

 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. <i>(Revised 04/2024)</i>	
Provider Name:		Facility ID:		Phone Number:		Notes
Site Name or Address:				Email Address:		
Approved Capacity:		# of Present Residents\Clients:				
Please review the following items prior to the inspection: (Mark with a check mark if completed and make any necessary notes)				Please review the following items during the inspection: (Mark with a check mark if completed and make any necessary notes)		
	Current backgrounds in DACS				Any active rule variances	
	Current staff roster collected				Introduce yourself and any DHHS staff	
	Any license restrictions or conditions				Staff Interviews	
	Any needed rule variances				Clients Interviews	
Inspection Information:						
- 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.						
- If the only non compliance items are documentation and/or records, please submit them by the <i>correction required date</i> listed. A licensor may conduct a follow-up inspection to verify compliance and maintenance of any noncompliance.						
Signature Information						
Inspection Type:		Date:		Time Started On-site:		Time Ended On-site:
Number of Non Compliant Items:			Name of Individual Informed of this Inspection:			
Licensor(s) Conducting this Inspection:					OL Staff Observing Inspection:	
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.				

General Provisions - Inspection Checklist

(Revised 04/2024)

**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 client records; and (c) each staff and client.						
R380-600-3(5) An applicant seeking an initial or renewal license or certificate to operate a program or facility shall submit: (c) except as described in Subsection 26B-2-120(12), a background clearance for each covered individual						
R501-14-4(3)(a) The screening agent shall keep their program's roster and employee information current in the online system. (b) The screening agent shall check the roster at least monthly to verify employee information and the employment of employees due for a renewal review. (c) When an employee no longer works for the program, the screening agent shall separate that employee from the program's roster in the online system within five days of employee separation from the program.						
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.						
R380-600-3(24) The provider shall post their current license or certificate, except in a foster home, on the premises in a place readily visible and accessible to the public.						
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.						

<p>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:</p> <p>(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 occurrence;</p> <p>(b) notify the legal guardian of each involved client within a 24-hour period from the time of the incident;</p> <p>(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</p> <p>(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.</p>						
<p>Program Policies, Procedures, and Safe Practices</p>	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
<p>R501-1-4(2) The licensee shall develop, implement, and comply with safe practices that:</p> <p>(a) ensure client health and safety;</p> <p>(b) ensure the needs of the client population served are met;</p> <p>(c) ensure that none of the program practices conflict with any administrative rule or statute before implementation; and</p> <p>(d) inform staff of how to manage any unique circumstances regarding the specific site's physical facility, supervision, community safety, and mixing populations.</p>						
<p>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.</p>						
<p>Residential Programs Additional Safe Practices</p>	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
<p>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:</p> <p>(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;</p> <p>(b) if applicable, inform staff and clients of the medication self-administration process;</p> <p>(c) if storing and administering medications, train staff to administer medication and the process to be followed;</p> <p>(d) how staff record medication dosages according to prescriptions;</p> <p>(e) how staff monitor for and record effects and side effects of medications; and</p> <p>(f) how staff log doses and record and report medication errors.</p>						
<p>R501-1-5(2) The licensee shall ensure the care, vaccination, licensure, and maintenance of any animals on-site to include:</p> <p>(a) assessment of pet allergies for any clients interacting with animals in the program;</p> <p>(b) maintenance of required examinations, registrations, and vaccinations; and</p> <p>(c) supervision of clients in the presence of animals.</p>						
<p>R501-1-5(3) The licensee shall have separate space for clients showing symptoms of an infectious disease.</p>						
<p>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.</p>						
<p>Program Administrative and Direct Service Requirements</p>	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes

<p>R501-1-6(1) The licensee shall clearly identify services to the office, public, potential client, parent, or guardian regarding:</p> <ul style="list-style-type: none"> (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) eligibility criteria outlining behavior, diagnosis, situation, population, and age that can be safely served, including: (f) an outline of the behaviors and presenting issues that would be reason for discharge or exclusion from the program; and (g) 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; (h) each cost, fee, and expense for a service and refund policy; and (i) identification of each non-clinical, extracurricular, or supplemental service offered or referred. 						
<p>R501-1-6(2) The licensee shall post the following in conspicuous places where each visitor, staff, and client may view:</p> <ul style="list-style-type: none"> (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) any office notice of agency action; (e) a client rights poster in a residential setting except in a foster home or where prohibited by Settings Final Rule; and (f) department code of conduct poster. 						
<p>R501-1-6(3) The licensee shall maintain compliance with or documentation of an exemption from any of the following requirements:</p> <ul style="list-style-type: none"> (a) capacity determinations that include each staff and client on premises and may not exceed the capacity limits placed by local authorities; (b) licensure and registration of any vehicles used to transport clients. 						
<p>R501-1-6(5) The licensee shall maintain and make the following available to the department upon request: (d) vehicle insurance</p>						
<p>R501-1-6(6) The licensee shall ensure:</p> <ul style="list-style-type: none"> (a) current staff and client lists are available at each licensed site; (b) 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; (c) 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. 						
<p>R501-1-6(8) A licensee offering school on-site shall:</p> <ul style="list-style-type: none"> (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. 						
<p>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</p>						
<p>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.</p>						
<p>Residential Program Additional Administration and Direct Services Requirements</p>	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes

<p>R501-1-7(1) A residential program licensee shall additionally:</p> <ul style="list-style-type: none"> (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. 						
<p>R501-1-7(3) A congregate care program licensee may allow an individual turning 18 to remain in the program if:</p> <ul style="list-style-type: none"> (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 documented need for the individual to remain in the program; (c) the licensee 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: <ul style="list-style-type: none"> (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. 						
<p>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:</p> <ul style="list-style-type: none"> (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: <ul style="list-style-type: none"> (i) the program operates in an area of limited or unreliable phone accessibility or coverage; (ii) there is significant risk of harm or danger to client safety by providing youth with unsupervised telephone access; (iii) the 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. 						
<p>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.</p> <p>(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.</p>						
<p>Program Physical Facilities and Safety</p>	<p>C</p>	<p>NC</p>	<p>NA</p>	<p>Date to be corrected by</p>	<p>Corrected During Inspection</p>	<p>Notes</p>

<p>R501-1-8(1) The licensee shall ensure:</p> <ul style="list-style-type: none"> (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. 						
<p>R501-1-8(2) The licensee shall accommodate a client with physical disabilities as needed or appropriately refer to comparable services.</p>						
<p>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.</p>						
<p>R501-1-8(4) The licensee shall maintain a first aid kit that contains at least:</p> <ul style="list-style-type: none"> (a) bandages of different sizes; (b) tweezers; (c) antiseptic; and (d) disposable sterile gloves. 						
<p>Residential Program Additional Facilities and Safety Requirements</p>	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
<p>R501-1-9(1) A residential licensee shall ensure:</p> <ul style="list-style-type: none"> (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 bathroom is placed to allow 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. 						
<p>R501-1-9(2) A residential program licensee serving individuals with disabilities shall house no more than two clients in each bedroom.</p>						

<p>R501-1-9(3) The licensee utilizing seclusion rooms shall ensure the following:</p> <ul style="list-style-type: none"> (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. 						
<p>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.</p>						
<p>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:</p> <ul style="list-style-type: none"> (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. 						
<p>Food Service Requirements</p>	<p>C</p>	<p>NC</p>	<p>NA</p>	<p>Date to be corrected by</p>	<p>Corrected During Inspection</p>	<p>Notes</p>
<p>R501-1-10(2) A licensee that provides meals shall:</p> <ul style="list-style-type: none"> (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 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: <ul style="list-style-type: none"> (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. 						
<p>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.</p>						
<p>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.</p>						
<p>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:</p> <ul style="list-style-type: none"> (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. 						

<p>R501-1-10(6) If meals are prepared by clients, the licensee shall inform staff and clients in writing of the following:</p> <ul style="list-style-type: none"> (a) rules and privileges of kitchen use; (b) menu planning and procedures; (c) sharing self-prepared food; (d) nutrition and sanitation requirements; (e) schedule of responsibilities; and (f) shopping and storage responsibilities. 						
<p>Program Client Record Requirements</p>	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
<p>R501-1-11(1) The licensee shall maintain client information to include the following:</p> <ul style="list-style-type: none"> (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 serving substance use disorder clients shall maintain compliance with an initial and annual client tuberculosis screening results in each client record; (d) any information that could affect health safety or well-being of the client including each medication, allergy, chronic condition or communicable disease; (e) intake screening and assessment; (f) discharge documentation; (g) treatment or service plan; (h) progress notes and services provided with date and signature of staff completing each entry; (i) individualized assessment for restriction of access to on-site items that could be used as weapons, for self-directed violence, or as an intoxicant; (j) any referral arrangements made by the program; (k) client or guardian signed consent or court order of commitment to services in lieu of signed consent for each treatment and non-clinical service; (l) summary of attendance and absences 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. 						
<p>Program Intake and Discharge Requirements</p>	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
<p>R501-1-12(1) The licensee shall complete an intake screening before accepting a client into the program that includes at least:</p> <ul style="list-style-type: none"> (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. 						
<p>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.</p>						
<p>R501-1-12(3) A licensee serving incarcerated or court-mandated justice involved clients shall:</p> <ul style="list-style-type: none"> (a) conduct a criminogenic risk assessment; (c) separate high and low criminogenic risk populations. 						

<p>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:</p> <ul style="list-style-type: none"> (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: <ul style="list-style-type: none"> (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. 						
<p>R501-1-12(5) The licensee shall ensure that a discharge plan identifies resources available to a client and includes:</p> <ul style="list-style-type: none"> (a) reason for discharge or transfer; (b) aftercare plan; (c) summary of services provided; and (d) progress evaluation. 						
<p>Residential Additional Program Intake and Discharge Requirements</p>	<p>C</p>	<p>NC</p>	<p>NA</p>	<p>Date to be corrected by</p>	<p>Corrected During Inspection</p>	<p>Notes</p>
<p>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:</p> <ul style="list-style-type: none"> (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. 						
<p>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).</p>						
<p>R501-1-13(3) A congregate care program licensee shall ensure that each congregate care disruption plan complies with the following:</p> <ul style="list-style-type: none"> (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: <ul style="list-style-type: none"> (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. 						
<p>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.</p>						
<p>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.</p> <ul style="list-style-type: none"> (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. 						

Program Clinical Services	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
<p>R501-1-14(1) A licensee that offers clinical treatment shall:</p> <p>(a) assign a clinical director to ensure that assessment, treatment, and service planning practices are:</p> <p>(i) regularly reviewed and updated;</p> <p>(ii) individualized; and</p> <p>(iii) designed to involve the participation of each client or each client's parent or guardian;</p> <p>(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;</p> <p>(c) ensure client treatment plans are developed and signed by a licensed clinical professional within 30 days of admission;</p> <p>(d) ensure discharge goals are identified in the initial treatment plan and treatment goals are structured around the identified discharge goals and objectives;</p> <p>(e) ensure that each client identified for treatment receives individual treatment at least weekly; and</p> <p>(f) ensure any missing individual weekly treatment is justified, approved, and documented by the clinical director.</p>						
<p>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.</p> <p>(b) A non-residential program licensee who offers clinical treatment may alter the weekly therapy requirement as designated in the individual's treatment plan.</p>						
<p>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.</p>						
<p>R501-1-14(5) The licensee shall make any records available to the department for review upon request.</p>						
Program Staffing	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
<p>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.</p>						
<p>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.</p>						
<p>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.</p>						
<p>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;</p>						
<p>R501-1-15(5) A licensee who serves clients with substance use disorder shall ensure each staff is screened for tuberculosis.</p>						
<p>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.</p>						
<p>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.</p>						
<p>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.</p>						
<p>R501-1-15(9) The licensee shall create and maintain personnel information for each staff member, contracted employee, and volunteer.</p>						

<p>R501-1-15(10) The licensee shall ensure that personnel information includes:</p> <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 R501-1-14; (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. 						
<p>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.</p>						
<p>Personnel Training Requirements</p>	<p>C</p>	<p>NC</p>	<p>NA</p>	<p>Date to be corrected by</p>	<p>Corrected During Inspection</p>	<p>Notes</p>
<p>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:</p> <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 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 seclusion; (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 categorial 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 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 pose a 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.						
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Child Placing Foster Checklist

(Revised 01/2024)

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.						
<p>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.</p> <p>(a) The office or agency shall determine the type of professional mental health examination required based on the nature of the presenting concerns.</p> <p>(b) The office or agency administration shall collaborate with a clinical professional to make the determination of need and type of examination required.</p> <p>(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.</p> <p>(d) The foster parent or foster parent applicant shall pay for any requested medical or mental health examinations.</p> <p>(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.</p>						

<p>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.</p> <p>(a) The foster parent applicant shall select referents who are knowledgeable regarding the ability of the applicant to provide a safe environment and to nurture foster children.</p> <p>(b) The foster parent applicant shall select one referent that is a relative of the applicant and three non-relatives.</p> <p>(c) The agency or office shall only consider the four original reference individuals submitted.</p> <p>(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.</p> <p>(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.</p>						
<p>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.</p> <p>(a) A background screening is also required for any new individual over the age of 18 who moves into the home.</p> <p>(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.</p> <p>(c) The foster parent may not permit any person without an office approved background clearance to have unsupervised direct access to a foster child unless:</p> <p>(i) the person is a provider of incidental care; or</p> <p>(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.</p> <p>(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.</p> <p>(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.</p> <p>(f) In accordance with Section 80-2-1001, the office 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.</p>						
<p>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.</p> <p>(a) If the home study is being conducted for adoptive purposes, an adoption service provider, as defined in Section 78B-6-103, shall complete the home study.</p> <p>(b) If the home study is not being conducted for adoptive purposes, the home study may be conducted by an individual who:</p> <p>(i) is an adoption service provider; or</p> <p>(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.</p> <p>(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.</p>						

<p>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.</p> <p>(a) Each applicant requesting license or certification renewal shall fully complete the renewal application form that is found on the office website.</p> <p>(b) The office or agency may require supporting documentation of household income and expenses to verify the foster parent will not be dependent on foster care reimbursement.</p> <p>(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:</p> <p>(i) any changes to required home study information;</p> <p>(ii) interviews with any members of the home; and</p> <p>(iii) references or other requested information needed to update the home study.</p>						
<p>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;</p> <p>(a) each applicant shall disclose previous foster care licenses and certifications, including those outside of Utah;</p> <p>(b) each previously licensed applicant shall request a written reference from the custodial agency where they last held a foster care license to be sent directly to the office or agency;</p> <p>(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</p> <p>(d) each applicant shall sign a release of information for any agency where the foster parent previously provided certified or licensed foster care.</p>						
<p>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 relicensing or recertifying the home.</p> <p>(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 completed on an office 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.</p> <p>(b) The department may request new reference letters or additional information if needed to update the home study.</p> <p>(c) The reference letter requirement is waived if 12 months or less have passed since the lapse of any license or certification.</p> <p>(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.</p> <p>(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.</p>						
<p>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.</p> <p>(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.</p> <p>(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.</p> <p>(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 DHHS program.</p> <p>(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.</p> <p>(e) If a license or certification is denied, an applicant may not reapply for a minimum of 90 days from the date of denial.</p>						
<p>Foster Parent Requirements</p>	<p>C</p>	<p>NC</p>	<p>NA</p>	<p>Date to be corrected by</p>	<p>Corrected During Inspection</p>	<p>Notes</p>

<p>R501-12-5(1) The foster parent shall comply with the following:</p> <ul style="list-style-type: none"> (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, DHHS, 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) have the ability 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. 						
<p>R501-12-5(2) A DHHS 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 DHHS conflict of interest policy.</p>						
<p>R501-12-5(3) The foster parent shall cooperate with the office, agency, courts, and law enforcement officials.</p>						
<p>R501-12-5(4) The foster parent shall read, acknowledge, and comply with the provider code of conduct.</p> <ul style="list-style-type: none"> (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. 						
<p>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.</p>						
<p>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.</p>						
<p>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:</p> <ul style="list-style-type: none"> (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: <ul style="list-style-type: none"> (i) has no other foster placements; or (ii) has only one other foster placement. 						
<p>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 DHHS licensed foster parent, not a foster parent certified by a licensed child placing agency.</p>						
<p>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:</p> <ul style="list-style-type: none"> (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. 						

<p>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.</p> <p>(a) The DHHS custodial agency shall set parameters and oversee the safety aspects of a kinship connection.</p> <p>(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.</p> <p>(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.</p>						
<p>R501-12-5(11) The foster parent shall report the following major changes or events to the office or agency within one business day;</p> <p>(a) the death or serious illness of a member of the foster parent's household;</p> <p>(b) change in marital status;</p> <p>(c) loss of employment;</p> <p>(d) change in household composition, such as the birth or adoption of a child, addition of household members, or tenants;</p> <p>(e) allegations of abuse or neglect of any child or vulnerable adult against any member of the foster parent's household; or</p> <p>(f) anything defined as a "critical incident" in Rule R501-1.</p>						
<p>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.</p>						
<p>R501-12-5(13) The foster parent shall report any potential change in address in advance to the office or agency.</p> <p>(a) A license or certification is site-specific.</p> <p>(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.</p> <p>(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.</p> <p>(d) The foster parent shall reside at the license location.</p> <p>(e) In the event of a separation or divorce, 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.</p> <p>(f) 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.</p>						
<p>R501-12-5(14) The foster parent shall offer nutritious, balanced meals that meet each foster child's individual needs.</p>						
<p>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.</p>						
<p>Physical Aspects of Home</p>	<p>C</p>	<p>NC</p>	<p>NA</p>	<p>Date to be corrected by</p>	<p>Corrected During Inspection</p>	<p>Notes</p>

<p>R501-12-6(1) The provider shall ensure the following regarding the foster home environment:</p> <ul style="list-style-type: none"> (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. 					
<p>R501-12-6(2) The provider shall ensure bedroom spaces comply with the following:</p> <ul style="list-style-type: none"> (a) children of the opposite genders do not share a bedroom unless; (i) each child sharing the room is under two years of age; (ii) the DHHS client record identifies gender-specific rationale; 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) weighted 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. 					
<p>R501-12-6(3) The provider shall ensure:</p> <ul style="list-style-type: none"> (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) hazards on the property are abated and mitigated through the use of protective hardware, fences, banisters, railings, grates, natural barriers, or other licensor approved methods to include: <ul style="list-style-type: none"> (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 (v) high voltage boosters, or dangerous traffic 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 to ground level accessible from each of the upper levels; (h) the foster parent has and 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; 					

<p>(j) the water and sewage disposal system, other than a public system, is approved by the appropriate authorities;</p> <p>(k) there is trash and recycling disposal;</p> <p>(l) any swimming pool is secured to prevent unsupervised access and complies with applicable community ordinances; and</p> <p>(m) any hot tub and spa has a locked cover.</p>						
Safety	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
<p>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.</p>						
<p>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.</p>						
<p>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.</p>						
<p>R501-12-7(4) The foster parent shall have a fully supplied first aid kit as recommended by the American Red Cross.</p>						
<p>R501-12-7(5) The foster parent shall inform the office or agency if they possess or use a firearm or other weapon.</p>						
<p>R501-12(6) A foster parent shall ensure that firearms, ammunition and other weapons are inaccessible to foster children.</p>						
<p>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 76-10-509.7.</p> <p>(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.</p> <p>(b) The provider shall ensure the following regarding firearms in the foster home:</p> <p>(i) firearms are only stored together with ammunition in a locked container commercially manufactured for the secure storage of firearms;</p> <p>(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;</p> <p>(iii) the locked storage for firearms and ammunition is not accessible through the same keys or combinations;</p> <p>(iv) keys and combinations utilized to open locked storage for firearms and ammunition are not be accessible to a foster child; and</p> <p>(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.</p>						
<p>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.</p>						

<p>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:</p> <p>(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;</p> <p>(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 automobiles, lawnmowers, ATVs, boats and snow blowers; and</p> <p>(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.</p>						
<p>R501-12-7(11) The foster parent shall comply with local laws and ordinances regarding the care and number of animals on their property.</p>						
<p>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.</p> <p>(a) These activities include participation in rock climbing, swimming, hunting, target practice, camping, hiking, use of recreational vehicles, and sports.</p> <p>(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:</p> <p>(i) wearing Department of Transportation or Snell-approved helmets when riding off-highway vehicles (OHVs);</p> <p>(ii) completing OHV education;</p> <p>(iii) completing personal watercraft or boating education;</p> <p>(iv) wearing Coast Guard-approved lifejackets; and</p> <p>(v) completing hunter's education.</p> <p>(c) The foster parent shall follow any applicable statute pertaining to minors operating OHVs, personal watercraft, boats, and firearms.</p>						
<p>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.</p>						
<p>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.</p> <p>(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.</p> <p>(b) Newborn infants shall reach the required age and receive their first dose of required vaccinations to be considered appropriately immunized for their age.</p>						
<p>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.</p>						
<p>Emergency Plans</p>	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
<p>R501-12-8(1) The foster parent shall have a written plan of action for emergencies and disaster to include the following:</p> <p>(a) evacuation with a pre-arranged site for relocation;</p> <p>(b) transportation and relocation of foster children when necessary;</p> <p>(c) supervision of foster children after evacuation or relocation; and</p> <p>(d) notification of appropriate authorities.</p>						

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
<p>R501-12-10(1) The foster parent shall ensure the following:</p> <ul style="list-style-type: none"> (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) non-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.						
<p>R501-12-11(2) The provider shall ensure transport of a foster child is provided in an enclosed, registered vehicle that has functional seatbelts.</p> <ul style="list-style-type: none"> (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 behavior 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

<p>R501-12-13(1) The foster parent may not violate a foster child's right to:</p> <ul style="list-style-type: none"> (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) privacy, including maintaining the confidentiality of 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 items including garbage 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. 						
<p>Additional Child Placing Agency Considerations</p>	C	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
<p>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.</p>						
<p>R501-12-14(2) The agency shall recruit, train, certify, and supervise foster parents.</p>						
<p>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.</p>						
<p>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.</p>						

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) provide the department with identifying information of certified foster homes via the DCFS provider website if contracted to take DCFS placements, or directly to the licenser 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 to be provided to and by the foster parent;
 - (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;
- (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;
- (k) escalate the level of agency action taken toward foster parent certification when there are multiple notations of noncompliance with the same rule;
- (l) maintain completed checklists & compliance monitoring documentation in each foster parent file;
- (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;
- (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, acknowledging receipt of a copy of this written notification;
- (o) have and comply with 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) 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;
- (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;
- (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 documentation of certification dates available to the office upon request;
- (s) provide ongoing supervision of certified foster parents to ensure the quality of care they provide; and
- (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>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 program;</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 ICPC 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	Notes
<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 80-2a-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 or 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: (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; (b) close the specific license and submit to the requirements of an initial foster care license to include: (i) complete initial foster care application; and (ii) complete foster care pre-service training series with the exception session #1, if completed within the last 2 years; (c) submit to a home study update interview with their licensor to change child-specific content to general foster parent requirements; and (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>						