Healt	bartment of h & Human Services & Background Checks		Inspe	ection Checklist		This inspection checklist is the tool C licensors use to ensure consistency f every inspection. (<i>Revised 01/2024</i>)
Provider Name:		Facility ID:		Phone Number:		Notes
Site Name or Address:				Email Address:		
Approved Capacity:		# of Present Residents\Clients:				
Plea	se review the following items with a check mark if completed and	•			review the following items d n a check mark if completed and r	•
	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 Info	rmation:					
	il you this inspection checklist after the inspec ment. Only items checked here as noncomp					
- If the only non com	pliance items are documentation and/or i	records, please subn	nit them by the correction re	quired date listed. A licens	or may conduct a follow-up inspection t	o verify compliance and maintenance of a
			Signature I	nformation		
Inspection Type:		Date:		Time Started On-site:		Time Ended On-site:
	Number of Non Compliant Items:		Name of Individua Inspec			•
Lice	ensor(s) Conducting this Inspection:				OL Staff Observing Inspection:	
	The Licensor explained noncompliance items (if any).	Signing this checklis	ign/type individual informed t does not constitute agreeme as conducted and noncomplia	ent with the statements, only		

General Provisions - Inspection Checklist

(Revised 01/2024)

C = Compliant

NC = Not Compliant

NA = Not Assessed during this inspection

New and Renewal Licensing Procedures	С	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(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	С	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	С	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	$\overline{}$	$\overline{}$				
facility, the licensee or certificate holder shall:						
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(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;	•					
(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	ļ					
(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	С	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;	1	1				
(b) ensure the needs of the client population served are met;	1	1				
(c) ensure that none of the program practices conflict with any administrative rule or statute before	1					
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.		L1				
R501-1-4(3) The licensee shall submit any change to an office approved policy or curriculum to the office for	T					
approval before implementing the proposed change.						
Residential Programs Additional Safe Practices	С	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
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R501-1-5(1) A licensee that manages, stores, or administers client medications shall develop and ensure compliance	1					
with the following medication management safe practices:	1					
(a) inform staff and clients of program and client responsibility for medication including storage and administration	1					
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 record 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.	ļ					
R501-1-5(2) The licensee shall ensure the care, vaccination, licensure, and maintenance of any animals on-site to	⊢	\vdash				
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.	•					
R501-1-5(3) The licensee shall have separate space for clients showing symptoms of an infectious disease.	\vdash	T				
	\vdash	†				
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.						
Program Administrative and Direct Service Requirements	С	NC	NA	Date to be	Corrected During	Notes
				corrected by	Inspection	

RS01-1-6(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) 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; (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.						
Residential Program Additional Administrationn and Direct Services Requirements	С	NC	NA	Date to be corrected by	Corrected During Inspection	Notes

Program Physical Facilities and Safety	С	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
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.						
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) 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 (vi) 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.						
(e) provide a separate space for clients who are showing symptoms of an infectious disease. 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 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: (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.						
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						

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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:			Î			
(a) bandages of different sizes;						
(b) tweezers;						
(c) antiseptic; and						
(d) disposable sterile gloves.						
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Residential Program Additional Facilities and Safety Requirements	С	NC	NA		Corrected During Inspection	Notes
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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, finishings, 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;		NC	NA		_	Notes

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 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.						
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.						
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.						
Food Service Requirements	С	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) 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: (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) sharing self-prepared food; (d) nutrition and sanitation requirements; (e) schedule of responsibilities; and (f) shopping and storage responsibilities.						
Program Client Record Requirements	С	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
(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						
Program Intake and Discharge Requirements	С	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. 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;						
(c) 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.						
				Date to be	Corrected During	
Residential Additional Program Intake and Discharge Requirements	С	NC	NA	corrected by	Inspection	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.						
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).						
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.						
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.						
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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.						
Program Clinical Services	С	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 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	С	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.						
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.						

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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:		-	-			
(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.						
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Personnel Training Requirements	c	NC	NA	Date to be	Corrected During	Notes
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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) program 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) 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;						
(I) 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;	I					
(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	L	L	L			
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R501-1-16(2) The licensee shall ensure each staff completes the following training topics each year, based on the	$\neg \tau$	T	
program's license date:		ı	
(a) program policies, procedures and safe practices as outlined in Section R501-1-4;		I	
(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;		ı	
(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;			
(I) 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;		I	
(o) training to identify and address in a residential or congregate care program:			
(i) clients who pose a risk of violence;		I	
(ii) what constitutes contraband, possession of contraband, and how the program ensures restriction of client		I	
access to contraband and dangerous weapons or materials;		I	
(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;		1	
(p) if the licensee manages funds for client allowances, training to document each expense; and		ı	
(q) appropriate use of any alternate sleeping arrangements in a residential or congregate care program.	$oldsymbol{\perp}$		

Therapeutic Schools - Inspection Checklist

(Revised 01/2024)
C = Compliant

NC = Not Compliant

NA = Not Assessed during this inspection

Administration	ا ر	NC	NA	Date to be	Corrected During	Notes
Administration	`	IVC	117	corrected by	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.						
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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) has a history of repeated runaway attempts or incidents;						
(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	I	I				

Date to be Corrected During
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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(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(1). The service plan includes a quarterly assessment of the adequacy of the therapeutic school's policy, procedure, and practice in providing for each client's needs.						
Client Services	С	NC	NA	Date to be corrected by	Corrected During Inspection	Notes
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.						
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.						
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(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						
school. R501-15-6(5). At all times, at least two direct care staff provide direct supervision to clients.						
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						
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) meets each requirement for direct care staff as 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.						

R501-15-7(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.						
				Date to be	Corrected During	
Physical Environment	С	NC	NA	2 0.00 00 00	_	Notes
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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(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(7). Each client has at least 30 cubic feet of private storage space.						
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(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						
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.						
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						