501-15-6(8). The therapeutic school documents and explains, to the satisfaction of the office, any waking hour direct care staff to client ratio that does not meet the following minimum staffing requirements: (a) where eight or fewer clients are present, there shall be at least two direct care staff on duty; (b) where there are at least nine, but no more than 24 clients present, there shall be at least three direct care staff on duty; (c) where there are at least 25, but no more than 48 clients present, there shall be at least four direct care staff on duty; (d) where there are at least 49, but no more than 96 clients present, there shall be at least five direct care staff on duty; and (e) where 97 or more clients are present, at least six direct care staff shall be on duty and there shall be a staff to client ratio of one direct care staff per 20 clients.						
R501-15-6(9). The therapeutic school documents and explains, to the satisfaction of the office, any sleeping hour direct care staff to client ratio that does not meet the following minimum requirements: (a) where no more than 48 clients are present, there shall be at least two direct care staff on duty; and (b) where 49 or more clients are present, there shall be at least three direct care staff on duty and there shall be a staff to client ratio of one direct care staff per 40 clients.						
Client Services	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R501-15-7(1). The service plan includes a quarterly assessment of the adequacy of the therapeutic school's policy, procedure, and practice as providing for each client's needs.						
R501-15-7(2). The therapeutic school provides each client's legal guardian with a copy of each service plan within two weeks after the service plan is developed or updated.						
R501-15-7(3). If the therapeutic school must travel more than 30 miles to an emergency room or 24-hour urgent care facility, they retain the on-call services of a medical practitioner and a licensed mental health therapist.						
R501-15-7(4). Upon admission, each client is informed of the right to consult with a medical practitioner or a licensed mental health therapist.						
R501-15-7(5). Each client who has a serious illness, who sustains a serious injury, or who requests the services of a medical practitioner, receives an immediate assessment by a certified wilderness first responder, certified EMT, or medical practitioner.						
R501-15-7(6). The therapeutic school attaches the written assessment to an incident report.						
R501-15-7(7). Each monthly schedule of activities is posted in the common area and the office and filed and retained for at least one year.						
R501-15-7(8). The therapeutic school academic curriculum is either accredited by an accrediting entity recognized by the Utah State Board of Education or the school presents an educational service plan and educational funding plan in accordance with Section 62A-2-108.1.						
R501-15-7(9). The therapeutic school curriculum is provided to each client and the client's legal guardian prior to accepting any payment or processing any application to provide services.						
R501-15-7(10). The therapeutic school curriculum is reviewed and updated annually.						
R501-15-7(11). Each modification to the curriculum is provided to each client and the client's legal guardian within two weeks of any curriculum change.						
R501-15-7(12). The therapeutic school monitors and documents each client's academic progress and communicate the progress to the client's legal guardian each month.						
Physical Environment	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R501-15-8(1). The therapeutic school provides indoor common areas for group activities such as gymnasiums, recreation areas, cafeterias, classrooms, libraries, and lounges.						
R501-15-8(2). The common area space in the therapeutic school contains at least 30 square feet per client.						
R501-15-8(3). The therapeutic school maintains at least three feet between beds and two feet at the end of each bed.						
R501-15-8(4). Each bedroom ceiling is at least 7 feet in height.						
R501-15-8(5). Each multiple occupant bedroom contains at least 50 square feet per client and each single occupant bedroom contains at least 80 square feet per client.						
R501-15-8(6). Storage space is not counted when calculating square footage requirements.						
R501-15-8(7). Each client has at least 30 cubic feet of private storage space.						
R501-15-8(8). The therapeutic school provides each client with a school desk or table, light, and chair.						
R501-15-8(9). The therapeutic school client manual describes which dangerous weapons are permitted and which dangerous weapons are prohibited. (a) Each determination of permitted and prohibited dangerous weapons is made in accordance with the age and behavioral characteristics of the client population to be served. (b) Each therapeutic school client manual describes how dangerous weapons must be stored and the circumstances under which they may be accessible to clients.						

Congregate Care Residential Support Programs - Inspection Checklist (Revised 12/2023)						
C = Compliant NC = Not Compliant NA = Not Assessed during this inspection						
Administration	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R501-22-3(2). If the residential support program offers treatment, they obtained the appropriate categorical department license for that treatment.						
R501-22-3(4). The residential support does not require treatment as a condition of admission.						
Staffing	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R501-22-4(1). If the residential support program serving adults is an emergency homeless shelter or a domestic violence shelter, they provide 24-hour supervision.						
R501-22-4(2). The program established a policy and procedure that identifies each situation requiring medical attention and how the program will meet the client's medical needs.						
R501-22-4(3). If the residential support program accepts the services of a student or volunteer, they provide screening, training, and evaluation for each student or volunteer.						
R501-22-4(4). Each volunteer that provides care without a paid staff present in any emergency homeless shelter or domestic violence shelter has direct communication access to designated staff and has a cleared background screening prior to unsupervised client access.						
R501-22-4(5). Each volunteer is informed verbally and in writing of program objectives and the scope of service.						
R501-22-4(6). The emergency homeless shelter is able to provide the following information regarding each client or has 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) disability condition; (h) start date; (i) exit date; (j) destination; (k) relationship to head of household; (l) service location; (m) prior living situations; (n) placement log and service plan, where applicable; (o) information that could affect health, safety, or well-being, include medication needs; (p) documentation, which must be updated to include each service and contact and must be summarily updated at 90-day intervals; and (q) service plans, which emphasize self-sufficiency and identify and refer to applicable sources.						
R501-22-4(7). Documentation for each client remains in effect for re-opening for 30 days past the last shelter stay with the exception of single night stays.						
Physical Facility	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R501-22-5(1). Except as otherwise provided in this section, the residential support program has at least one bathroom for every ten clients.						
R501-22-5(2). A 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 ensures that client privacy is maintained.						
R501-22-5(3). The 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 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.						
R501-22-5(4). The emergency homeless setting has a policy to identify how to manage emergency overflow when capacity has been reached during extreme weather conditions.						
R501-22-5(5). The residential support program has a policy and procedure that allows and encourages each client to have clean linens at least weekly.						
R501-22-5(6). An emergency homeless program may have portable beds, cots, or mats to accommodate fluctuating client volume.						
R501-22-5(7). The residential support program provides clean bedding to each client as needed. Bedding is laundered at least weekly.						
R501-22-5(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.						
R501-22-5(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 occupancy 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.						
R501-22-5(10). If temporary youth shelter, they ensure that children in a temporary youth shelter with their own children 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.						

R501-22-5(11). If emergency homeless shelter, temporary homeless youth shelter, and receiving center, they 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 a policy to identify how to manage overflow when capacity has been reached.					
R501-22-5(12). The program outlines 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) property 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.					
R501-22-5(13). If the program requires a client to provide the client's own laundry supplies and locate a laundromat for laundering, the program has 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.					
Specialized Services for Clients With Substance Use Disorders	C	NC	NA	Date to be corrected by	Corrected During Inspection
R501-22-6(1). The program does not admit anyone who is currently experiencing convulsions, shock, delirium tremens, unconsciousness, or is in a coma.					
R501-22-6(2). The residential support program potentially serving clients with substance use disorder provides evidence of ongoing coordination with the local health authorities regarding managing communicable diseases within the licensed setting.					
R501-22-6(3). Staff are 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.					
Specialized Services or Programs Serving Children Each residential support program serving only child populations is considered "congregate care" and must adhere to each requirement for background clearances, policy development and behavior management practices.	C	NC	NA	Date to be corrected by	Corrected During Inspection
R501-22-7(2). The residential support program provides clean and safe age appropriate toys for children.					
R501-22-7(3). The residential support program provides an outdoor play area enclosed with a five-foot safety fence or enclosure as otherwise required by local ordinances.					
R501-22-7(4). Only a custodial parent, legal guardian, or person designated in writing is allowed to remove any child from the program.					
R501-22-7(5). The residential support program provides adequate staff to supervise children or be available to monitor parents supervising their own children.					
R501-22-7(6). The residential support program complies as required with the Interstate Compact on the Placement of Children (ICPC), including by ensuring the placement plan is followed when a minor presents at a shelter as a result of a failed ICPC placement in a Utah residential setting.					
Specialized Services for Domestic Violence Shelters	C	NC	NA	Date to be corrected by	Corrected During Inspection
R501-22-8(1). The domestic violence shelter provides to the client, verbally and in writing, and document shelter rules, reasons for termination, and confidentiality issues.					
R501-22-8(2). The 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 arranges for appropriate child-care services.					
R501-22-8(3). The domestic violence shelter action plan includes: (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.					
R501-22-8(4). The program facilitates connecting services to identified resources.					
R501-22-8(5). An appropriate referral is made and documented when indicated in the client record for victim treatment, psychiatric consultation, drug and alcohol treatment, or other allied service.					
R501-22-8(6). The domestic violence shelter staff completing an action plan are supervised by an experienced and trained domestic violence provider.					
Specialized Services for Temporary Homeless Youth Shelters	C	NC	NA	Date to be corrected by	Corrected During Inspection
R501-22-9(1). The temporary homeless youth shelter provides a staff ratio of at least one direct care staff for every ten children.					
R501-22-9(2). Each individual admitted is under the age of 18.					
R501-22-9(3). Each child may be admitted with the child's own biological children.					
R501-22-9(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.					
R501-22-9(5). The temporary youth homeless shelter documents and maintain individualized assessments of risk of harm and justification for each client admitted in the youth setting.					

R501-22-9(6). The temporary homeless youth shelter complies with Utah Statute Section 80-5-601 regarding mandatory notifications for harboring a runaway child.					
R501-22-9(7). The temporary homeless youth shelter complies with Section 62A-2-108.1 to coordinate educational requirements for each individual.					
R501-22-9(8). The temporary homeless youth shelter coordinates and transition each client to a more appropriate setting when the client is unable to remain in the youth setting.					
Specialized Services for Emergency Homeless Shelters	C	NC	NA	Date to be corrected by	Corrected During Inspection
R501-22-10(1). The emergency shelter prioritizes the safety of those needing services and emphasize transitioning into a more permanent housing setting.					
R501-22-10(2). The emergency homeless shelter ensures 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.					
R501-22-10(3). The 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: <ul style="list-style-type: none"> (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. 					
R501-22-10(4). The emergency homeless shelter requires each adult resident to sign an agreement form at admission which outlines the visitors allowed on the premises, the times allowed, and the types of visitors allowed such as family, friends, social and other designated visitors. Each agreement outline that participation in any meetings or groups with these visitors is entirely voluntary. Each client signature on the form and voluntary participation in the visitation constitutes the client's invitation to these visitors in the department licensed setting. Each client that has not signed the agreement does not participate in any voluntary services offered onsite. Staff in the homeless setting may not be considered a visitor as outlined in this section.					
Specialized Services for Programs Serving Clients of the Division of Services for People with Disabilities	C	NC	NA	Date to be corrected by	Corrected During Inspection
R501-22-11(1). In accordance with the federal Home and Community-Based Services (HCBS) Settings final rule, programs serving HCBS Waiver clients 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.					
R501-22-11(2). Copies of the residential attestation agreement form and self-assessment are located in program documentation and updated as needed.					
R501-22-11(3). In the event of a conflict between this rule and the Settings Final Rule the Settings rule shall prevail.					
Receiving Centers	C	NC	NA	Date to be corrected by	Corrected During Inspection
R501-22-12(3). The receiving center outlines 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.					
R501-22-12(4). The receiving center includes individualized clinical documentation for each instance in which a stay lasts longer than 30 days. The individualized clinical documentation outlines the ongoing need and anticipated time frame during which the client will remain in the receiving center.					
R501-22-12(5). Each placement in a receiving center is a voluntary alternative to a more restrictive placement. A receiving center may not mandate treatment as a condition to residence.					

Child Placing Foster Checklist (Revised 12/2023)						
C = Compliant NC = Not Compliant NA = Not Assessed during this inspection						
Initial Application, Renewal, and Reapplication Process	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R501-12-4(1) An individual or legally married couple age 18 or over may apply for licensure or certification to be a foster parent.						
R501-12-4(2) The provider shall apply for licensure or certification by fully completing the approved initial license application template form, that is found on the office website.						
R501-12-4(3) The office or agency may consider poverty guidelines when evaluating the dependence of a foster parent on foster payments for their own expenses.						
R501-12-4(4) The office or agency may require supporting documentation of household income and expenses to verify the foster parent or foster parent applicant is financially stable and will not be dependent on foster care reimbursement.						
R501-12-4(5) The foster parent applicant shall provide verification of successful completion of DCFS or agency approved pre-service training within the past 24 months.						
R501-12-4(6) The foster parent applicant shall provide verification of current cardiopulmonary resuscitation (CPR) and first aid training. Accepted training includes Heart Savers, American Red Cross, and American Heart Association Friends and Family.						
R501-12-4(7) The foster parent applicant shall authorize a licensed health care professional to complete a physical exam within the previous 12 months and send a signed medical reference report directly to the office or agency. A medical reference report shall assess the current ability of the individual to be a foster parent.						
R501-12-4(8) If required by the office or agency to assess mental health status, the foster parent or foster parent applicant shall complete a professional mental health examination. (a) The office or agency shall determine the type of professional mental health examination required based on the nature of the presenting concerns. (b) The office or agency administration shall collaborate with a clinical professional to make the determination of need and type of examination required. (c) The foster parent or foster parent applicant shall authorize the release of examination information to the office or agency, including a signed report that assesses the ability of the individual to parent vulnerable foster children full time as a foster parent. (d) The foster parent or foster parent applicant shall pay for any requested medical or mental health examinations. (e) The office or agency may, in the exercise of their professional judgment, deny, suspend or revoke an application, certification or license if a medical reference report or other examination reveals reasonable concerns regarding an applicant's ability to provide foster care services, or if the required examination is not completed and provided to the office or agency.						
R501-12-4(9) At the time of initial application or as requested thereafter, the foster parent applicant shall submit the names, mailing address, email addresses, and phone numbers of no more than four individuals who will be contacted by the office or agency and asked to provide a reference letter. If there is more than one individual listed on the foster parent application, the referents may address both individuals in the same reference. (a) The foster parent applicant shall select referents who are knowledgeable regarding the ability of the applicant to provide a safe environment and meet the foster child's needs. (b) The foster parent applicant shall not choose a referent that is a relative of the applicant and three non-relatives. (c) The office or agency shall only consider the four original referent individuals submitted. (d) A minimum of three out of the four individuals, including one relative and two non-relatives, shall submit reference letters directly to the office or agency. Except as provided in Subsection R501-12-15(3), the office or agency shall require a minimum of three reference letters received that are acceptable to the office or agency. (e) The office or agency may, in the exercise of their professional judgment, deny an application if a reference reveals reasonable concerns regarding an applicant's ability to provide foster care services.						
R501-12-4(10) The foster parent applicant and each person 18 years of age or older residing in the home shall submit a background screening application as part of the initial application. (a) A background screening is also required for any new individual over the age of 18 who moves into the home. (b) The office or agency may not license or certify a foster parent unless the background screening of each person 18 years of age or older that resides in the home is deemed eligible by the office in compliance with Section 26B-2-120 and Rule R501-14. (c) The foster parent may not permit any person without an office approved background clearance to have unsupervised direct access to a foster child. (i) the person is a provider of residential care; or (ii) the person's access is driven by child-centered normalcy needs that are guided by reasonable and prudent parenting as described in Section 26B-1-238 and is not a foster parent-centered delegation of parental responsibility. (d) The foster parent shall immediately notify the office or agency if any person in the home is charged with or under investigation for any criminal offense, or allegation of abuse, neglect, or exploitation of any child or vulnerable adult. (e) A pending CPS, APS or Law Enforcement investigation of any person in the home may result in a license or certification suspension until resolved to the satisfaction of the Office. (f) The office or agency shall review and evaluate information from the DCFS Management Information System for licensing and monitoring individuals who reside in the foster home. When, in the professional judgment of the Office, a supported or substantiated finding against any individual who resides in the foster home may pose a risk of harm to a foster child, the office may issue a safety plan, place parameters on the license or issue a notice of agency action to the foster parent or agency.						
R501-12-4(11) After completing the required background checks, the office or agency shall conduct a home study before any placement is made in the home. (a) If the home study is required for adoptive purposes, an adoption service provider, as defined in Section 70B-6-103, shall complete the home study. (b) If the home study is not being conducted for adoptive purposes, the home study may be conducted by an individual who: (i) Is an adoption service provider; (ii) Is employed or contracted to conduct a home study for an agency licensed by the department and who has participated in the recruiting, hiring, training, and supervising of proctor foster homes for at least a year. (c) The office or agency shall fully complete the home study document on the office approved home study document template, that is found on the office website before an applicant is licensed or certified to take foster placements.						

R501-12-4(12) A foster parent who wishes to remain licensed or certified to provide foster care services shall submit a renewal application as requested by the office before the license or certification expiration. (a) Each applicant requesting license or certification renewal shall fully complete the renewal application form that is found on the office website. (b) The office or agency may require supporting documentation of household income and expenses to verify the foster parent is financially dependent on foster care reimbursement. (c) The office or agency shall update the home study in writing annually after a home visit and safety inspection as a means to assess the family's experience over the past year as a foster family to include: (i) any changes to required home study information; (ii) interviews with any members of the home; and (iii) references or other requested information needed to update the home study.						
R501-12-4(13) A previously licensed or certified foster parent is subject to the same requirements as an initial application, with the following additional requirements: (a) each applicant shall disclose previous foster care licenses and certifications, including those outside of Utah; (b) each applicant shall provide a written reference from the custodial agency where they last held a foster care license to be sent directly to the office or agency; (c) each previously certified applicant shall request a written reference letter from the last agency where they were certified, and each agency they have been certified by within the past three years, to be sent directly to the office or agency; and (d) each applicant shall sign a release of information for any agency where the foster parent previously provided certified or licensed foster care.						
R501-12-4(14) Reapplication of previously licensed or certified applicants may utilize an update of the previous home study as long as the home study was created by the same agency currently referring or reviewing the home. (a) The office or agency may add an update to the existing home study from another agency if the agency provides it directly and it is seeking one of the pre-approved template found on the office website that addresses and updates general foster parent requirements. The update may reference applicable portions of the original study as an attachment. (b) The department may request new reference letters or additional information if needed to update the home study. (c) The reference letter requirement is waived if 12 months or less have passed since the lapse of any license or certification. (d) A personal health statement is still required, but a physician's statement is waived if 12 months or less have passed since lapse of any license or certification. (e) Initial training requirements are waived, as long as there is not a change of the licensing or certifying agency if 24 months or less have passed since lapse of any license or certification. A change in agency shall require new initial training.						
R501-12-4(15) The office or agency shall base the decision to approve or deny the applicant to provide foster services on the facts, health and safety factors, and the professional judgment of the office or agency. (a) The office or agency may not deny a person a foster care license or certification on a basis that violates any applicable federal or state anti-discrimination law. (b) The approval of a license or certification is not a guarantee that a foster child will be placed or retained in the foster parent's home. (c) Except for kinship parents, a foster parent may not be licensed or certified to provide foster or respite care services in the same home where they provide child care or another licensed or certified DHSS program. (d) To promote health and safety, the office or agency may issue a license or certification that includes additional restrictions unique to the circumstances of the license. (e) If a license or certification is denied, an applicant may not reapply for a minimum of 90 days from the date of denial.						
Foster Parent Requirements	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R501-12-5(1) The foster parent shall comply with the following: (a) be in good health and emotionally stable; (b) be able to provide for the physical, social, mental health, and emotional needs of the foster child; (c) be a responsible person who is 18 years of age or older; (d) be able to communicate with the foster child, DHSS, health care providers and other service providers; (e) have at least one functionally literate applicant in the home able to read medication labels and other critical information; (f) provide documentation of legal residential status in accordance with the Code of Federal Regulations Title 63, Chapter 99a, Parts 104 and 1621; (g) not do anything to help the foster child thrive; (h) not be dependent on foster care reimbursement for their own expenses, outside of those expenses directly associated with providing foster care services; (i) provide updated medical, social, financial, or other family information when requested by the office or agency; (j) follow federal, state and local laws and ordinances; (k) not engage in conduct that poses a substantial risk of harm to any person or that is illegal or grounds for denying a license under Section 26B-2-112; and (l) cooperate with the custodial agency goals and requirements regarding permanency and reunification.						
R501-12-5(2) A DHSS employee may not be licensed or certified as a foster parent for children in the custody of their respective division, unless they qualify as a relative to the child in accordance with Subsection 80-2a-101(5). An employee may provide foster services for children in the custody of a different division only with the prior written approval of both divisions' directors in accordance with DHSS conflict of interest policy.						
R501-12-5(3) The foster parent shall cooperate with the office, agency, courts, and law enforcement officials.						
R501-12-5(4) The foster parent shall read, acknowledge, and comply with the provider code of conduct. (a) The foster parent may not abuse, neglect, or maltreat a foster child through any act or omission. (b) The foster parent may not encourage or fail to deter the acts or omissions of another that abuse, neglect, or maltreat a foster child.						
R501-12-5(5) No more than two children under the age of two, including children who are members of the household and foster children, shall reside in a foster home.						
R501-12-5(6) No more than two non-ambulatory children, including children who are members of the household and foster children, shall reside in a foster home.						
R501-12-5(7) No more than four foster children shall reside in a licensed foster home and no more than three foster children shall reside in a certified foster home unless: (a) placing a foster child or sibling group in a home where they previously resided; (b) placing a foster child where a sibling currently resides; (c) placing a sibling group in a home that: (i) has no other foster placements; or (ii) has only one other foster placement.						
R501-12-5(8) The foster parent shall utilize reasonable and prudent judgment in selecting an incidental caregiver for a foster child and incidental care may only be utilized by a DHSS licensed foster parent, not a foster parent certified by a licensed child placing agency.						

R501-12-5(9) The foster parent may provide respite care in their home as long as they remain in compliance with licensing rules in regard to each child placed for foster and respite care. The foster parent may provide respite care when the additional foster children exceed their licensed capacity only as follows: (a) there are no licensing sanctions currently imposed, including corrective action plans or conditional licenses; and (b) total number of foster and respite children in a home at one time may not exceed six unless all except one or two of the children are part of a single sibling group.						
R501-12-5(10) Respite care, child care, incidental care, emergency care or other temporary care for a foster child may be allowed in a licensed or unlicensed setting, with or without background clearances if the child's DHHS client record identifies, by name, the kinship connections to be maintained. (a) The DHHS custodial agency shall set parameters and oversee the safety aspects of a kinship connection. (b) Unlicensed kinship respite caregivers, identified by DHHS, are still subject to licensure background screening requirements and a custodial agency walk-through of the home for safety approval. (c) A licensed child placing agency, except a DHHS custodial agency, may not utilize an unlicensed caregiver for care of any foster child, unless specifically outlined in the custodial agency client record and authorized by the child's caseworker.						
R501-12-5(11) The foster parent shall report the following major changes or events to the office or agency within one business day: (a) the death or serious illness of a member of the foster parent's household; (b) change in marital status; (c) change of employment; (d) change in household composition, such as the birth or adoption of a child, addition of household members, or tenants; (e) allegations of abuse or neglect of any child or vulnerable adult against any member of the foster parent's household; or (f) anything defined as a "critical incident" in Rule R501-1.						
R501-12-5(12) The office or agency shall evaluate major changes to determine necessary actions that may include an update to the home study, implementation of a safety plan, amendments to the license certification, request for new references or examinations, or agency action.						
R501-12-5(13) The foster parent shall report any potential change in address in advance to the office or agency. (a) A license or certification is site-specific. (b) An adjoining dwelling with a separate address that is not accessible from the foster home is not considered part of the foster home site. (c) A foster child may not be moved into a home that is not licensed or certified to provide foster care except as allowed in Subsection R501-1-6(2) for relocation of a license. (d) The foster parent shall reside at the license location. (i) The office or agency shall remove a foster parent who no longer resides at the licensed location from the license certificate and that foster parent shall apply for a separate initial license and meet licensing requirements in the new residence to become licensed at the new location. (ii) The foster parent remaining in the home shall demonstrate the ability to continue to meet the financial and other foster care licensure requirements and the office or agency shall complete an update to the home study.						
R501-12-5(14) The foster parent shall offer nutritious, balanced meals that meet each foster child's individual needs.						
R501-12-5(15) A foster parent with a foster placement in the home shall continually comply with Rule R501-12 and a foster parent with no placements in the home shall demonstrate ability to comply upon request and ensure compliance before any new placement is made.						
Physical Aspects of Home	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R501-12-6(1) The provider shall ensure the following regarding the foster home environment: (a) indoor and outdoor areas of the home are maintained to ensure a safe physical environment; (b) the home is free from health and fire hazards; (c) the home has a working smoke detector and a working carbon monoxide detector on each separated level and at least one of each shall be in close proximity to sleeping areas; (d) the home has at least one fire extinguisher meeting the rating requirements of 2A:10BC, that is fully charged and readily accessible to the main living area; (e) the home has at least one toilet, sink and tub or shower; and (f) each bathroom has a lock sufficient to preserve the privacy of the occupant.						
R501-12-6(2) The provider shall ensure bedroom spaces comply with the following: (a) children of the opposite gender do not share a bedroom unless: (i) each child is under the age of two years of age; (ii) the DHHS client record identifies gender-specific female or (iii) there is written caseworker approval for the bedroom assignment; (b) the foster parent's bedroom is only shared with a foster child under the age of two years and the foster parent may not bed-share with a foster child; (c) the foster parent's bedroom is not considered in calculating the allowable bedroom space for a foster child; (d) a foster child may not share a bedroom with other adults in the home; (e) a foster child has an individual bed or crib, mattress, and linens that meet the child's needs; (f) weight blankets are only used for foster children if therapeutically recommended in writing or approved in writing by the child's caseworker; (g) there is a minimum of 40 sq ft per child, excluding adjoining bathrooms and storage space; (h) no more than four children are housed in a single bedroom that houses at least one foster child; (i) a bedroom used for a foster child is comparable to other similarly utilized bedrooms in the home, including access, location, space, finishings, and furnishings; (j) a bedroom used by a foster child on the ground floor shall have a minimum of one screened window that opens that may be used to evacuate the room in case of fire; (k) a bedroom used by a foster child that is not on the ground floor shall have a source of natural light and a minimum of two exits, at least one of which shall exit directly to outside the home that may be used to evacuate the room in case of fire; and (l) closet or dresser space is provided within the bedroom for the foster child's personal possessions and for a reasonable degree of privacy.						

R501-12-6(3) The provider shall ensure:					
(a) there is space or access to common areas for recreational activities;					
(b) there is adequate lighting, ventilation and the home is maintained at a reasonable temperature when occupied by a foster child in consideration of the age and needs of the foster child and other residents;					
(c) there is a properly operating kitchen with working refrigerator, cooking appliances, adequate supply of safe drinking water and functional indoor plumbing;					
(d) all hazards on the property are abated and mitigated through the use of protective hardware, fences, banisters, railings, grates, natural barriers, or other licenser approved methods to include:					
(i) fall hazards of 3 feet or greater including steep grades, cliffs, open pits, window wells, stairwells, elevated porches, retaining walls;					
(ii) drowning hazards including swimming pools, hot tubs, water features, ponds or streams;					
(iii) burn hazards including fireplaces, candles, radiators, water temperature;					
(iv) unstable heavy items to include televisions, bookshelves, and/or					
(v) high voltage hazards - dangerous electrical conditions;					
(e) home and its contents are maintained in a clean and safe condition and food, clothing, supplies, furniture, and equipment are of sufficient quantity, variety, and quality to meet the foster child's needs;					
(f) the home is free from rodent and insect infestation;					
(g) there are at least two exits adequately sized for emergency personnel on each accessible floor of the home and multiple-level homes have a functional, automatic fire suppression system, or an escape ladder, stairway, or other exterior egress at ground level accessible from each of the upper levels;					
(h) the foster parent does not uses child safety devices appropriate to the needs of the foster child, including safety gates, and electrical outlet covers;					
(i) the home address is clearly visible and location is accessible;					
(j) the water and sewage disposal system, other than a public system, is approved by the appropriate authorities;					
(k) there is trash and recycling disposal;					
(l) any swimming pool is secured to prevent unsupervised access and complies with applicable community ordinances; and					
(m) any hot tub and spa has a locked cover.					
Safety	C	NC	NA	Date to be corrected by	Corrected During Inspection
R501-12-7(1) The foster parent and their guests may not smoke any substance in the foster home or vehicle when a foster child is present or residing in the home and shall ensure that smoking materials are inaccessible to foster children.					
R501-12-7(2) The foster parent shall provide training to children regarding response to fire warnings and other instructions for life safety upon the initial placement of a foster child and annually thereafter. This includes an evacuation plan that also anticipates the evacuation of a foster child who is non-ambulatory or who has a disability.					
R501-12-7(3) The foster parent shall have a phone that can make outgoing calls and is recognizable to the 911 system on-site during any time that a foster child is present and shall post telephone numbers for emergency assistance, poison control, the emergency evacuation plan and the address of the home in a central location visible to the foster child.					
R501-12-7(4) The foster parent shall have a fully supplied first aid kit as recommended by the American Red Cross.					
R501-12-7(5) The foster parent shall inform the office or agency if they possess or use a firearm or other weapon.					
R501-12-7(6) A foster parent shall ensure that firearms, ammunition and other weapons are inaccessible to foster children.					
R501-12-7(7) The foster parent may not provide a weapon to a foster child or permit a foster child to possess a weapon except as outlined in Sections 76-10-509 through 76-10-509.					
(a) The foster parent does not have the authority of a parent or guardian to provide a dangerous weapon to a minor under Section 76-10-509.					
(b) The foster parent shall ensure the following regarding firearms in the foster home:					
(i) firearms are only stored together with ammunition in a locked container commercially manufactured for the secure storage of firearms;					
(ii) firearms not stored in a locked container commercially manufactured for the secure storage of firearms are unloaded and securely locked. Ammunition for these firearms is kept securely locked in a separate location;					
(iii) the locked storage for firearms and ammunition is not accessible through the same keys or combinations;					
(iv) keys and combinations utilized to open locked storage for firearms and ammunition are not accessible to a foster child; and					
(v) firearms are stored in display cases only if unloaded and made inoperable through the effective use of trigger locks, bolts removed, or other disabling methods.					
R501-12-7(9) The foster parent who has alcoholic beverages in their home may not consume in excess and shall ensure that the beverages are closely monitored and inaccessible to foster children.					
R501-12-7(10) The provider shall ensure hazardous materials remain locked when not in active use, and closely monitored while in active use, and shall ensure compliance with the following:					
(a) hazardous materials are stored in the manufacturer's original packaging together with the manufacturer's directions and warnings, or a container that complies with the manufacturer's directions and warnings and is clearly labeled with the contents, manufacturer's directions and warnings;					
(b) flammable substances, including gasoline and kerosene, are locked in a ventilated storage area separate from living areas, this requirement does not include substances contained within the storage tanks of equipment, including propane tanks, fuel oil tanks, and snow blowers; and					
(c) general, common use, household items are stored responsibly in consideration of the age, behavior, history, and cognitive and physical ability of each foster child in the home, and in consultation with the caseworker and child and family team regarding individual restrictions.					
R501-12-7(11) The foster parent shall comply with local laws and ordinances regarding the care and number of animals on their property.					

R501-12-7(12) The foster parent shall ensure that the foster child has the safety equipment, supervision, and training necessary for the foster child to safely participate in an activity that has an inherent risk of bodily harm, injury, or death. (a) These activities include participation in rock climbing, swimming, hunting, target practice, camping, hiking, use of recreational vehicles, and sports. (b) The foster parent shall take every precaution in allowing a foster child to participate in the respective activity as safely as possible to include: (i) wearing Department of Transportation or Snell-approved helmets when riding off-highway vehicles (OHVs); (ii) completing OHV education; (iii) completing personal watercraft or boating education; (iv) wearing Coast Guard-approved lifejackets; and (v) completing hunter's education. (c) The foster parent shall follow any applicable statute pertaining to minors operating OHVs, personal watercraft, boats, and firearms.						
R501-12-7(13) The foster parent shall comply with any written safety plan or license parameter required by the office or agency, that establishes additional safety requirements to protect the foster child from hazardous conditions on the foster parent's property. A safety plan may not waive any applicable requirement of Rule R501-12.						
R501-12-7(14) The foster parent shall provide verification of compliance with the Utah Department of Health and Human Service's recommended immunization schedules for each individual residing in the home who is not a foster child. The foster parent may only be licensed or certified for placements of foster children who are over the age of 2 months and are currently immunized if vaccination compliance of residents in the home cannot be verified. (a) The foster parent shall disclose if any individual residing in the home is not in compliance with the Utah Department of Health and Human Services' recommended immunization schedules to the child placing agency before accepting a placement. (b) Newborn infants shall reach the required age and receive their first dose of required vaccinations to be considered appropriately immunized for their age.						
R501-12-7(15) The foster parent may not accept the placement of a foster child into their home outside any license conditions or parameters.						
Emergency Plans	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R501-12-8(1) The foster parent shall have a written plan of action for emergencies and disaster to include the following: (a) evacuation with a pre-arranged site for relocation; (b) transportation and relocation of foster children when necessary; (c) supervision of foster children after evacuation or relocation; and (d) notification of appropriate authorities.						
R501-12-8(2) The Foster parent shall immediately report any serious illness, injury, or death of a foster child to the appropriate division or Agency and the Office.						
Infectious Disease	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
In the event of an infectious or communicable disease outbreak, the foster parent shall follow specific instructions given by the local health department.						
Medication and Medical Emergencies	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R501-12-10(1) The foster parent shall ensure the following: (a) prescribed medication is administered according to the written directions of the foster child's health provider; (b) the foster child actually consumes the medication; (c) any severe or unexpected side effects or reactions are immediately reported to the foster child's health provider; (d) medication is only given to the foster child for whom it was prescribed; (e) medication is not discontinued without the approval of the foster child's health provider; (f) prescription medication are administered by a foster parent according to manufacturer's instructions unless otherwise directed by the foster child's health provider; (g) medication are not administered or carried by the foster child, unless approved in writing by the foster child's health provider; (h) medication is not used for behavior management or restraint unless prescribed in writing by the foster child's health provider and after notification to the division or caseworker; (i) medication remains locked at times it is not in immediate, active use; (j) medications in active use are not left unattended and the foster parent may not abuse or misuse prescription or non-prescription drugs or medications; (k) the foster parent may carry a single dose of medication for active use, if a foster child requires immediate access to their medication for asthma, allergies, diabetes or other condition requiring urgent administration of the medication; (l) medication remains in the original pharmacy or manufacturer's packaging; (m) the foster parent may not repackage medications or divide doses into alternative containers; (n) the foster parent partners with the pharmacy regarding any needed divisions of medication; (o) the foster parent promptly takes a foster child who has a medical emergency, who is sick, or who is injured, for an assessment by a medical practitioner; and (p) the foster parent complies with the treatment orders of the foster child's health provider.						
R501-12-10(2) The foster parent shall transfer any unused medications to the caseworker or agency when a foster child is no longer placed in the foster parent's home.						
R501-12-10(3) The foster parent shall have a written plan for medical emergencies, including arrangements for medical transportation, treatment and care.						
Transportation	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R501-12-11(1) The provider shall ensure a driver of a vehicle carrying a foster child has a valid, current driver's license and valid, current vehicle insurance, and comply with traffic regulations.						
R501-12-11(2) The provider shall ensure transport of a foster child is provided in an enclosed, registered vehicle that has functional seatbelts. (a) The provider shall ensure foster children properly utilize seatbelts and other safety equipment, including age and size appropriate car or booster seats. (b) Recreational vehicles, including motorcycles, may not be used for transportation.						
R501-12-11(3) The provider shall ensure emergency contact information, including caseworker and agency information is accessible to any passenger in each vehicle used to transport foster children.						
R501-12-11(4) The foster parent shall equip each vehicle with a first aid kit.						
Behavior Management	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes

R501-12-12(1) The foster parent shall provide supervision appropriate to the age and needs of each foster child.						
R501-12-12(2) The foster parent may not use, nor permit the use of corporal punishment including physical, mechanical, or chemical restraint, physical force, infliction of bodily harm or pain, deprivation of meals, rest or visits with family, or humiliating or frightening methods to discipline, coerce, punish, or retaliate against a foster child.						
R501-12-12(3) The foster parent shall only use behavior management techniques appropriate for the foster child's age, behavior, needs, developmental level, and past experiences.						
R501-12-12(4) The foster parent shall use the least restrictive method of behavior management available to control a situation.						
R501-12-12(5) The foster parent shall only use behavior management techniques that are positive, consistent, and that promote self-control, self-esteem, and independence.						
R501-12-12(6) The foster parent may not use physical work assignments or activities that inflict pain as behavior management techniques. A physical work assignment or activity that results in minor sore muscles does not violate this subsection.						
R501-12-12(7) The foster parent may not abuse, threaten, ridicule, intimidate, or degrade a foster child.						
R501-12-12(8) The foster parent may not deny a child medical care, nutrition, hydration, clothing, bedding, sleep, or toilet and bathing facilities.						
R501-12-12(9) Physical restraint of a foster child in the custody of a DHHS division is prohibited, unless expressly indicated in the child's DHHS client record and the foster parent is appropriately trained and authorized by the department for its use.						
R501-12-12(10) Physical restraint of a foster child who is not in DHHS division custody may only be performed by an individual with verified, documented training in accordance with the nonviolent strategies of a state, regional or nationally recognized child management program. (a) Gently hugging, holding, or guiding a foster child is not considered a restraint. (b) The foster parent shall only perform self-defense as long as it is without aggression, retaliation or unnecessary force and is reported to the caseworker and office within one business day.						
Foster Child's Rights in Foster Care	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R501-12-13(1) The foster parent may not violate a foster child's right to: (a) eat nutritious meals with the family; (b) eat the same food as the family, except when the foster child is provided with alternative food ordered by the foster child's physician; (c) participate in family and school activities; (d) receive confidential information about the foster child and not retaining copies of the foster child's records once the foster child is no longer placed in the home; (e) be informed of the foster child's responsibilities, including household tasks, privileges, and rules of conduct; (f) be protected from discrimination; (g) be protected from harm or acts of violence, including protection from physical, verbal, sexual, or emotional abuse, neglect, maltreatment, exploitation, including source funding, or inhumane treatment; (h) be treated with courtesy and dignity, including reasonable personal privacy and self-expression and not provided temporary arrangements for storage of bags for collecting or transporting belongings; (i) communicate with and visit the foster child's family, attorney, physician, and clergy, except as restricted by court order; (j) have clean clothes and personal hygiene needs met; (k) participate in their own cultural traditions; (l) receive prompt medical care when sick or injured; and (m) be free from media content that is likely harmful considering the foster child's age, behavior, needs, developmental level, and past experiences.						
Additional Child Placing Agency Considerations	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R501-12-14(1) The agency shall comply with Rule R501-1 regarding incident reporting, Rule R501-14 regarding background screenings and Section 80-2.7 regarding the Interstate Compact for the Placement of Children (ICPC) for agencies taking placements from out-of-state.						
R501-12-14(2) The agency shall recruit, train, certify, and supervise foster parents.						
R501-12-14(3) The agency may not certify a home that is licensed or certified or applying to be licensed or certified with any other agency.						
R501-12-14(4) The agency may not certify agency owners, directors, managers, and members of the governing body to provide foster care services for foster children placed with or by any child placing foster agency.						
R501-12-14(5) The agency shall: (a) verify completion of the foster parent's training requirements before issuing an initial or renewal certification and before placing a foster child in the home; (b) in addition to the foster parent training requirements of Rule R501-12, train each foster parent regarding the agency's policies and procedures and safe practices before placing a foster child in the home; (c) send the department an updated listing of information on certified foster homes via the DCFS provider website if contracted to take DCFS placements, or directly to the licensor as requested of a private agency; (d) maintain documentation of the initial and annual home studies and any updates and provide to the department upon request; (e) have a written agreement with the foster parents that includes: (i) the expectations & responsibilities of the agency, staff, foster parents and limitations of authority; (ii) the services and products provided to the foster parents; (iii) the requirements to provide medical, remedial, treatment, and other specialized services to a foster child; (iv) the financial arrangements for a foster child placed in the home; (v) the authority foster parents can and cannot exercise over a foster child placed in the home; and (vi) actions that require staff or DHHS authorizations; (f) monitor and keep detailed documentation regarding foster parents' compliance with R501-12; (g) document each announced and unannounced visit to the foster home, including an initial safety inspection and a minimum of one unannounced safety inspection annually; (h) document each safety inspection completed by the agency on the office-provided home inspection checklist, or a similar form that contains all of the office-provided form contents; (i) coordinate with the office when checklist items are not compliant or other noncompliance is noted to determine how to proceed;						

<p>(j) document actions on foster parent certifications in the foster parent file to include any request for remediation with assigned time frames, request corrective action plan from the foster parent, or any action to suspend certification or revoke certification;</p> <p>(k) escalate the level of agency action taken toward foster parent certification when there are multiple notations of noncompliance within the same year;</p> <p>(l) maintain completed checklists & compliance monitoring documentation in each foster parent file;</p> <p>(m) investigate complaints and alleged violations of rules R501-12, R501-14 and R501-1. The agency shall provide documentation to the office of any investigations into complaints and alleged violations of licensing rules;</p> <p>(n) provide written notification to each foster parent that informs the foster parent of the rights and responsibilities assumed by the foster parent who signs as the responsible adult for a foster child to receive a driver license, as described in Section 53-3-21 and maintain documentation in the foster parent's file, signed and dated by the foster parent;</p> <p>(o) promptly review written policies and procedures regarding the denial, suspension, and revocation of a foster parent's certification to provide foster care services, that includes written notification of the foster parent's appeal process;</p> <p>(p) provide documentation and immediate notification to the office and the custodial agency of any denial, suspension, revocation or other agency-initiated termination of a foster parent's certification;</p> <p>(q) not grant or permit any variance to Rule R501-12 or any other regulation without the prior written consent of the director or director's designee of the office;</p> <p>(r) certify foster parent for a specific time period that does not exceed one year before placing any foster child in the home and make a copy of the certification dates available to the office upon request;</p> <p>(s) provide ongoing supervision of certified foster parents to ensure the quality of care they provide; and</p> <p>(t) participate with each foster child's legal guardian and the foster parent to obtain, coordinate, and supervise care and services necessary to meet the needs of each foster child in their care.</p>					
<p>R501-12-14(6) The agency may not take placement of a foster child whose needs exceed the scope or ability of the program to reasonably manage, and the agency shall:</p> <p>(a) outline in policies and procedures the behaviors and presenting issues would be reason for discharge or exclusion from the placement or school;</p> <p>(b) document how the placement of the foster child is appropriate and commensurate with presenting needs and the services that are available to address the child's needs;</p> <p>(c) conduct or coordinate monthly visits to the foster child in the placement or school;</p> <p>(d) maintain responsibility for the child's behavior in the program, school and community;</p> <p>(e) maintain responsibility for transitioning a foster child or 18 to 21 year old into safe and appropriate placement upon discharge from the program or in accordance with CPC disruption plan if the child is from out-of-state; and</p> <p>(f) ensure in policy and safe practices that sending a child to a homeless shelter, refusal to pick up from detention, or offering one-way plane or bus tickets are not appropriate or responsible program transition actions, unless supported by therapeutic or parental recommendation.</p>					
<p>R501-12-14(7) The agency shall:</p> <p>(a) provide and receive approval from the school district of certified homes with a youth education coordinating form in compliance with the requirements of Section 26B-2-116;</p> <p>(b) provide accurate and truthful written references for any previously certified home that requests such reference to work with foster children in another licensed agency;</p> <p>(c) maintain copies of completed foster parent initial and renewal applications and accompanying documents, home study document and any subsequent updates, and any other foster parent documentation in a format easily accessible for office review;</p> <p>(d) follow DHHS contract requirements and request guidance from the Division of Continuous Quality and Improvement and the office in the event of conflicting requirements; and</p> <p>(e) if serving individuals involved with the Division of Services for People with Disabilities, ensure compliance with the Home and Community Based Services (HCBS) Settings Final Rule as identified in the Code of Federal Regulations, Title 42, Parts 430 and 431 that shall prevail in the event of a conflict with any rule under Title R501.</p>					
<p>Additional DCFS Kinship and Specified Home Licensure Considerations</p>	C	NC	NA	Date to be corrected by	Corrected During Inspection
<p>R501-12-15(3) Only the office, an agency contracted by the department or an approved DCFS kinship home study specialist may conduct a kinship specific home study.</p>					
<p>R501-12-15(4) A minimum of two acceptable reference letters sent in accordance with Subsection R501-12-4(5) are required for a kinship applicant.</p>					
<p>R501-12-15(5) The foster parent may not accept a placement until the home study, safety inspection, and background screening approvals are successfully completed, unless the placement is made on an emergency basis as authorized by Section 80-2-3a-301.</p>					
<p>R501-12-15(6) The office shall grant a kinship specific probationary license or initial license upon receipt and approval of a completed kinship specific packet submitted by DCFS.</p> <p>(a) A kinship probationary license expires no later than the last day of the fifth month from the issue date if compliance is not met before that time.</p> <p>(b) The probationary licensee may receive an initial license at any time within the probationary 5 months when compliance with probationary terms is met.</p> <p>(c) A probationary licensee whose probationary terms are not met before the expiration of that license may either expire or extend in corrective or penalty status.</p>					
<p>R501-12-15(7) A kinship specific home licensee may not accept placement of any foster child other than the foster child, or relatives to that foster child, as designated on the license certificate.</p>					
<p>R501-12-15(8) If a kinship specific licensee desires to provide general foster care services, they shall complete the following:</p> <p>(a) submit written approval from their DCFS kinship support worker to become a general foster parent to the office and the DCFS contracted recruitment and training agency to initiate required training;</p> <p>(b) close the specific license and submit to the requirements of an initial foster care license to include:</p> <p>(i) complete initial foster care application; and</p> <p>(ii) complete foster care pre-service training series with the exception session #1, if completed within the last 2 years;</p> <p>(c) submit to a home study update interview with their licensor to change child-specific content to general foster parent requirements; and</p> <p>(d) provide any new reference letters as requested.</p>					
<p>R501-12-15(9) If DCFS does not support a license change, no further licensing action will be taken, unless the issue is disputed and overturned by the office director.</p>					
<p>R501-12-15(10) In accordance with Section 26B-2-130 and the Indian Child Welfare Act, United States Code, Title 25 Sections 1901-1963, DCFS may request reduced requirements for a kinship specific licensee by submitting a variance request outlining the rules to be varied and how the request does not impact the health and safety of the specific foster child or sibling group. This requires prior written approval by the director of the office before it may become effective.</p>					

Child Placing Adoption Checklist
(Revised 12/2023)

C = Compliant

NC = Not Compliant

NA = Not Assessed during this inspection

Legal Requirements	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R501-2-3(1) In addition to this rule, all child placing adoption agencies shall comply with R495-876, R501-11, R501-2-1 through R501-2-5, R501-2-8 through R501-2-14, R501-14, R501-22, Title 58, Chapter 60; Title 62A, Chapters 2 and 4a; Section 76-7-203, 78A-4; 78B-6; 78B-13; 78B-15, and all other applicable local, State and Federal laws.						
R501-7-3(2) Child placing adoption agencies that do not arrange housing for birth mothers are exempt from R501-2-5, 10, 11, 12, and 22.						
R501-7-3(3) A child placing adoption agency shall: <ul style="list-style-type: none"> (a) be legally responsible for the child following relinquishment of the child to the adoption agency until the adoption is finalized, unless a court of competent jurisdiction or applicable law places legal responsibility with another party, in accordance with Section 78B-6-134; (b) comply with the Indian Child Welfare Act; (c) obtain a child placing foster license and comply with R501-12 if providing foster care; (d) obtain a residential support license and comply with R501-22 if providing residential support services to preexisting parents; (e) comply with the Interstate Compact on the Placement of Children, in accordance with Section 62A-4a-701 et seq; and (f) ensure that its employees, contractors, volunteers and agents comply with all laws relating to adoption services. 						
R501-7-3(4) The Division of Child and Family Services shall additionally comply with R512-40 for recruitment, home study and approval; R512-41 for qualifying and adoptive family and adoptive placement; R512-302 for responsibilities pertaining to out of home caregivers and any other section of 62A-4a and R512 that governs the provision of adoptive services to child welfare clients served by the Division of Child and Family Services. <ul style="list-style-type: none"> (a) The aforementioned child welfare statute and rule shall supersede this rule when in conflict for child welfare clients served by the Division of Child and Family Services. 						
Administrative Ethics and Responsibilities	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R501-7-3(1) Child placing adoption agencies shall: <ul style="list-style-type: none"> (a) identify and strictly adhere to accurate accounting practices, including all fee requirements of this rule; (b) always act in the best interest of a child; (i) best interest of the child and placement considering a number of factors related to the child's circumstances including age, gender, physical needs and the adoptive or prospective parent's circumstances and capacity to parent the child to adulthood and shall consider the pre-existing parent(s)' wishes when parental rights are voluntarily relinquished; (c) provide services and adhere to ethical practices that support and comply with all client rights and responsibilities; (d) develop and comply with processes that are free from fraud, duress or undue influence and avoid and mitigate conflicts of interest in order to preserve the protections of clients to include: <ul style="list-style-type: none"> (i) not give preferential treatment to its board members, employees, volunteers, agents, consultants, independent contractors, donors, or prospective families with regard to child placing decisions; (ii) not discriminate or solicitations concessions from an adoptive family that is under consideration for placement of a child or pending finalization of an adoption; (A) generalized mass solicitation through newsletters or the media shall not constitute a violation under this rule; (iii) not coercing or incentivizing pre-existing parent(s) to make a plan of adoption or to relinquish their parental rights; (iv) not permitting its employees, volunteers, agents, consultants, or independent contractors to provide adoption services to both the pre-existing parent(s) and the adoptive parent(s) unless all parties are made aware of potential conflicts of interest and sign a voluntary contract; (v) not permit clients to select in independent attorney and other non-child placing adoption services; (A) client bears the responsibility to select a competent provider and their choice may affect costs incurred; (vi) not referring any individual to services in which the agency's board members, volunteers, employees, agents, consultants, independent contractors, or their respective families are engaged, without first disclosing potential conflicts of interest and informing said individuals that they are free to select independent adoption service providers; and (vii) require members of the governing body to disclose, in writing, to the chairperson of the governing body and the Office of Licensing, any direct or indirect financial interest in the agency; (e) manage and share information with still potential adoptive parent(s) regarding unknown pre-existing parent(s), Indian Child Welfare Act, and any known information that could potentially disrupt an adoptive placement; (f) respond to requests for information from clients and former clients within 30 days and document all requests for information or actual sharing of information to/from birth families, adoptees, adoptive families, and others; (iii) provide non-identifying information in client files that can allowably be shared, and shall comply with previous releases and established policies; (iv) the agency shall refer clients to the Mutual-Consent Voluntary Adoption Registry through Department of Health Vital Records if adoptees or birth family members want to reunite; and (v) in more urgent circumstances that could have serious implication to any client or prior client, the agency will utilize prior contact and emergency contact information, as well as engage in simple social media and search engine inquiries to locate and communicate with former clients; (vi) agencies may engage in a fee based more extensive service to search if desired; (vii) the agency may share information with third party search providers only if consent has been given by the affected party; (viii) will not re-present facts or allowable adoptive parent(s) or child/pre-existing parent(s) information related to services, involved individuals, or the applicable law; (f) accept and utilize third party assessments, evaluations, references, home studies or pre-placement evaluations only if received directly from the document's author; (g) preserve the confidentiality and content of client files; (h) with respect to adoption services an agency shall refer to or utilize only agencies, entities or individuals that are authorized to provide the service by the laws of this state or the jurisdiction in which that agency, entity or individual performs the service; (i) provide at least 30 days' prior written notice to the Office of Licensing that the agency is: <ul style="list-style-type: none"> (i) dissolving or ceasing to provide child placing services; or (ii) implementing significant changes in adoption services provided, such as adding or eliminating intercountry adoption. (j) Provide copies of all documents signed by clients directly to those clients upon request. 						

R501-7-5(2) In addition to policy and procedure requirements outlined in R501-2, agencies shall develop and adhere to the following adoption-related policies and procedures: (a) a process regarding how to transfer a relinquishment to another agency in compliance with 78B-6-124 (7); (b) a process to identify a high needs child as defined in 62A-4a-601, and once identified comply with 62A-4a-609 including disclosure and training to adoptive parent(s); (c) a process for the temporary placement of children awaiting adoptive placement for over 30-days; (d) a process and standards for the evaluation and approval or denial of an adoptive home study or pre-placement evaluation; (e) process and standards for the evaluation and approval or denial of applications from prospective adoptive parents; (f) a written plan for contact, file maintenance, and record retrieval in the event that the agency ceases to provide child placement adoption services; (i) this plan may involve a secondary licensed or file retention entity; (g) a process for identifying the pre-existing parent(s) utilization of alternative payment sources including any public assistance that may defray adoptive parent(s) costs; (h) policy identifying what is allowable adoptive parent(s) information to be shared with potential adoptive parent(s), including the development of releases of information as needed; (i) policy identifying what is allowable adoptive parent(s) information to be shared with pre-existing parent(s) including the development of releases of information as needed; (j) process for refunds to include a process for refunding adoptive parents monies they paid in excess of actual expenses or disclosed agency fees; and (k) written policy to be provided to the adoptive parent(s) outlining how the match is determined, its relationship to any fees, and how it is managed by the agency.						
Staffing Requirements	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R501-7-5(1) A child placing adoption agency shall have at least one social work supervisor responsible for directly supervising all staff and volunteers who provide adoption services to clients.						
R501-7-5(2) If an Executive Director is serving as a social work supervisor, they shall not supervise more than four staff and volunteers who provide adoption services to clients.						
R501-7-5(3) Each social work supervisor shall be licensed in this state as a mental health therapist, shall comply with the Utah Mental Health Professional Practice Act, and shall have at least one year of full time paid professional experience in a licensed child placing adoption agency.						
R501-7-5(4) A social work supervisor may not supervise more than eight staff and volunteers who provide adoption services to clients.						
R501-7-5(5) An executive director shall have at least one year of full time paid experience in a licensed child placing adoption agency.						
R501-7-5(6) All staff that provide services shall receive a minimum of 20 hours of pre-service training, prior to independently providing direct client services, and 12 hours annual in-service training. (a) Training topics shall include: (i) agency policy and procedures; (ii) adoption ethics, laws, and rules; (iii) the provision of professional and trauma informed adoption practices; and (iv) any evaluations they will be performing. (b) Staff will be supervised for adherence to training topics.						
Fees and Disclosures	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R501-7-6(1) All fees, costs and expenses whether actual or estimated must be itemized in accordance with this Rule and Utah Code Ann. 78B-6-140.						
R501-7-6(2) A child placing adoption agency may charge adoptive parent(s) agency fees which include administrative and professional services provided on behalf of the adoptive parent(s), including but not limited to: (a) agency overhead; (b) personnel; (c) background screenings for adoptive parent(s) and staff; (d) travel; (e) insurance; (f) legal services for the agency; (g) advertising/recruiting; (h) post-placement visit; (i) agency staff support throughout pregnancy, birth, placement and post placement; (j) home studies, if completed by the agency; and (k) home study updates, if completed by the agency; (l) copies of purchased home studies and updates are to be provided to the subjects of these documents upon request.						
R501-7-6(3) An agency fee may be charged as a flat fee or be itemized and both must clarify what is included or specifically excluded.						
R501-7-6(4) Any fee billed inclusive of an agency fee shall not be billed additionally outside of that agency fee.						
R501-7-6(5) An agency may charge and accept payment from the prospective adoptive parent(s) only for reasonable, actual, estimated or outstanding adoption related expenses of the pre-existing parent(s) which are itemized outside of any agency fee. These expenses are limited to the following: (a) additional counseling; (b) adoption related legal fees to utilize an independent attorney for the adoption; (c) maternity expenses limited to pregnancy related clothing, pre-natal vitamins, other non-medical pregnancy related expenses; (d) medical and hospital expenses limited to pregnancy and childbirth related medical expenses for the mother/child; and (e) temporary living expenses limited to the duration of the pregnancy and confinement of the pre-existing parent(s) or directly affected person and include only: (i) food; (ii) transportation including bus passes, gasoline, car maintenance, car payments, and taxi/ride share services; (iii) housing; (iv) utilities and telephone; (v) vehicle and minimal incidentals; (vi) sufficient apparel for the weather and circumstances; (vii) daily living household supplies; (viii) travel between the mother's or father's home and the location where the child will be born or placed; (f) any other expense not explicitly outlined in this rule shall be reasonably related to the adoption, incurred for a reasonable amount and not paid for the purpose of inducing a birth parent to place the child for adoption. If such fees are charged or paid, the agency shall notify the Office of Licensing.						

R501-7-6(6) An agency may charge an adoptive or potential adoptive parent(s) for either the actual adoption related expenses in regard to the pre-existing parent(s) and directly affected individuals or a flat fee estimate of adoption related expenses. Regardless of the fee structure, fees and expenses must be itemized in accordance with this Rule and Utah Code Ann. 78B-6-140. (a) the agency must disclose whether their adoption related expenses charged are actual or estimated and share the agency policy for refunds or reshippment prior to charging adoptive parent(s). (b) If the agency charges a flat fee for adoption related expenses, the amount must be stated in the disclosure outlined in (7) of this section and the policies related to refunds, increases or decreases in those fees must be outlined in the disclosure. (c) If the agency charges a fixed amount for adoption related expenses, it must be outlined in the disclosure and capped at that amount. It shall be disclosed whether or not the flat adoption related expenses are or are not refundable in the disclosure. (d) Over collection of adoption related expenses that are not refunded is only permissible with estimated adoption related expenses if: (i) any average will be used to support the adoption related expenses of another adoption of the adoptive parent(s) that paid the expenses originally or refunded to the adoptive parent(s) upon their request; (ii) any over-collected adoption related expenses shall not be used for the benefit of the agency or anyone associated with the licensee or as a payment to a pre-existing parent.						
R501-7-6(7) A child placing adoption agency shall provide a written disclosure statement of all agency fees, flat fees and adoption related expenses that prospective adoptive parent(s) may incur before the agency accepts any payments, or enters into any agreement with the prospective adoptive parent(s). (a) The written disclosure shall identify and itemize: (i) each fee and the services associated with each fee; and (ii) each adoption-related expense. (b) If providing only estimated expenses provide the average cost for each itemized fee and each adoption-related expense for the preceding two fiscal years, and the maximum amount that may be charged for each fee and adoption related expense. (c) The written disclosure shall identify any fee that is non-refundable. (d) If the agency is charging a flat fee, the disclosure shall contain full acknowledgment by prospective adoptive parents of this fee structure and refund ability of any portion of the flat fee. (e) The written disclosure shall be signed and dated by the prospective adoptive parent(s) and an agency representative and maintained in the adoptive parent(s) file.						
R501-7-6(8) An agency shall not charge prospective adoptive parent(s) for any fees or adoption related expenses that the client obtained independently or were paid for by another entity, including any public assistance.						
R501-7-6(9) An agency shall not charge adoptive parent(s) for any fee that was not included in the written disclosure without providing written agreement and justification approved by the prospective adoptive parent(s), and either the Office of Licensing or the Court.						
R501-7-6(10) An agency shall not directly or indirectly offer, give, or attempt to give money or another thing of value in order to induce or influence pre-existing parent(s) in the adoption process.						
R501-7-6(11) The agency shall retain documentation for any adoption related expense exceeding twenty five dollars, which may include receipts, lease agreements, signed fund transfers to pre-existing parent(s) in reasonable amounts in order to cover basic daily needs such as food and household supplies, and any other pertinent documentation.						
R501-7-6(12) An agency shall not charge the adoptive parent(s) for the temporary living expenses of any person other than the pre-existing parent(s) or directly affected persons.						
R501-7-6(13) An agency shall not charge the adoptive parent(s) for any expenses that are post-confinement, with the exception of post-placement counseling if agreed upon.						
R501-7-6(14) A birth mother who decides not to place her child shall not be responsible for reimbursing the costs of any goods or services provided to her by the prospective adoptive parent(s) or the child placing adoption agency during her pregnancy unless they are first convicted of fraud.						
R501-7-6(15) Child placing adoption agencies that provide or pay for pre-existing parent(s) transportation to the State of Utah shall also ensure that the pre-existing parent(s)' return transportation to their home state is provided, regardless of whether the pre-existing parent(s) decides to relinquish parental rights.						
R501-7-6(16) The agency shall create an affidavit of itemized accounting of the actual fees and adoption related expenses paid by the adoptive parents. (a) The agency shall utilize an affidavit form provided by the Office of Licensing or a form inclusive of the Office's form content. (b) The affidavit shall be executed as follows: (i) a copy shall be signed by the adoptive parent(s); (ii) all adoption related expenses shall be itemized and include a declaration that Section 76-7-203 has not been violated; (A) itemized expenses in the affidavit shall align with those verified by pre-existing parents in R501-7-11(3)(n); (iii) the affidavit shall include a declaration of all gifts, property, or other items that have been or will be provided to the pre-existing parent(s), including source of the gifts, property or other items; (iv) the affidavit shall include a declaration of the state of the residence of the pre-existing parent(s) and the prospective adoptive parent(s); (v) the affidavit shall include a declaration of all public funds used for any medical or hospital costs in connection with the pregnancy, delivery of the child, or care of the child; and (vi) the affidavit shall include the signature of an agency representative with adequate knowledge to verify the contents of the affidavit are accurate and complete.						
Services to Pre-existing Parents	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes

R501-7-7(2) Child placing adoption agencies other than DCFS shall: <ul style="list-style-type: none"> (a) offer pre-existing parent(s) all available allowable adoptive parent(s) information unless waived in full or part by the pre-existing parent(s) as early in the matching process or consent to adopt process as reasonable; (b) per 78B-6-119, accept voluntary relinquishments only after offering a minimum of three sessions of adoption related counseling to a child placing agency before relinquishing a child for adoption prior to accepting the consent or relinquishment. This counseling shall include at a minimum: <ul style="list-style-type: none"> (i) parental rights prior to relinquishment; (ii) alternative options for the child and pre-existing parent(s); and (iii) adoption issues including grief/loss; (c) provide complete and accurate information to the pre-existing parent(s) regarding their decision to consent to adopt or relinquish; (d) meet in-person, via video, or via telephone with the pre-existing parent(s) to review the designated adoption orientation form provided by the Office; (e) pre-existing parent(s) will be given the opportunity for questions/clarifications before initialing and signing the document; (f) a pre-existing parent(s) under the age of 18 shall meet privately with the adoption worker unless they waive the option to meet privately; (g) ensure the written consent to relinquishment includes language acknowledging that the pre-existing parent(s) was afforded adoption related counseling, and that the relinquishment is completely voluntary, permanent and irrevocable under Utah Law once signed; (h) a child placing adoption agency shall wait at least 24 hours after the birth of a child before taking the birth mother's relinquishment of parental rights or legal consent to the adoption of her child, in accordance with Section 78B-6-125 or the laws of the state governing the relinquishment. 						
R501-7-7(3) If an agency arranges housing for pre-existing parents, assure that such housing complies with the following minimum standards: <ul style="list-style-type: none"> (a) housing is in compliance with health, fire, zoning, and other applicable laws and regulations; (b) if the housing meets the definition of Residential Support (R501-22) the agency shall obtain a Residential Support license through the Office of Licensing; (c) housing is clean, well-maintained and adequately furnished; (d) birth mothers shall not share bedrooms with other birth mothers; (e) laundry equipment and supplies shall be available; and (f) adequate nutritious food, or resources to obtain food, is available. 						
R501-7-7(7) The agency shall be responsible to encourage and facilitate prenatal and medical care of the birth mother.						
R501-7-7(8) A child placing agency shall inform pre-existing parent(s) of their information that will be shared with adoptive parent(s) including their detailed health history and a genetic and social history in accordance with Section 78B-6-143.						
R501-7-7(9) A child placing adoption agency shall inform pre-existing parent(s) of Utah's Mutual Consent Voluntary Adoption Registry, Section 78B-6-144.						
R501-7-7(10) A child placing adoption agency shall assist the birth and adoptive parent(s) in creating a post-placement contact agreement, including: <ul style="list-style-type: none"> (a) whether the birth parent wants to disclose their identity to the adoptee or the adoptive family; (b) contact about or from the child or parents, directly or indirectly, in the future and how that will occur; (c) that such agreements are non-binding except in certain public child welfare cases; and (d) Contact agreements shall be updated only when initiated by the previous clients and maintained in case file records. 						
Services to Children	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R501-7-8(1) Assessment. <ul style="list-style-type: none"> (a) A needs assessment for the child shall be completed to obtain information and identify characteristics which should be given consideration in selecting and preparing a child for an adoptive family and promote appropriate placement for the child. (b) The needs of the child will be determined through this assessment and shall evaluate for high needs or special needs as defined in this chapter. (c) A report(s) regarding all assessment information shall be given to the adoptive parent(s) prior to placement. (d) If the child is an infant that is not defined as special needs or high need, information shall be obtained from the pre-existing parent(s) and any legal guardian to include all allowable child/pre-existing parent(s) information as defined in this chapter. This information should include: <ul style="list-style-type: none"> (i) If the child is older than six months the same information from Section 2 above, shall be obtained from the birth or legal parent(s). (ii) additional information shall be obtained using an interdisciplinary approach which may include input from: caseworkers, therapists, pediatricians, teachers, previous caregivers, foster parents, nurses, psychologists, and other consultants. (e) The assessment shall additionally include: <ul style="list-style-type: none"> (i) information pertaining to changes in caregivers including foster care, separation experiences and description of the child's behavior; (ii) all evaluations regarding a child's development including: physical, social, emotional, mental health and cognitive; (iii) the child's educational records, and any special educational needs; (iv) talents and interests; and (v) if the child is identified as having special needs or is a high needs child as defined in 62A-4a-601, specific training for prospective adoptive parent(s) is statutorily mandated. 						
R501-7-8(2) Recruitment of adoptive families. <ul style="list-style-type: none"> (a) Child placing adoption agencies shall recruit adoptive families that are able to meet the needs of children the agency serves. (b) If the family states they would be open to a child with special needs or high needs, they will complete training specific to identified needs and in compliance with 62A-4a-609-2. 						
R501-7-8(3) Matching. <ul style="list-style-type: none"> (a) The selection of the adoptive family and the adoptive family's decision to adopt a specific child shall be based on the following factors: <ul style="list-style-type: none"> (i) the child's assessment; (ii) adoptive family's ability to meet the identified and potential needs of the child; (iii) the wishes of the pre-existing parent(s) who voluntarily relinquish their rights, the adoptive parent(s), and when applicable, the child, shall be considered. 						

R501-7-4(4) Placement. (a) A child placing adoption agency shall attempt to place siblings together when appropriate for the children's needs and pre-existing parent(s) wishes. (b) A child shall be placed with the adoptive family at the earliest time possible after being freed for placement or adoption. (c) A child placing adoption agency shall have an individualized written adoptive placement and transition plan that includes the child's current caregivers, the adoptive parent(s), and the child, to facilitate the child's transition into the adoptive family and ensures the family's ability to meet the child's needs. (d) The transition plan shall consider and include as applicable: (A) the child's stated preferences; (B) the child's identified religion; (C) identification of services the family and child may need based on assessment information; (D) statement of who is responsible for identifying services and who is responsible for paying for such services; (E) time frames for transition that consider and accommodate the identified and potential needs of the child in preparing the child for placement; and (F) developmentally appropriate counseling with the child to address to mitigate transition related emotional trauma. (g) If a child placing agency has custody of a child and the child is not able to be directly placed in an adoptive placement: (i) the agency may temporarily place the child in a currently home studied adoptive home for up to 30 days; or (ii) if the child needs temporary care for more than 30 days, the agency shall contract with a licensed foster care program or obtain a license to provide foster care services for children in its custody, in accordance with R501-12. (e) A private child placing adoption agency shall obtain a copy of the foster home or facility license prior to placing a child, and shall retain the license in the child's case file. (f) If a child is not placed within 30 days after relinquishment or after determination of availability for adoption by the court, the agency shall document efforts to screen the child with other child placing agencies and shall list the child with local, regional, and inter-state adoption exchanges.						
R501-7-8(5) Post Placement Service. (a) The child placing agency shall monitor and support each placement until the adoption is final. (b) An agency social worker shall contact the adoptive family within 2 weeks of the placement to offer support. This does not count as part of the post-placement visit. (c) Prior to finalization, a minimum of one in-home supervisory visit with both parents and child present shall be made by an agency social worker: (i) to assess that the child and family are adjusting and child is receiving necessary care, nurturance, medical care, and services as needed. (d) The agency shall monitor who has legal and physical responsibility for the child at all times.						
R501-7-8(6) Disruption. (a) If a disruption occurs, a child placing agency shall provide for the care of the child. (i) The placement shall: (A) be in a currently home studied adoptive home for no longer than 30 days unless it is the identified subsequent adoptive placement; (B) be in a licensed or certified foster home governed by Rule R501-12; or (C) be approved by a judge.						
Services to Adoptive Parents	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R501-7-9(2) A child placing adoption agency other than DCF shall: (a) provide the adoptive parent(s) orientation form to potential adoptive parent(s) who shall sign and initial the form and shall be offered the opportunity to ask clarifying questions prior to match or payment of any fees in excess of \$500.00; (i) adoptive parent(s) will be given the opportunity for questions/clarifications before initialing and signing the document; (b) provide prospective adoptive parent(s) with a written description of their services, fees, policies and procedures; (c) explain the adoption process and the pre-existing parent(s)' rights, including the status of any putative father, to the prospective adoptive parent(s); (i) a copy of the Office provided pre-existing parents' adoptive orientation form shall be provided to adoptive parent(s) for information purposes with an acknowledgement that they have discussed and received this information; (d) provide training as outlined in 62A-4a-609 in regards to high needs child, as required; (e) per 62A-4a-607 the agency shall inform each prospective adoptive parent(s) that the state has children available for adoption and that adoption from the Division of Child and Family Services incurs no agency fees and adoption assistance may be available when adopting children in the custody of the state; (f) (i) if the prospective parent(s) that when a child has a disability, the child may be eligible for SSI benefits and/or federal adoption assistance. The Agency shall refer the potential adoptive parent(s) to coordinate with the Division of People with Disabilities for further disability resources and with Division of Child and Family Services to apply for potential federal adoption assistance; and (g) a child placing adoption agency shall inform prospective adoptive parent(s) of Utah's Mutual Consent Voluntary Adoption Registry, Section 78B-6-144.						
R501-7-9(3) A home study completed by an adoption service provider as outlined in 78B-6-128-2(C) for each adoptive family shall include: (a) a recommendation to the court regarding the suitability of the prospective adoptive parent(s) or placement of a child; (b) a description of in-person interviews with the prospective adoptive parent(s), prospective adoptive parent(s)', children, and other individuals living in the home; (c) criminal background and child abuse screening of adoptive applicants and other adults living in the home in accordance with R501-14, and Section 53-10-108(4) and 78B-6-128; (d) (i) a written report describing the home and family history report through the Division of Child and Family Services in Utah and any out-of-state comparable entities in order to show compliance with 78B-6-128; (d) written descriptions from at least two non-related and one related references regarding the character and suitability of the prospective adoptive parent(s) for parenting an adoptive child; (e) a medical history and a doctor's report, based upon a doctor's physical examination of each applicant, made within two years prior to the date of the application; (f) description of inspections of the home, to determine whether sufficient space and facilities exist to meet the needs of the child and whether basic health and safety standards are maintained; and (g) description of documented income for each adoptive applicant and a written plan for adoptive applicants who work outside the home addressing how they shall provide security and responsible child care to meet individual child needs.						
R501-7-9(4) The adoptive applicants shall be informed, in writing, and within ten business days after the decision is made, as to the acceptance or the reasons for the denial of their home study. (a) The agency shall provide applicants with a written copy of the agency's appeal process, which shall include the right to submit a written appeal and request for reconsideration, upon order of the court in accordance with Section 78B-6-128.						
R501-7-9(5) A child placing adoption agency shall select applicants who: (a) are able to provide the continuity of a caring relationship; (b) are informed with regard to a child's ethnic, religious, cultural, and racial heritage; and (c) understand the needs of a child at various developmental stages.						

R501-7-9(6) The agency's policies regarding the consideration of religion and marital status in the selection of adoptive families shall be clearly stated in its initial consultation with prospective adoptive parent(s). This disclosure shall also be clearly stated in writing on the adoptive parents' application for services forms.						
R501-7-9(7) The agency shall verify that an applicant's income is sufficient to provide for a child's needs.						
R501-7-9(8) The agency shall not reject an applicant solely based upon the applicant's choice to work outside the home. Applicants who work outside the home shall provide a written plan describing how they shall provide security and responsible child care to meet the individual child's needs.						
R501-7-9(9) Except when authorized by court order pursuant to Section 78B-6-128, a child placing adoption agency shall not place a child in an adoptive home until the home study and each adult's criminal and abuse background screenings have been approved.						
R501-7-9(10) Matching. (a) Disclose all allowable child/pre-existing parent(s) information to the prospective adoptive family; (b) Ensure known special needs are disclosed and referrals and information are provided as necessary to prepare the family to meet the long term needs of the child; (c) A child placing adoption agency shall not make a legal risk placement unless the prospective adoptive parent(s) have first given their written consent, indicating that they have been fully informed of the specific risks involved; (d) Develop the capacities of the parents to meet the ongoing needs of the child according to the child's needs and the transition plan; (e) Matches may only occur once sufficient non-identifying information sharing has occurred to allow for informed decision making by both parties.						
R501-7-9(11) Placement. (a) A child placing adoption agency shall provide continuing support to the child and the adoptive family after placement and before finalization of the adoption, to include: (i) providing or making referrals to services such as counseling, crisis intervention, respite care, and support groups; and (ii) monitoring the child's adjustment and development. (b) The frequency of home visits, office contacts, telephone calls, and other contacts by the child placing adoption agency shall depend on the needs of the child and the adoptive family and may vary depending whether the child is an infant, an older child, or a child with medical or other challenges, and whether the adoptive parent(s) are faced with unanticipated problems. (c) The first contact after placement shall take place within two weeks of placement. (d) A minimum of one face-to-face supervisory home visit after the initial two week contact shall take place before finalization.						
R501-7-9(12) Disruption. (a) The agency may remove the child from the adoptive placement due to circumstances that may impair the child's security in the family or jeopardize the child's physical and emotional development, including but not limited to incompatibility; mental illness; seriously incapacitating illness; the death of one of the adoptive parent(s); the separation or divorce of the adoptive parent(s); the abuse, neglect, or rejection of the child; the lack of attachment to the child; or a request by the adoptive parent(s) to release the child. (b) If a child is removed from an adoptive home by a child placing adoption agency, the adoptive parent(s) shall be entitled to appeal the removal decision. (i) The agency shall provide the adoptive parent(s) written notice of their right to appeal and the procedure for appeal.						
R501-7-9(13) Finalization. (a) A child placing adoption agency shall provide assistance in finalizing the adoption.						
Intercountry Adoptions	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R501-7-10(1) All intercountry adoptions are considered high needs per 62A-4a-601 and require compliance with 62A-4a-609.						
R501-7-10(2) In addition to complying with all other rules, laws and statutes regarding adoption, a child placing adoption agency that is a primary provider of inter-country placement services shall document that it has complied with all applicable laws and regulations of the child's country of origin and the child's country of destination, and including: (a) the agency is Hague accredited by a US State approved accrediting body; (b) the child is legally freed for adoption in the country of origin; (c) the agency verifies and maintains documentation and agreements regarding the credentials and qualifications of all associates working in their behalf in foreign countries; and (d) information was provided to the adopting parents about naturalization and US citizenship proceedings.						
R501-7-10(3) A child placing adoption agency that provides intercountry adoption services shall: (a) comply with all fee requirements from R501-7-6; (b) establish additional policies and procedures to be provided to the adoptive parent applicant(s) regarding: (i) agency and adoptive parents' responsibilities regarding intercountry adoption; (ii) post adopt responsibilities; (iii) identification and disclosure of medical risks in intercountry adoption; (iv) service planning; and (v) establish an official and recorded method of fund transfers to avoid the use of direct cash transactions to pay for adoption services in other countries; (c) additionally include in the written agency fee disclosure required in R501-7-6 the following: (i) itemization of all services and total cost of providing adoption in the child's country of origin and disclosure of whether the fees are paid directly or through the agency to include: (A) foreign country/legal fees; (B) cost of documents required by the agency and by the foreign government as well as costs of apostille or authentication of these documents; (C) required fees prior to USCIS; (D) estimated cost of travel to the foreign country; (E) translation of documents provided to the foreign adoption officials; (F) costs of child care; (G) parent education costs; (H) adopted child passport; (I) USCIS-required medical exam costs; (J) transportation expenses; (K) any other administrative fees that may apply; (ii) itemization of any mandatory payments to child welfare programs in the country of origin including: (A) any fixed contributions amounts; (B) intended use of payments; and (C) manner in which the transaction will be recorded and accounted for; (d) provide all applicants with written policies governing refunds; (e) notify all applicants within ten business days when information is received that a foreign country is suspending its						

<p>Refugee adoptive applicants within ten business days when information is received that a foreign country is suspending its adoption program;</p> <p>(f) verify and maintain documentation regarding the credentials and qualifications of agents working in their behalf in foreign countries; and</p> <p>(g) in addition to adoptive parents(s) and child file content requirements in R501-7-11, intercountry adoption files shall also include:</p> <ul style="list-style-type: none"> (i) signed agency agreements and/or contracts; (ii) copies of all child information provided by the foreign country; (iii) copies of adoption documents required by the adoption officials in the foreign country; (iv) copies of all child information provided by the foreign country; (v) post-adoption reports required by the foreign country; and (vi) copy of the adoption finalization from the foreign country. 						
Administrative Documentation	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
R501-7-11(2) Adoptive Parent(s) Files shall cross-reference all related files and shall contain:						
(a) signed and dated application for service including agency disclosure of religion and marital status policies on the application;						
(b) signed and dated prospective parent(s) adoptive orientation form as required and provided by DHS Office of Licensing;						
(c) proof that the content of the prospective parent(s) adoption orientation form was provided to adoptive parent(s);						
(d) proof of compliance with GSA-4p-607 regarding the availability of children in state custody for adoption;						
(e) itemized written fee disclosure statement as described in Section R501-7-6 signed and dated by prospective adoptive parent(s) and agency representative prior to entering any agreements as outlined in;						
(f) proof of identification or documented due diligence to determine identity;						
(g) copies of marriage certificates, divorce papers, custody and visitation orders, proof of US citizenship;						
(h) proof that all allowable child/pre-existing parents(s) information was shared with adoptive parent(s);						
(i) written agreement and justification for any charges or fees assessed by the prospective adoptive parent(s) for services provided;						
(j) documentation and remittance of all reasonable and actual adoption-related expenses that exceed \$25.00 charged to the adoptive parent(s) as outlined in R501-7-6 to include:						
(l) written agreement and justification for any expenses charged to the prospective adoptive parent(s) outside the fee disclosure statement;						
(m) affidavit signed by adoptive parent(s) and agency representative outlining itemized actual expenditures made on behalf of the pre-existing parent(s) as outlined in fees disclosures section R501-7-6;						
(n) record of all payments received and disbursed to date;						
(o) written agreement and justification for any expenses charged to the prospective adoptive parent(s) outside the fee disclosure statement;						
(p) physician report for each prospective adoptive parent;						
(q) background clearances for prospective adoptive parent(s) and all adults over age 18 residing in the home;						
(r) proof of ability to provide health care for an adopted child;						
(s) 4 letters of reference;						
(t) documentation of all requests for information or sharing of information to include:						
(u) post adopt information exchange with pre-existing parent(s); and						
(v) post adopt contact terms with pre-existing parent(s);						
(w) transition plan for child transition to adoptive placement;						
(x) written consent to legal risk placement if applicable;						
(y) documentation of the initial agency contact with the adoptive family within 2 weeks of placement;						
(z) documentation of the in-home face-to-face supervisory visit prior to finalization post two week visit;						
(aa) original signed copy of the order of adoption;						
(bb) referral to Mutual Consent Registry;						
(cc) signed declaration of each potential birth father to be filed with the court per 78B-6-110.5; and						
(dd) any other documentation required in order to show compliance with this Rule.						
R501-7-11(3) Pre-existing parent(s) files shall cross reference all related files and shall contain:						
(a) signed and dated application for service to include declaration of birth mother's husband or any alleged father's relationship to the child in accordance with 78B-6-110.5;						
(b) proof of identification or documented due diligence to determine identity;						
(c) signed and dated pre-existing parent(s) adoptive orientation form as required and provided by DHS Office of Licensing;						
(d) declaration, certificate or written statement of putative registry search and disclosure of search results from each state identified by the birth mother in compliance with 78B-6-110.5 Sections 1 and 2; and any communications with potential birth fathers;						
(e) documentation of any requests for information or sharing of information;						
(f) genetic and social history, and health history;						
(g) case notes documenting the process including pre relinquishment counseling;						
(h) original or certified copies of relinquishment transfer or decree of termination of birth mother and birth father rights per 78B-6-125 (or the state governing relinquishment);						
(i) proof that non-identifying information was provided re: the adoptive parent(s);						
(j) proof of compliance with 78B-6-143 and 78B-6-144;						
(k) copies of marriage certificates, divorce papers, custody and visitation orders, if any;						
(l) certified copies of death certificates, if any, of pre-existing parent(s);						
(m) post-existing parent(s) written agreements or refusals of:						
(n) written consent to placement;						
(o) authorization of release of information;						
(p) future third party searcher;						
(q) post adopt information exchange with adoptive parent(s);						
(r) post adopt contact terms;						
(s) verification that all itemized goods and services billed to the adoptive parent(s) were actually provided to and signed upon receipt to the pre-existing parent(s);						
(t) documentation of alternative payment sources, including public assistance;						
(u) referral to Mutual Consent Registry; and						
(v) any other documentation required in order to show compliance with this rule.						
R501-7-11(4) Child Files shall cross reference all related files and shall contain:						
(a) needs assessments, evaluations, family background study of current and historical physical, psychological, genetic and developmental health information as required in R501-7-8 A and B;						
(b) individualized assessment determining which adoptive family was selected and why as a means to meet all of the identified wishes and needs of all involved;						
(c) documentation of all services provided and referred;						
(d) stories of the DHS licenses for children placed in outside agency foster care;						
(e) transition plan for child to adoptive placement; and						
(f) any other documentation required in order to show compliance with this rule.						

<p>R501-7-115 (b) If any records required in this Rule are not obtained, the child placing adoption agency shall provide documentation of its efforts to obtain those records.</p> <p>(b) All case files shall be retained for a minimum of 100 years from the date the case is closed.</p> <p>(c) If not continuing to operate and incapable of maintaining their own files for 100 years, the agency shall notify the Office of Licensing and post publicly where the records shall be stored;</p> <p>(i) it is permissible for a closed child placing adoption agency to transfer closed adoptive files to another licensed child placing for maintenance as long as the chain of control is clear and transparent to the Office and prior clients and there is good reason to believe that the files will be maintained according to law;</p> <p>(ii) if the agency ceases to exist or is taken over by another entity, the agency shall notify the Office of Licensing and each client where the records shall be stored; and</p> <p>(iii) enable record retrieval by individuals with a right to access them;</p> <p>(d) All adoption records shall be confidential and shall be maintained in a secure location when not in active use;</p> <p>(i) adoption records shall be accessible only by authorized agency employees or agents;</p> <p>(ii) records information shall be provided in appropriate consent forms, except as required by law.</p> <p>(e) Records regarding the adoptive parents, with the exception of reference letters, are not sealed and information in adoption files can be provided to adoptive parent(s) upon request.</p> <p>(f) A child placing adoption agency shall maintain and provide accurate annual statistics describing the number of applications received the number of children, pre-existing parent(s), and adoptive parent(s) served, and the number of adoptions and disruptions, and the number of children in agency custody.</p>					
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Unannounced Inspection Checklist

(Revised 12/2023)

C = Compliant
NC = Not Compliant
NA = Not Assessed during this inspection

