

# UTAH STATE BULLETIN

OFFICIAL NOTICES OF UTAH STATE GOVERNMENT  
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Nancy L. Lancaster, Managing Editor

The *Utah State Bulletin (Bulletin)* is an official noticing publication of the executive branch of Utah state government. The Office of Administrative Rules, part of the Department of Government Operations, produces the *Bulletin* under authority of Section 63G-3-402.

The Portable Document Format (PDF) version of the *Bulletin* is the official version. The PDF version of this issue is available at <https://rules.utah.gov/>. Any discrepancy between the PDF version and other versions will be resolved in favor of the PDF version.

Inquiries concerning the substance or applicability of an administrative rule that appears in the *Bulletin* should be addressed to the contact person for the rule. Questions about the *Bulletin* or the rulemaking process may be addressed to: Office of Administrative Rules, PO Box 141007, Salt Lake City, Utah 84114-1007, telephone 801-957-7110. Additional rulemaking information and electronic versions of all administrative rule publications are available at <https://rules.utah.gov/>.

The information in this *Bulletin* is summarized in the *Utah State Digest (Digest)* of the same volume and issue number. The *Digest* is available by e-mail subscription or online. Visit <https://rules.utah.gov/> for additional information.

Office of Administrative Rules, Salt Lake City 84114

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# TABLE OF CONTENTS

<b>EXECUTIVE DOCUMENTS .....</b>	<b>1</b>
PROCLAMATION	
2023-02E.....	1
<b>NOTICES OF PROPOSED RULES .....</b>	<b>3</b>
CORRECTIONS	
Administration	
R251-703. Vehicle Direction Station .....	4
HEALTH AND HUMAN SERVICES	
Health Care Facility Licensing	
R432-101. Specialty Hospital - Psychiatric.....	6
NATURAL RESOURCES	
Wildlife Resources	
R657-4. Possession of Live Game Birds .....	28
PUBLIC SAFETY	
Emergency Management	
R704-4. Response, Recovery, and Post-disaster Mitigation	
Grant Funding .....	38
Highway Patrol	
R714-560. Technology and Equipment for Officer-Involved	
Critical Incident Investigation .....	41
R714-562. Early Intervention System Grant Program .....	44
GOVERNMENT OPERATIONS	
Technology Services	
R895-4. Sub-Domain Naming Conventions for Executive	
Branch Agencies .....	47
<b>FIVE-YEAR NOTICES OF REVIEW AND STATEMENTS OF CONTINUATION .....</b>	<b>51</b>
HEALTH AND HUMAN SERVICES	
Health Care Financing, Coverage and Reimbursement Policy	
R414-9. Federally Qualified Health Centers and Rural	
Health Clinics .....	51
Center for Health Data, Vital Records and Statistics	
R436-16. Violation of Rules .....	52

## TABLE OF CONTENTS

INSURANCE	
Administration	
R590-250. Professional Employer Organization License Procedure and Assurance Organization Designation.....	52
R590-251. Preneed Life Insurance Minimum Standards to Determine Reserve Liabilities and Nonforfeiture Values .....	53
NATURAL RESOURCES	
Forestry, Fire and State Lands	
R652-123. Wildland Fire Suppression Cost Recovery Procedure .....	54
PUBLIC SAFETY	
Fire Marshal	
R710-13. Reduced Cigarette Ignition Propensity and Firefighter Protection Act.....	54
GOVERNMENT OPERATIONS	
Technology Services	
R895-7. Acceptable Use of Information Technology Resources .....	55
<b>NOTICES OF FIVE-YEAR EXPIRATIONS .....</b>	<b>57</b>
LIEUTENANT GOVERNOR	
Administration	
R622-1. Adjudicative Proceedings.....	57
<b>NOTICES OF RULE EFFECTIVE DATES .....</b>	<b>59</b>

# EXECUTIVE DOCUMENTS

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Under authority granted by the Utah Constitution and various federal and state statutes, the Governor periodically issues **EXECUTIVE DOCUMENTS**, which can be categorized as either Executive Orders, Proclamations, and Declarations. Executive Orders set policy for the executive branch; create boards and commissions; provide for the transfer of authority; or otherwise interpret, implement, or give administrative effect to a provision of the Constitution, state law or executive policy. Proclamations call special or extraordinary legislative sessions; designate classes of cities; publish states-of-emergency; promulgate other official formal public announcements or functions; or publicly avow or cause certain matters of state government to be made generally known. Declarations designate special days, weeks or other time periods; call attention to or recognize people, groups, organizations, functions, or similar actions having a public purpose; or invoke specific legislative purposes (such as the declaration of an agricultural disaster).

The Governor's Office staff files **EXECUTIVE DOCUMENTS** that have legal effect with the Office of Administrative Rules for publication and distribution.

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## PROCLAMATION

**WHEREAS**, since the close of the 2023 General Session of the 65th Legislature of the state of Utah, certain matters have arisen which require immediate legislative attention; and

**WHEREAS**, Article VII, Section 6 of the Constitution of the State of Utah provides that the governor may, by proclamation, convene the Senate into Extraordinary Session; and

**NOW, THEREFORE**, I, Spencer J. Cox, Governor of the State of Utah, by virtue of the authority vested in me by the Constitution and Laws of the state of Utah, do by this Proclamation call the Senate only of the 65th Legislature of the state of Utah into the Second Extraordinary Session at the Utah State Capitol in Salt Lake City, Utah, on the 9th day of August 2023, at 4:00 P.M., for the following purpose:

For the Senate to consent to appointments made by the Governor to positions within state government of the state of Utah since the close of the 2023 General Session of the Legislature of the State of Utah.

**IN TESTIMONY WHEREOF**, I have hereunto set my hand and caused to be affixed the Great Seal of the state of Utah. Done at the Utah State Capitol in Salt Lake City, Utah, this 8th day of August 2023.

(State Seal)

**Spencer J. Cox**  
Governor

ATTEST:

**Deidre M. Henderson**  
Lieutenant Governor

2023-02E

**End of the Executive Documents Section**



## NOTICES OF PROPOSED RULES

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A state agency may file a **PROPOSED RULE** when it determines the need for a substantive change to an existing rule. With a **NOTICE OF PROPOSED RULE**, an agency may create a new rule, amend an existing rule, repeal an existing rule, or repeal an existing rule and reenact a new rule. Filings received between July 15, 2023, 12:00 a.m., and August 01, 2023, 11:59 p.m. are included in this, the August 15, 2023, issue of the *Utah State Bulletin*.

In this publication, each **PROPOSED RULE** is preceded by a **RULE ANALYSIS**. This analysis provides summary information about the **PROPOSED RULE** including the name of a contact person, anticipated cost impact of the rule, and legal cross-references.

Following the **RULE ANALYSIS**, the text of the **PROPOSED RULE** is usually printed. New rules or additions made to existing rules are underlined (example). Deletions made to existing rules are struck out with brackets surrounding them (~~example~~). Rules being repealed are completely struck out. A row of dots in the text between paragraphs (. . . . .) indicates that unaffected text from within a section was removed to conserve space. Unaffected sections are not usually printed. If a **PROPOSED RULE** is too long to print, the Office of Administrative Rules may include only the **RULE ANALYSIS**. A copy of each rule that is too long to print is available from the filing agency or from the Office of Administrative Rules.

The law requires that an agency accept public comment on **PROPOSED RULES** published in this issue of the *Utah State Bulletin* until at least September 14, 2023. The agency may accept comment beyond this date and will indicate the last day the agency will accept comment in the **RULE ANALYSIS**. The agency may also hold public hearings. Additionally, citizens or organizations may request the agency hold a hearing on a specific **PROPOSED RULE**. Section 63G-3-302 requires that a hearing request be received by the agency proposing the rule "in writing not more than 15 days after the publication date of the proposed rule."

From the end of the public comment period through December 13, 2023, the agency may notify the Office of Administrative Rules that it wants to make the **PROPOSED RULE** effective. The agency sets the effective date. The date may be no fewer than seven calendar days after the close of the public comment period nor more than 120 days after the publication date of this issue of the *Utah State Bulletin*. Alternatively, the agency may file a **CHANGE IN PROPOSED RULE** in response to comments received. If the Office of Administrative Rules does not receive a **NOTICE OF EFFECTIVE DATE** or a **CHANGE IN PROPOSED RULE**, the **PROPOSED RULE** lapses.

The public, interest groups, and governmental agencies are invited to review and comment on **PROPOSED RULES**. *Comment may be directed to the contact person identified on the RULE ANALYSIS for each rule.*

**PROPOSED RULES** are governed by Section 63G-3-301, Rule R15-2, and Sections R15-4-3, R15-4-4, R15-4-5a, R15-4-9, and R15-4-10.

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**The Proposed Rules Begin on the Following Page**

NOTICE OF PROPOSED RULE		
TYPE OF FILING: Amendment		
Rule or Section Number:	R251-703	Filing ID: 55548

#### Agency Information

1. Department:	Corrections	
Agency:	Administration	
Street address:	14727 Minuteman Drive	
City, state and zip:	Draper, UT 84020	
Contact persons:		
Name:	Phone:	Email:
Matt Anderson	801-556-8199	mattanderson@utah.gov
Please address questions regarding information on this notice to the persons listed above.		

#### General Information

2. Rule or section catchline:
R251-703. Vehicle Direction Station
3. Purpose of the new rule or reason for the change:
The prison relocated to Salt Lake City from Draper. The agency internally identified that rules would need to be changed to reflect this move.
4. Summary of the new rule or change:
This rule change corrects the previous naming of the prison, South Point, to the current naming, Utah State Correctional Facility. Nonsubstantive style and formatting changes were also made to this rule to conform with the Utah Rulewriting Manual per EO No. 2021-12.

#### Fiscal Information

5. Provide an estimate and written explanation of the aggregate anticipated cost or savings to:
A) State budget:
There is no anticipated cost or savings change to the state budget, as this rule provides policy guidelines for the state facility vehicle direction stations and does not have a fiscal impact.
B) Local governments:
There is no anticipated cost or savings change to the local governments, as this rule does not apply to this group.
C) Small businesses ("small business" means a business employing 1-49 persons):

There is no anticipated cost or savings change to small businesses, as this rule does not apply to this group.

**D) Non-small businesses** ("non-small business" means a business employing 50 or more persons):

There is no anticipated cost or savings change to non-small businesses, as this rule does not apply to this group.

**E) Persons other than small businesses, non-small businesses, state, or local government entities** ("person" means any individual, partnership, corporation, association, governmental entity, or public or private organization of any character other than an **agency**):

There is no anticipated cost or savings change to other persons, as this rule does not apply to this group.

**F) Compliance costs for affected persons** (How much will it cost an impacted entity to adhere to this rule or its changes?):

There are no compliance costs for affected persons, as this does not apply to this group and this rule has no fiscal impact regardless.

**G) Regulatory Impact Summary Table** (This table only includes fiscal impacts that could be measured. If there are inestimable fiscal impacts, they will not be included in this table. Inestimable impacts will be included in narratives above.)

Regulatory Impact Table			
Fiscal Cost	FY2024	FY2025	FY2026
State Government	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0
<b>Total Fiscal Cost</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
Fiscal Benefits	FY2024	FY2025	FY2026
State Government	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0



Other Persons	\$0	\$0	\$0
<b>Total Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Net Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>H) Department head comments on fiscal impact and approval of regulatory impact analysis:</b>			
The Executive Director of the Department of Corrections, Brian Redd, has reviewed and approved this regulatory impact analysis.			

**Citation Information**

<b>6. Provide citations to the statutory authority for the rule. If there is also a federal requirement for the rule, provide a citation to that requirement:</b>		
Section 63G-3-201	Section 64-13-14	Section 64-13-10

**Public Notice Information**

<b>8. The public may submit written or oral comments to the agency identified in box 1.</b> (The public may also request a hearing by submitting a written request to the agency. See Section 63G-3-302 and Rule R15-1 for more information.)	
<b>A) Comments will be accepted until:</b>	09/14/2023

<b>9. This rule change MAY become effective on:</b>	09/21/2023
NOTE: The date above is the date the agency anticipates making the rule or its changes effective. It is NOT the effective date.	

**Agency Authorization Information**

<b>Agency head or designee and title:</b>	Brian Redd, Executive Director	<b>Date:</b>	07/17/2023
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**R251. Corrections, Administration.****R251-703. Vehicle Direction Station.****R251-703-1. Authority and Purpose.**

- (1) This rule is authorized under Sections 63G-3-201, 64-13-14 and 64-13-10, ~~of the Utah Code~~.
- (2) The purpose of this rule is to define the Department's policy, procedure and requirements for the operation of the Vehicle Direction Stations located at the ~~[South Point]Utah State Correctional Facility and Central Utah Correctional [facilities]Facility.~~

**R251-703-2. Definitions.**

- (1) ~~["Central Utah Correctional Facility" or "CUCF" means the Central Utah Correctional Facility[institutional housing unit] located in Gunnison.~~
- (2) "Civilian" means vendor, deliveryman, construction worker, family members, friend, or other person not acting on behalf

of ~~[UDC]the department~~ or an allied agency in an official capacity who needs access to ~~[prison]institutional~~ property.

(3) "Department" means Department of Corrections.

(4) "DPO" means Division of Prison Operations.

(5) "ID" means identification issued by an authorized government agency.

(6) "Institutional Property" means the property of USCF and CUCF.

(~~[6]~~7) ~~"[South Point]USCF" means the [Uinta, Wasatch and Oquirrh facilities at the Utah State Prison]Utah State Correctional Facility located in Salt Lake City.~~

(~~[7]~~8) "VDS" means Vehicle Direction Station.

(~~[8]~~9) "Visitor" means any person accessing ~~[prison]institutional~~ property other than a ~~[Utah Department of Corrections]department~~ employee, an inmate, or offender.

**R251-703-3. Policy.**

~~[It is the policy of the Department that:]~~

(1) ~~[t]The Department shall maintain a [Vehicle Direction Station]VDS at the main entrance of [South Point]USCF, and [Central Utah Correctional Facility]CUCF to control access of vehicles and persons entering or leaving institutional property[;].~~

(2) ~~[t]The Vehicle Direction Station (VDS) shall be staffed by an armed member of the Security Unit. The VDS shall be staffed from 0600 to 2200 hours daily[;].~~

(3) ~~[drivers]Drivers entering institutional property [using the entrance road to the VDS.]shall observe state traffic laws, keep the road free from equipment or vehicles that would obstruct visibility or impede the free flow of traffic, and follow directives of [VDS.]department staff charged with maintaining entry facilities[;].~~

(4) ~~[drivers]Drivers and pedestrians [using the entrance road]entering institutional property shall heed directions of VDS staff, to ensure the safety of vehicular and pedestrian traffic[;].~~

(5) ~~[visitors]Visitors to [the prison.]institutional property shall be responsible to read and [follow]comply with signs posted on the [entrance road]institutional property leading to the VDS pertaining to prohibited[ing] contraband from being introduced onto [prison]institutional property[;].~~

(6) ~~[since the]The VDS is the initial control point for controlling contraband from being brought onto [prison]institutional property, visitors may be subjected to search and seizure procedures as provided by law[;].~~

(7) ~~[t]The VDS shall be the control point for limiting entry to institutional facilities to persons whose presence is necessary to the institution and to authorized visitors of inmates[;].~~

(8) ~~[to prevent escape of inmates, a vehicle]All vehicles exiting [South Point]USCF or CUCF shall be subject to a search. Persons in exiting vehicles shall be required to provide identification and verification of clearance[;].~~

(9) ~~[civilians]Civilians 16 years of age and older, in a vehicle or on foot, shall be required to have picture ID in their possession and to submit it for inspection, before being allowed through the VDS. If they do not have a valid ID:~~

(a) access to the ~~[prison]institutional property~~ through the VDS ~~[shall]may~~ not be allowed;

(b) they ~~[shall]may~~ not be allowed to wait or park on the entrance road to any institutional facility or on any roads adjacent to an institutional facility; ~~[but]however,~~

(c) they may be allowed to wait in a designated parking area adjacent to the VDS[;].

(10) ~~[civilians]Civilians~~ under 16 years of age ~~[shall]may~~ not be permitted access unless accompanied by an approved adult[;].

(11) ~~[civilians]~~ Civilians found in the possession of weapons or contraband at the VDS under circumstances which do not constitute a violation of law shall be required to leave ~~[prison]~~ institutional property.

(12) ~~[peace]~~ Peace officers from allied agencies shall either secure their firearms at the VDS, another approved location, or lock their weapons in their vehicle trunk if the vehicle will not penetrate the secure perimeter.

(13) ~~[persons]~~ Persons who have a valid outstanding warrant may be arrested and either cited or transported, depending on the needs of the ~~[UDC]~~ department and the agency holding the warrant.

(14) ~~[persons]~~ Persons who have a valid outstanding warrant, if not arrested, may be denied entry to ~~[prison]~~ institutional property until the warrant has been adjudicated. ~~[and]~~

(15) ~~[visitors]~~ Visitors shall comply with all directives of VDS officers.

**KEY:** prisons, corrections

**Date of Last Change:** 2023~~[April 9, 2012]~~

**Notice of Continuation:** February 28, 2022

**Authorizing, and Implemented or Interpreted Law:** 64-13-14

#### NOTICE OF PROPOSED RULE

**TYPE OF FILING:** Repeal and Reenact

<b>Rule or Section Number:</b>	<b>R432-101</b>	<b>Filing ID:</b> <b>55539</b>
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#### Agency Information

<b>1. Department:</b>	Health and Human Services
<b>Agency:</b>	Health Care Facility Licensing
<b>Room number:</b>	1st Floor
<b>Building:</b>	Multi-Agency State Office Bldg
<b>Street address:</b>	195 N 1950 W
<b>City, state and zip:</b>	Salt Lake City, UT 84116
<b>Mailing address:</b>	PO Box 144103
<b>City, state and zip:</b>	Salt Lake City, UT 84114-4103
<b>Contact persons:</b>	
<b>Name:</b>	<b>Phone:</b> <b>Email:</b>
Janice Weinman	385-321-5586 jweinman@utah.gov

**Please address questions regarding information on this notice to the persons listed above.**

#### General Information

##### 2. Rule or section catchline:

R432-101. Specialty Hospital - Psychiatric

##### 3. Purpose of the new rule or reason for the change:

The purpose of this repeal and reenactment is to make significant language and structure changes to replace

outdated language with the Utah Rulewriting Manual standards.

Structural changes made did not change existing content.

#### 4. Summary of the new rule or change:

The revisions include more specific language consistent with the Utah Rulewriting Manual.

#### Fiscal Information

##### 5. Provide an estimate and written explanation of the aggregate anticipated cost or savings to:

###### A) State budget:

This change will not impact the current process for licensure and re-licensure surveys.

No change to the state budget is expected because this repeal and reenactment modifies and replaces outdated language with the Utah Rulewriting Manual standards.

There are no substantive changes being made regarding the fiscal impacts of this rule.

###### B) Local governments:

Local government city business licensing requirements were considered.

This repeal and reenactment should not impact local governments' revenues or expenditures because this amendment modifies and replaces outdated language with the Utah Rulewriting Manual standards.

The Intermediate Care Facility Standards are regulated by the Department of Health and Human Services and not local governments.

There will be no change in local business licensing or any other item(s) with which local government is involved.

There are no substantive changes being made regarding the fiscal impacts of this rule.

###### C) Small businesses ("small business" means a business employing 1-49 persons):

The repeal and reenactment should not impact costs for small businesses because this amendment modifies and replaces outdated language with the Utah Rulewriting Manual standards.

There are no substantive changes being made regarding the fiscal impacts of this rule.

###### D) Non-small businesses ("non-small business" means a business employing 50 or more persons):

The repeal and reenactment should not impact costs for non-small businesses because this amendment modifies

and replaces outdated language with the Utah Rulewriting Manual standards.

There are no substantive changes being made regarding the fiscal impacts of this rule.

**E) Persons other than small businesses, non-small businesses, state, or local government entities** ("person" means any individual, partnership, corporation, association, governmental entity, or public or private organization of any character other than an **agency**):

This repeal and reenactment will not result in a fiscal impact to affected persons because this amendment modifies and replaces outdated language with the Utah Rulewriting Manual standards.

There are no substantive changes being made regarding the fiscal impacts of this rule.

**F) Compliance costs for affected persons** (How much will it cost an impacted entity to adhere to this rule or its changes?):

This rule repeal and reenactment will not result in a fiscal impact to compliance costs for affected persons because this amendment modifies and replaces outdated language with the Utah Rulewriting Manual standards.

There are no substantive changes being made regarding the fiscal impacts of this rule.

**G) Regulatory Impact Summary Table** (This table only includes fiscal impacts that could be measured. If there are inestimable fiscal impacts, they will not be included in this table. Inestimable impacts will be included in narratives above.)

#### Regulatory Impact Table

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Other Persons	\$0	\$0	\$0
<b>Total Fiscal Cost</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
Fiscal Benefits	FY2024	FY2025	FY2026
State Government	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0

Small Businesses	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0
<b>Total Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Net Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

#### H) Department head comments on fiscal impact and approval of regulatory impact analysis:

The Executive Director of the Department of Health and Human Services, Tracy Gruber, has reviewed and approved this regulatory impact analysis.

#### Citation Information

**6. Provide citations to the statutory authority for the rule. If there is also a federal requirement for the rule, provide a citation to that requirement:**

Section 26B-1-202	Section 26B-2-212	
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#### Public Notice Information

**8. The public may submit written or oral comments to the agency identified in box 1.** (The public may also request a hearing by submitting a written request to the agency. See Section 63G-3-302 and Rule R15-1 for more information.)

**A) Comments will be accepted until:** 09/14/2023

**9. This rule change MAY become effective on:** 09/21/2023

NOTE: The date above is the date the agency anticipates making the rule or its changes effective. It is NOT the effective date.

#### Agency Authorization Information

<b>Agency head or designee and title:</b>	Tracy Gruber, Executive Director	<b>Date:</b>	07/19/2023
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**R432. Health and Human Services, [Family Health and Preparedness,] Health Care Facility Licensing.**

**R432-101. Specialty Hospital - Psychiatric.**

**[R432-101-1. Legal Authority.**

— This rule is adopted pursuant to Title 26, Chapter 21.

**R432-101-2. Purpose.**

— This rule applies to a hospital that chooses to be licensed as a specialty hospital and where its major single service is psychiatric service. If a specialty hospital chooses to have a dual service, e.g., psychiatric and substance abuse or chemical dependency, then both of the appropriate specialty hospital rules apply.

### **~~R432-101-3. Time for Compliance.~~**

~~All psychiatric specialty hospitals obtaining initial licensure shall fully comply with this rule.~~

### **~~R432-101-4. Definitions.~~**

~~(1) See Common Definitions in R432-1-3.~~

~~(2) Special Definitions.~~

~~(a) "Specialty Hospital" means a facility with the following:~~

~~(i) a duly constituted governing body with overall administrative and professional responsibility;~~

~~(ii) an organized medical staff which provides 24 hour inpatient care;~~

~~(iii) a chief executive officer to whom the governing body delegates the responsibility for the operation of the hospital;~~

~~(iv) a distinct nursing unit of at least six inpatient beds;~~

~~(v) current and complete medical records;~~

~~(vi) provide continuous registered nursing supervision and other nursing services;~~

~~(vii) provide in house the following basic services:~~

~~(A) laboratory;~~

~~(B) pharmacy;~~

~~(C) emergency services and provision for interim care of traumatized patients coordinated with an appropriate emergency transportation service;~~

~~(D) specialized diagnostic and therapeutic facilities, medical staff, and equipment required to provide the type of care in the recognized specialty or specialties for which the hospital is organized.~~

~~(viii) provide on site all basic services required of a general hospital that are needed for the diagnosis, therapy and treatment offered or required by patients admitted to or cared for in the specialty facility;~~

~~(b) "Investigational Drug" means a drug that is being investigated for human or animal use by the manufacturer or the Food and Drug Administration (FDA); a drug which has not been approved for use by the FDA;~~

~~(c) A "physical restraint" means an involuntary intervention employing any device intended to control or restrict the physical movement of a patient, whether applied directly to the patient's body or applied indirectly to act as a barrier to voluntary movement. Simple safety devices are a type of physical restraint.~~

~~(d) "Seclusion" means an involuntary intervention employing a procedure that isolates the patient in a specific room or designated area to temporarily remove the patient from the therapeutic community and reduce external stimuli.~~

~~(e) "Secure hospital" means a hospital where traffic in and out of the hospital setting is controlled in order to maintain safety for both patients and the community.~~

~~(f) "Stable" means a patient is no longer a danger to himself or others, and is able to function and demonstrate the ability to maintain improvements outside the hospital setting.~~

~~(g) "Time out" means isolating a patient for a period of time, on a voluntary basis in an unlocked room. This shall be based on hospital policy, as a procedure designed to remove the patient who is exhibiting a specified behavior from the source of stimulation or reinforcement.~~

~~(h) "Activity services" means therapies which involve the principles of art, dance, movement, music, occupational therapy, recreational therapy and other disciplines.~~

~~(i) "Plan for Patient Care Services" means a written plan which ensures the care, treatment, rehabilitation, and habilitation services provided are appropriate to the needs of the patient population served and the severity of the disease, condition, impairment, or disability.~~

~~(j) "Partial Hospitalization" means a time-limited, ambulatory, active treatment program that offers therapeutically intensive, coordinated and structured clinical services where the daily stay lasts no more than 23 hours with the goal of stabilizing the patient to avert inpatient hospitalization or of reducing the length of a hospital stay.~~

### **~~R432-101-5. Licensure.~~**

~~License required. See R432-2.~~

### **~~R432-101-6. General Construction Rules.~~**

~~See R432-7, Psychiatric Construction Rule.~~

### **~~R432-101-7. Organization.~~**

~~(1) The Governing Body, R432-100-5 applies.~~

~~(2) The governing body shall develop through its officers, committees, medical and other staff, a mission statement that includes a Plan for Patient Care Services.~~

### **~~R432-101-8. Administrator.~~**

~~(1) Refer to R432-100-6.~~

~~(2) The administrator shall organize and staff the hospital according to the nature, scope and extent of services offered.~~

### **~~R432-101-9. Professional Staff.~~**

~~(1) The psychiatric services of the hospital shall be organized, staffed and supported according to the nature, scope and extent of the services provided.~~

~~(2) Medical and professional staff standards shall comply with R432-100-7. The medical direction of the psychiatric care and services of the hospital shall be the responsibility of a licensed physician who is a member of the medical staff, appointed by the governing body and certified or eligible for certification by the American Board of Psychiatry and Neurology.~~

~~(3) Nursing staff standards shall comply with R432-100-13.~~

~~(4) The hospital shall provide sufficient qualified, and competent, health care professional and support staff to assess and address patient needs within the Plan for Patient Care Services.~~

~~(5) Qualified professional staff members may be employed on a full-time, on a part-time basis or be retained by contract.~~

~~(6) Professional staff shall be assigned or assume specific responsibilities on the treatment team as qualified by training and educational experience and as permitted by hospital policy and the scope of the professional license.~~

### **~~R432-101-10. Personnel Management Service.~~**

~~(1) The hospital shall provide licensed, certified or registered personnel who are able and competent to perform their respective duties, services, and functions.~~

~~(2) Written personnel policies and procedures shall include:~~

~~(a) job descriptions for each position, including job title, job summary, responsibilities, minimum qualifications, required skills and licenses, and physical requirements;~~

~~\_\_\_\_\_ (b) a method to handle and resolve grievances from the staff.~~

~~\_\_\_\_\_ (3) All personnel shall have access to hospital policy and procedure manuals, a copy of their position description, and other information necessary to effectively perform duties and carry out responsibilities.~~

~~\_\_\_\_\_ (a) The facility shall conduct a criminal background check with the Department of Public Safety for all employees prior to beginning employment.~~

~~\_\_\_\_\_ (b) The facility is responsible for the security and confidentiality of all information obtained in the criminal background check.~~

~~\_\_\_\_\_ (4) All employees shall be oriented to job requirements and personnel policies, and be provided job training beginning the first day of employment. Documentation shall be signed by the employee and supervisor to indicate basic orientation has been completed during the first 30 days of employment.~~

~~\_\_\_\_\_ (a) Registered nurses, licensed practical nurses and psychiatric technologists shall receive additional orientation to the following:~~

~~\_\_\_\_\_ (i) concepts of treatment provided within the hospital;~~

~~\_\_\_\_\_ (ii) roles and functions of nurses in the treatment programs;~~

~~\_\_\_\_\_ (iii) psychotropic medications.~~

~~\_\_\_\_\_ (b) In service sessions shall be planned and held at least quarterly and be available to all employees. Attendance standards shall be established by policy.~~

~~\_\_\_\_\_ (c) Licensed professional staff shall receive continuing education to keep informed of significant new developments and to be able to develop new skills.~~

~~\_\_\_\_\_ (d) The following in-service staff development topics shall be addressed annually:~~

~~\_\_\_\_\_ (i) fire prevention;~~

~~\_\_\_\_\_ (ii) review and drill of emergency procedures and evacuation plan;~~

~~\_\_\_\_\_ (iii) prevention and control of infections;~~

~~\_\_\_\_\_ (iv) training in the principles of emergency medical care and cardiopulmonary resuscitation for physicians, licensed nursing personnel, and others as appropriate;~~

~~\_\_\_\_\_ (v) proper use and documentation of restraints and seclusion;~~

~~\_\_\_\_\_ (vi) patients' rights, refer to R432-101-15;~~

~~\_\_\_\_\_ (vii) confidentiality of patient information;~~

~~\_\_\_\_\_ (viii) reporting abuse, neglect or exploitation of adults or children; and~~

~~\_\_\_\_\_ (ix) provision of care appropriate to the age of the patient population served.~~

~~\_\_\_\_\_ (5) Volunteers may be utilized in the daily activities of the hospital but shall not be included in the hospital's staffing plan in lieu of hospital employees.~~

~~\_\_\_\_\_ (a) Volunteers shall be screened by the administrator or designee and supervised according to hospital policy.~~

~~\_\_\_\_\_ (b) Volunteers shall be familiar with the hospital's policies and procedures on volunteers, including patient rights and facility emergency procedures.~~

~~\_\_\_\_\_ (6) All hospital personnel shall be licensed, registered, or certified as required by the Utah Department of Commerce. Copies of the current license, registration or certification shall be in the personnel files. Failure to ensure that the individual is appropriately licensed, registered or certified may result in sanctions to the facility license.~~

#### **R432-101-11. Quality Assurance.**

~~\_\_\_\_\_ (1) The facility shall have a well defined quality assurance plan designed to improve the delivery of patient care through evaluation of the quality of patient care services and resolution of identified problems. The plan shall be consistent with the Plan for Patient Care Services.~~

~~\_\_\_\_\_ (2) The plan shall be implemented and include a method for:~~

~~\_\_\_\_\_ (a) identification and assessment of problems, concerns, or opportunities for improvement of patient care;~~

~~\_\_\_\_\_ (b) implementation of actions that are designed to:~~

~~\_\_\_\_\_ (i) eliminate identified problems where possible;~~

~~\_\_\_\_\_ (ii) improve patient care;~~

~~\_\_\_\_\_ (c) documentation of corrective actions and results;~~

~~\_\_\_\_\_ (d) reporting findings and concerns to the medical, nursing, and allied health care staffs, the administrator, and the governing board.~~

~~\_\_\_\_\_ (3) Documentation of minutes of meetings shall be maintained for Department review.~~

#### **R432-101-12. Infection Control.**

~~\_\_\_\_\_ (1) The facility shall have a written plan to effectively prevent, identify, report, evaluate and control infections.~~

~~\_\_\_\_\_ (2) The plan shall include a method to collect and monitor data and carry out necessary follow-up actions.~~

~~\_\_\_\_\_ (3) Infection control actions shall be documented consistent with the requirements of the plan and in accordance with Department requirements and standards of medical practice.~~

~~\_\_\_\_\_ (4) In-service education and training of employees shall be provided to all service and program components of the hospital.~~

~~\_\_\_\_\_ (5) The infection control plan shall be reviewed and revised as necessary, but at least annually.~~

~~\_\_\_\_\_ (6) The hospital shall implement an employee health surveillance program and infection control policy which meets the requirements of R432-100-10 and the following:~~

~~\_\_\_\_\_ (a) complete at the time a person is hired, an employee health inventory that includes the following:~~

~~\_\_\_\_\_ (i) conditions that may predispose the employee to acquiring or transmitting infectious diseases;~~

~~\_\_\_\_\_ (ii) conditions that may prevent the employee from satisfactorily performing assigned duties.~~

~~\_\_\_\_\_ (b) develop employee health screening and immunization components of personnel health programs in accordance with Rule R386-702, concerning communicable diseases;~~

~~\_\_\_\_\_ (c) employee skin testing by the Mantoux Method or other FDA approved in vitro serologic test and follow up for tuberculosis shall be done in accordance with R388-804, Special Measures for the Control of Tuberculosis.~~

~~\_\_\_\_\_ (i) The licensee shall ensure that all employees are skin tested for tuberculosis within two weeks of:~~

~~\_\_\_\_\_ (A) initial hiring;~~

~~\_\_\_\_\_ (B) suspected exposure to a person with active tuberculosis; and~~

~~\_\_\_\_\_ (C) development of symptoms of tuberculosis.~~

~~\_\_\_\_\_ (ii) all employees with known positive reaction to skin tests are exempt from skin testing.~~

~~\_\_\_\_\_ (d) report all infections and communicable diseases reportable by law to the local health department in accordance with Section R386-702-3, concerning reportable diseases; and~~

~~\_\_\_\_\_ (e) comply with the Occupational Safety and Health Administration's Bloodborne Pathogen Standard.~~

#### **R432-101-13. Patient Security.**

~~\_\_\_\_\_ (1) The facility shall provide sufficient internal and external security measures consistent with the Plan for Patient Care Services. There shall be positive supervision and control of the patient populations at all times to assure patient and public safety.~~

~~\_\_\_\_\_ (2) If a facility offers more than one treatment program or serves more than one age group, patient population or program, the patients shall not be mixed or be co-mingled.~~

~~\_\_\_\_\_ (3) There shall be sufficient supervision to ensure a safe and secure living environment which is defined in the Plan for Patient Care Services.~~

#### **R432-101-14. Special Treatment Procedures.**

~~\_\_\_\_\_ There shall be a hospital policy regarding the use of special treatment procedures. It shall include as a minimum:~~

~~\_\_\_\_\_ (1) the use of seclusion, refer to R432-101-23;~~

~~\_\_\_\_\_ (2) the use of restraint, refer to R432-101-23;~~

~~\_\_\_\_\_ (3) the use of convulsive therapy including electroconvulsive therapy;~~

~~\_\_\_\_\_ (4) the use of psychosurgery or other surgical procedures for the intervention or alteration of a mental, emotional or behavioral disorder;~~

~~\_\_\_\_\_ (5) the use of behavior modification with painful stimuli;~~

~~\_\_\_\_\_ (6) the use of unusual, investigational and experimental drugs;~~

~~\_\_\_\_\_ (7) the use of drugs associated with abuse potential and those having substantial risk or undesirable side effects;~~

~~\_\_\_\_\_ (8) an explanation as to whether the hospital will conduct research projects involving inconvenience or risk to the patient; and~~

~~\_\_\_\_\_ (9) involuntary medication administration for emergent and ongoing treatment.~~

#### **R432-101-15. Patients' Rights.**

~~\_\_\_\_\_ (1) Each patient shall be provided care and treatment in accordance with the standards and ethics accepted under Title 58 for licensed, registered or certified health care practitioners.~~

~~\_\_\_\_\_ (2) There shall be a committee appointed by the administrator that consists of members of the facility staff, patients or family members, as appropriate, other qualified persons with knowledge of the treatment of mental illness, and at least one person who has no ownership or vested interest in the facility. This committee shall:~~

~~\_\_\_\_\_ (a) review, monitor and make recommendations concerning individual treatment programs established to manage inappropriate behavior, and other programs that, in the opinion of the committee, involve risks to patient safety or restrictions of a patient's rights, or both;~~

~~\_\_\_\_\_ (b) review, monitor and make recommendations concerning facility practices and policies as they relate to drug usage, restraints, seclusion and time out procedures, applications of painful or noxious stimuli, control of inappropriate behavior, protection of patient rights and any other area that the committee believes need to be addressed;~~

~~\_\_\_\_\_ (c) keep minutes of all meetings and communicate the findings to the administrator for appropriate action;~~

~~\_\_\_\_\_ (d) designate a person to act as a patient advocate, to be available to respond to questions and requests for assistance from the patients and to bring to the attention of the committee any issues or~~

~~items of interest that concern the rights of the patients or their care and status;~~

~~\_\_\_\_\_ (e) recommend written policies with regard to patient rights which are consistent with state law. Once adopted, these policies shall be posted in areas accessible to patients, and made available upon request to the patient, family, next of kin or the public.~~

~~\_\_\_\_\_ (3) The individual treatment plan and clinical orders shall address the following rights to ensure patients are permitted communication with family, friends and others. Restrictions to these rights shall be reviewed by the Patient Rights or Ethics Committee. Limitations to the rights identified in R432-101-15(3)(a) through (d) may be established to protect the patient, other patients or staff or where prohibited by law.~~

~~\_\_\_\_\_ (a) Each patient shall be permitted to send and receive unopened mail.~~

~~\_\_\_\_\_ (b) Each patient shall be afforded reasonable access to a telephone to make and receive unmonitored telephone calls.~~

~~\_\_\_\_\_ (c) Each patient shall be permitted to receive authorized visitors and to speak with them in private.~~

~~\_\_\_\_\_ (d) Each patient shall be permitted to attend and participate in social, community and religious groups.~~

~~\_\_\_\_\_ (e) Each patient shall be afforded the opportunity to voice grievances and recommend changes in policies and services to hospital staff and outside representatives of personal choice, free from restraint, interference, coercion, discrimination, or reprisal.~~

~~\_\_\_\_\_ (f) Each patient shall be permitted to communicate via sealed mail with the Utah Department of Human Services, the Utah Department of Health, the Legal Center for the People with Disabilities, legal counsel and the courts. The patient shall be permitted to communicate with and to visit with legal counsel or clergy of choice or both.~~

~~\_\_\_\_\_ (4) Each patient shall be afforded the opportunity to participate in the planning of his care and treatment. The patient's participation in the treatment planning shall be documented in the medical record.~~

~~\_\_\_\_\_ (a) Each patient shall receive an explanation of treatment goals, methods, therapies, alternatives and associated costs.~~

~~\_\_\_\_\_ (b) Each patient shall be able to refuse care and treatment, as permitted by law, including experimental research and any treatment that may result in irreversible conditions.~~

~~\_\_\_\_\_ (c) Each patient shall be informed of his medical condition, upon request, unless medically contraindicated. If contraindicated, the circumstances must be documented in the patient record.~~

~~\_\_\_\_\_ (d) Each patient shall be free from mental and physical abuse and free from chemical and physical restraints except as part of the authorized treatment program, or when necessary to protect the patient from injury to himself or to others.~~

~~\_\_\_\_\_ (5) Each patient shall be afforded the opportunity to exercise all civil rights, including voting, unless the patient has been adjudicated incompetent and not restored to legal capacity.~~

~~\_\_\_\_\_ (a) Patients shall not be required to perform services for the hospital that are not included for therapeutic purposes in the plans of care.~~

~~\_\_\_\_\_ (b) Patients shall not be required to participate in publicity events, fund raising activities, movies or anything that would exploit the patients.~~

~~\_\_\_\_\_ (c) Each patient shall be permitted to exercise religious beliefs and participate in religious worship services without being coerced or forced into engaging in any religious activity.~~

~~\_\_\_\_\_ (d) Each patient shall be permitted to retain and use personal clothing and possessions as space permits, unless doing so~~

would infringe upon rights of other patients or interfere with treatment.

~~(e) Each patient shall be permitted to manage personal financial affairs, or to be given at least a monthly accounting of financial transactions made on their behalf should the hospital accept a patient's written delegation of this responsibility.~~

#### **R432-101-16. Emergency and Disaster.**

~~(1) The hospital shall be responsible to assure the safety and well being of patients.~~

~~(a) There must be provisions for the maintenance of a safe environment in the event of an emergency or disaster.~~

~~(b) An emergency or disaster may include to utility interruption, such as gas, water, sewer, fuel and electricity, explosion, fire, earthquake, bomb threat, flood, windstorm, epidemic, and injury.~~

~~(2) The administrator or his designee shall be responsible for the development of a plan, coordinated with state and local emergency or disaster offices, to respond to emergencies or disasters.~~

~~(a) This plan shall be in writing and list the coordinating authorities by name and title.~~

~~(b) The plan shall be distributed or made available to all hospital staff to assure prompt and efficient implementation.~~

~~(c) The plan shall be reviewed and updated as necessary in coordination with local emergency or disaster management authorities. The plan shall be available for review by the Department.~~

~~(d) The administrator shall be in charge of operations during any significant emergency. If not on the premises, the administrator shall make every reasonable effort to get to the hospital to relieve subordinates and take charge of the situation.~~

~~(e) Disaster drills, in addition to fire drills, shall be held semiannually for all staff. Drills and staff response to drills shall be documented.~~

~~(f) The facility shall identify and post in a prominent location the name of the person in charge and names and telephone numbers of emergency medical personnel, agencies and appropriate communication and emergency transport systems.~~

~~(3) The hospital's emergency response procedures shall address the following:~~

~~(a) evacuation of occupants to a safe place within the hospital or to another location;~~

~~(b) delivery of essential care and services to hospital occupants by alternate means regardless of setting;~~

~~(c) delivery of essential care and services when additional persons are housed in the hospital during an emergency;~~

~~(d) delivery of essential care and services to hospital occupants when staff is reduced by an emergency;~~

~~(e) maintenance of safe ambient air temperatures within the hospital.~~

~~(i) Emergency heating must have the approval of the local fire department.~~

~~(ii) An ambient air temperature of 58 degrees F (14 degrees C) or lower may constitute a danger to the health and safety of the patients in the hospital. The person in charge shall take immediate and appropriate action.~~

~~(4) The hospital's emergency plan shall delineate shall include:~~

~~(a) the person or persons with decision-making authority for fiscal, medical, and personnel management;~~

~~(b) on hand personnel, equipment, and supplies and how to acquire additional help, supplies, and equipment after an emergency or disaster;~~

~~(c) assignment of personnel to specific tasks during an emergency;~~

~~(d) methods of communicating with local emergency agencies, authorities, and other appropriate individuals;~~

~~(e) the individuals who shall be notified in an emergency in order of priority;~~

~~(f) method of transporting and evacuating patients and staff to other locations;~~

~~(g) conversion of hospital for emergency use.~~

~~(5) The facility shall schedule and hold at least one fire drill per shift per quarter. The facility shall document the date and time the drill was held, including a brief description of the event and participants. Documentation shall be maintained for review by the Department.~~

~~(a) There shall be a fire emergency evacuation plan, written in consultation with qualified fire safety personnel.~~

~~(b) A physical plant evacuation diagram delineating evacuation routes, location of fire alarm boxes and fire extinguishers, and emergency telephone numbers of the local fire department shall be posted in exit access ways throughout the hospital.~~

~~(c) The written plan shall include fire containment procedures and how to use the hospital alarm systems and signals.~~

~~(d) The actual evacuation of patients during a drill is optional.~~

#### **R432-101-17. Admission and Discharge.**

~~(1) The hospital shall develop written admission, exclusion and discharge policies consistent with the Plan for Patient Care Services and the Utilization Review plan. These policies shall be available to the public upon request.~~

~~(2) The hospital shall make available to the public and each potential patient information regarding the various services provided, methods and therapies used by the hospital, and associated costs of such services.~~

~~(3) Admission criteria shall be clearly stated in writing in hospital policies.~~

~~(a) The facility shall assess and screen all potential patients prior to admission and admit a patient only if it determines that the facility is the least restrictive setting appropriate for their needs. The pre-screening process shall include an evaluation of the patient's past criminal and violent behavior.~~

~~(b) Patients shall be admitted for treatment and care only if the hospital is properly licensed for the treatment required and has the staff and resources to meet the medical, physical, and emotional needs of the patient.~~

~~(c) Patients shall be admitted by, and remain under the care of, a member of the medical staff. There shall be a written order for admission and care of the patient at the time of admission. A documented telephone order is acceptable.~~

~~(d) There shall be procedures to govern the referral of ineligible patients to alternate sources of treatment where possible.~~

~~(e) Involuntary commitment must be in accordance with Section 62A-5-312.~~

~~(f) All out-of-state adjudicated delinquent juveniles admitted to the hospital shall be processed and monitored through the appropriate Interstate Compact.~~

~~(4) The patient shall be discharged when the hospital is no longer able to meet the patient's identified needs, when care can be delivered in a less restrictive setting, or when the patient no longer needs care.~~

~~\_\_\_\_\_ (a) There shall be an order for patient discharge by a member of the medical staff except as indicated in R432-101-17(1)(b) below.~~

~~\_\_\_\_\_ (b) In cases of discharge against medical advice, AMA, the attending physician or qualified designee shall be contacted and the response documented in the patient record.~~

~~\_\_\_\_\_ (c) Discharge planning shall be coordinated with the patient, family, and other parties or agencies who are able to meet the patient's needs.~~

~~\_\_\_\_\_ (d) Upon discharge of a patient, all money and valuables of that patient which have been entrusted to the hospital shall be surrendered to the patient in exchange for a signed receipt.~~

#### **R432-101-18. Transfer Agreements.**

~~\_\_\_\_\_ (1) The hospital shall maintain a written transfer agreement with one or more general acute hospitals to facilitate the placement of patients and transfer of essential patient information in case of medical emergency.~~

~~\_\_\_\_\_ (2) Patients shall not be referred to another facility without prior contact with that facility.~~

#### **R432-101-19. Pets in Hospitals.**

~~\_\_\_\_\_ (1) If a hospital chooses to allow pets in the facility, it shall develop a written policy in accordance with these rules and local ordinances.~~

~~\_\_\_\_\_ (2) Household pets, such as dogs, cats, birds, fish, and hamsters, can be permitted only under the following conditions:~~

~~\_\_\_\_\_ (a) pets must be clean and disease free;~~

~~\_\_\_\_\_ (b) the immediate environment of pets must be kept clean;~~

~~\_\_\_\_\_ (c) small pets such as birds and hamsters are kept in appropriate enclosures;~~

~~\_\_\_\_\_ (d) pets not confined in enclosures must be hand held, under leash control, or under voice control;~~

~~\_\_\_\_\_ (e) pets that are kept at the hospital or are frequent visitors shall have current vaccinations, including, but not limited to, rabies, as recommended by a designated licensed veterinarian.~~

~~\_\_\_\_\_ (3) The hospital shall have written policies and procedures for pet care.~~

~~\_\_\_\_\_ (a) The administrator or designee shall determine which pets may be brought into the hospital. Family members may bring a patient's pet to visit provided they have approval from the administrator and offer reasonable assurance that the pets are clean, disease free, and vaccinated as appropriate.~~

~~\_\_\_\_\_ (b) Hospitals with birds shall have procedures which protect patients, staff, and visitors from psittacosis. Procedures should ensure minimum handling of droppings. Droppings shall be placed in a plastic bag for disposal.~~

~~\_\_\_\_\_ (c) Hospitals with pets that are kept overnight shall have written policies and procedures for the care, feeding, and housing of such pets and for proper storage of pet food and supplies.~~

~~\_\_\_\_\_ (4) Pets are not permitted in food preparation or storage areas. Pets shall not be permitted in any area where their presence would create a significant health or safety risk to others. Persons earring for any pets shall not have patient care or food handling responsibilities.~~

#### **R432-101-20. Inpatient Services.**

~~\_\_\_\_\_ (1) Upon admission, a physician or qualified designee shall document the need for admission. A brief narrative of the patient's condition, including, the nurses admitting notes, temperature, pulse, respirations, blood pressure, and weight, shall be documented in the~~

~~patient's record. The admission record shall be completed according to hospital policy.~~

~~\_\_\_\_\_ (a) A physician or qualified designee shall make an assessment of each patient's physical health and a preliminary psychiatric assessment within 24 hours of admission. The history and physical exam shall include appropriate laboratory work-up, a determination of the type and extent of special examinations, tests, or evaluations needed, and when indicated, a thorough neurological exam.~~

~~\_\_\_\_\_ (b) A psychiatrist or psychologist or qualified designee shall make an assessment of each patient's mental health within 24 hours of admission. A written emotional or behavioral assessment of each patient shall be entered in the patient's record.~~

~~\_\_\_\_\_ (c) There shall be a written assessment of the patient's legal status to include but not be limited to:~~

~~\_\_\_\_\_ (i) a history with information about competency, court commitment, prior criminal convictions, and any pending legal actions;~~

~~\_\_\_\_\_ (ii) the urgency of the legal situation;~~

~~\_\_\_\_\_ (iii) how the individual's legal situation may influence treatment.~~

~~\_\_\_\_\_ (2) A written individual treatment plan shall be initiated for each patient upon admission and completed no later than 7 working days after admission. The individual treatment plan shall be based upon the information resulting from the assessment of patient needs, see R432-101-20(1).~~

~~\_\_\_\_\_ (a) The individual treatment plan shall be part of the patient record and signed by the person responsible for the patient's care. Patient care shall be administered according to the individual treatment plan.~~

~~\_\_\_\_\_ (b) Individual treatment plans must be reviewed on a weekly basis for the first three months, and thereafter at intervals determined by the treatment team but not to exceed every other month.~~

~~\_\_\_\_\_ (c) The written individual treatment plan shall be based on a comprehensive functional assessment of each patient. When appropriate, the patient and family shall be invited to participate in the development and review of the individual treatment plan. Patient and family participation shall be documented.~~

~~\_\_\_\_\_ (d) The individual treatment plan shall be available to all personnel who provide care for the patient.~~

~~\_\_\_\_\_ (e) The Utah State Hospital is exempt from the R432-101-20(2) and R432-101-20(2)(b) time frames for initiating and reviewing the individual treatment plan. The Utah State Hospital shall initiate for each patient admitted an individual treatment plan within 14 days and shall review the plan on a monthly basis.~~

#### **R432-101-21. Adolescent or Child Treatment Program.**

~~\_\_\_\_\_ (1) A hospital that admits adolescents or children for care and treatment shall have the organization, staff, and space to meet the specialized needs of this specific group of patients.~~

~~\_\_\_\_\_ (a) Children shall be classified as age five to 12 and adolescents ages 13-18.~~

~~\_\_\_\_\_ (b) If a child is considered for admission to an adolescent program, the facility shall assess and document that the child's developmental growth is appropriate for the adolescent program.~~

~~\_\_\_\_\_ (c) Adolescent patients who reach their eighteenth birthday, the age of majority, may remain in the facility on the adolescent unit to complete the treatment program.~~

~~\_\_\_\_\_ (2) A mental health professional with training in adolescent or child psychiatry, or adolescent or child psychology, as appropriate, shall be responsible for the treatment program.~~



~~(3) Adolescent or child nursing care shall be under the direction of a registered nurse qualified by training, experience, and ability to effectively direct the nursing staff. All nursing personnel shall have training in the special needs of adolescents or children.~~

~~(4) There must be educational provision for all patient's of school age who are in the hospital over one month.~~

~~(5) Adolescents may be admitted to an adult unit when specifically ordered by the attending member of the medical staff, but may not remain there more than three days unless the clinical director approves orders for the adolescent to remain on the adult unit.~~

~~(6) Specialized programs for children must be flexible enough to meet the needs of the children being served.~~

~~(a) There shall be a written statement of philosophy, purposes and program orientation including short and long term goals.~~

~~(b) The types of services provided and the characteristics of the child population being served shall also be included in the service's policy document. It shall be available to the public on request.~~

~~(c) There shall be a written description of the program's overall approach to family involvement in the care of the patient.~~

~~(d) There shall be a written policy regarding visiting and other forms of patient communication with family, friends and significant others.~~

~~(e) There shall be a written plan of basic daily routines. It shall be available to all personnel and shall be revised as necessary.~~

~~(f) There shall be a written complaint process for children in clear and simple language that identifies an avenue to make a complaint without fear of retaliation.~~

~~(g) There shall be a comprehensive written guide of preventive, routine, and emergency medical care for all children in the program, including written policies and procedures on the use and administration of psychotropic and other medication.~~

~~(h) There shall be a complete health record for each child including:~~

~~(i) immunizations;~~

~~(ii) medications;~~

~~(iii) medical examination;~~

~~(iv) vision and dental examination, if indicated by the medical examination;~~

~~(v) a complete record of treatment for each specific illness or medical emergency.~~

~~(i) The use of emergency medication shall be specifically ordered by a physician or other person licensed to prescribe and be related to a documented medical need.~~

~~(j) In addition to the medical record requirements, the child's record shall contain:~~

~~(i) documents related to the referral of the child to the program;~~

~~(ii) documentation of the child's current parental custody status or legal guardianship status;~~

~~(iii) the child's court status, if applicable;~~

~~(iv) cumulative health records, where possible;~~

~~(v) education records and reports.~~

~~(k) The following standards apply to children's programs within a secure, locked treatment facility:~~

~~(i) There shall be a statement in the child's record identifying the specific security measures employed and demonstrating that these measures are necessary in order to provide appropriate services to the child.~~

~~(ii) There shall be evidence that the staff and the child are aware of the hospital's emergency procedures and the location of emergency exits.~~

~~(iii) If children are locked in their rooms during sleeping hours, there shall be a method to unlock the rooms simultaneously from a central point or upon activation of a fire alarm system.~~

~~(iv) There shall be a recreational program offering a wide variety of activities suited to the interests and abilities of the children in care.~~

#### **~~R432-101-22. Residential Treatment Services.~~**

~~(1) If offered, the residential treatment service shall be organized as a distinct part of the hospital service, either free-standing or as part of the licensed facility. Residential treatment services shall be under the direction of the medical director or designee.~~

~~(2) "Residential Treatment" means a 24-hour group living environment for four or more individuals unrelated to the owner or provider. Individuals are assisted in acquiring the social and behavioral skills necessary for living independently.~~

~~(3) The hospital administrator shall appoint a program manager responsible for the day-to-day operation and resident supervision.~~

~~(a) The program manager's responsibilities shall be clearly defined in the job description.~~

~~(b) Whenever the manager is absent, a substitute manager shall be appointed.~~

~~(4) Residential treatment staff shall have specialized training in the area of psychiatric treatment. Staff shall consist of:~~

~~(a) a licensed physician;~~

~~(b) a certified or licensed clinical social worker;~~

~~(c) a licensed psychologist;~~

~~(d) a licensed registered nurse; and~~

~~(e) unlicensed staff who are trained to work with psychiatric residents and who shall be supervised by a health care practitioner.~~

~~(5) Programs admitting children or adolescents shall ensure that their education is continued through grade 12.~~

~~(a) Curriculum shall be approved by the Utah Office of Education.~~

~~(b) Education services provided by the licensee must be accredited by the Utah State Board of Education or Board Northwest Association of School and Colleges.~~

~~(c) Teachers must be certified by the Utah State Board of Education. Certification in Special Education is required where clearly necessary to supervise or carry out educational curriculum.~~

~~(6) An individual treatment plan developed by an interdisciplinary team shall be initiated for each resident upon admission and a completed copy placed in the resident record within seven days.~~

~~(a) The treatment plan shall identify the resident's needs, as described by a comprehensive functional assessment.~~

~~(b) The resident, his responsible party (if available), and facility staff shall participate in the planning of treatment. The facility staff shall encourage the resident's attendance at interdisciplinary team meetings.~~

~~(c) The written treatment plan shall set forth goals and objectives stated in terms of desirable behavior that prescribes an integrated program of activities, therapies, and experiences necessary for the resident to reach the goals and objectives.~~

~~(7) The comprehensive functional assessment shall consider the resident's age and the implications for treatment. The assessment shall identify:~~

~~(a) the presenting problems and disabilities for admission and, where possible, their cause;~~

~~(b) specific individual strengths;~~

~~(c) special behavioral management needs;~~

~~(d) physical health status to include:~~

~~(i) a history and physical exam performed by a physician or nurse practitioner which includes appropriate laboratory work up;~~

~~(ii) a determination of the type and extent of special examinations, tests or evaluations needed;~~

~~(e) alcohol and drug history;~~

~~(f) degree of psychological impairment and measures to be taken to relieve treatable diseases;~~

~~(g) the capacity for social interaction and habilitation and rehabilitation measures to be taken;~~

~~(h) the emotional or behavioral status based on an assessment of:~~

~~(i) a history of previous emotional or behavioral problems and treatment;~~

~~(ii) the resident's current level of emotional or behavioral functioning;~~

~~(iii) an evaluation by a psychiatrist, psychologist or qualified designee within 30 days prior to admission, or within 24 hours after admission;~~

~~(i) if indicated, psychological testing shall include intellectual and personality testing.~~

~~(8) The comprehensive assessment shall be amended to reflect any changes in the resident's condition.~~

~~(9) An individual treatment plan shall be implemented which provides services to improve the resident's condition which are offered in an environment that encompasses physical, interpersonal, cultural, therapeutic, rehabilitative, and habilitative components.~~

~~(10) The resident shall be encouraged to participate in professionally developed and supervised activities, experiences or therapies in accordance with the individualized treatment plan.~~

~~(11) The provisions of R432-101-23, Physical Restraints, Seclusion, and Behavior Management shall apply.~~

### **R432-101-23. Physical Restraints, Seclusion, and Behavior Management.**

~~(1) Physical restraints, including seclusion shall only be used to protect the patient from injury to himself or to others or to assist patients to attain and maintain optimum levels of physical and emotional functioning.~~

~~(2) Restraints shall not be used for the convenience of staff, for punishment or discipline, or as substitutes for direct patient care, activities, or other services.~~

~~(3) Each hospital shall develop written policies and procedures that will govern the use of physical restraints and seclusion. A major focus of these policies shall be to provide patient safety and ensure civil and patient rights.~~

~~(4) Policies shall incorporate and address at least the following:~~

~~(a) examples of the types of restraints and safety devices that are acceptable for use and possible patient conditions for which the restraint may be used;~~

~~(b) guidelines for periodic release and position change or exercise, with instructions for documentation of this action.~~

~~(5) Bed sheets or other linens shall not be used as restraints.~~

~~(6) Restraints shall not unduly hinder evacuation of the patient in the event of fire or other emergency.~~

~~(7) Physical restraints must be authorized by a member of the medical staff in writing every 24 hours. PRN orders for restraints are prohibited. If a physical restraint is used in behavior management, there must be an individualized behavior management program and an ongoing monitoring system to assure effectiveness of the treatment, see Subsection R432-101-4(2)(e).~~

~~(a) Use of restraints will be reviewed routinely in the patient care conference, as the order is renewed by the member of the medical staff, and on a day-to-day basis as care is delivered. This shall be considered an ongoing process, and documented in the patient's record.~~

~~(b) Use of physical restraints, including simple safety devices, may be used only if a specific hazard or need for restraint is present. The physician order must indicate the type of physical restraint or safety device to be used and the length of time to be used. A facility restraint policy may be developed addressing the above items and accepted by reference in the patient care plan.~~

~~(c) Physical restraints must be applied by properly trained staff, to ensure a minimum of discomfort, allowing sufficient body movement to ensure that circulation will not be impaired. No restraint shall be used or applied in such a manner as to cause injury or the potential for injury.~~

~~(d) Staff shall monitor and assess a patient who is restrained. The restraint shall be released or the patient's position changed at least every two hours, unless written justification is provided for why such restraint release is dangerous to the patient or others.~~

~~(e) Physical restraints may be used in an emergency, if there is an obvious threat to life or immediate safety, as follows:~~

~~(i) Verbal orders may be given by the physician to a licensed nurse by telephone.~~

~~(ii) A licensed health care professional, identified by policy, may initiate the use of a restraint; however, verbal or written approval from the physician must be obtained within one hour.~~

~~(iii) A verbal order must be signed by a physician within 24 hours.~~

~~(iv) Staff members shall document in the patient's record the circumstances necessitating emergency use of the restraint and the patient's response.~~

~~(8) Seclusion must be used in accordance with hospital policy and authorized by a member of the medical staff.~~

~~(a) If seclusion is used for behavior management, there must be an individualized behavior management program and an ongoing monitoring system to assure effectiveness of the treatment, see Subsection R432-101-4(2)(e).~~

~~(b) Use of seclusion shall be reviewed routinely in the patient care conference, as the order is renewed by the member of the medical staff, and on a day-to-day basis as care is delivered. This shall be considered an ongoing process. The patient shall be monitored for adverse effects. The evaluations and reviews shall be part of the patient record.~~

~~(9) Time out shall be used in accordance with hospital policy, but does not have to be authorized by a member of the medical staff for each use.~~

~~The use of time out shall be included in the patient care plan and documented in the patient record.~~

~~(10) Hospital policy must establish criteria for admission and retention of patients who require behavior management programs, and shall specify the data to be collected and the location of these data in the clinical record.~~

~~\_\_\_\_\_ (a) The program must be developed by the interdisciplinary team. There must be an opportunity for involvement of the patient, next of kin or designated representative.~~

~~\_\_\_\_\_ (b) A behavior management program must be approved for a patient by the team leader, as described by hospital policy.~~

~~\_\_\_\_\_ (c) Behavior management programs must employ the least restrictive methods to produce the desired outcomes and incorporate a process to identify and reinforce desirable behavior. Consent for use of any behavior management program that employs aversive stimuli must be obtained from the patient, next of kin, or designated representative.~~

~~\_\_\_\_\_ (d) The behavior management program shall be incorporated into the patient care plan.~~

~~\_\_\_\_\_ (e) The behavior management program shall be reviewed routinely by the interdisciplinary team as the patient care conference is conducted, as the order is renewed by the member of the medical staff, and on a day to day basis as care is delivered. This shall be considered an ongoing process.~~

~~\_\_\_\_\_ (f) Documentation in the patient's record shall include:~~

~~\_\_\_\_\_ (g) a behavior baseline profile, including a description of the undesirable behavior, as well as a statement whether there is a known history of previous undesirable behaviors and prior treatment;~~

~~\_\_\_\_\_ (i) conditions under which the behavior occurs;~~

~~\_\_\_\_\_ (ii) interventions used and their results;~~

~~\_\_\_\_\_ (iii) a behavior management program including specific measurable behavioral objectives, time frames, names, titles, and signature of the person responsible for conducting the program, and monitoring and evaluation methods;~~

~~\_\_\_\_\_ (iv) summaries and dates of the evaluations and reviews by the interdisciplinary team.~~

#### **R432-101-24. Involuntary Medication Administration.**

~~\_\_\_\_\_ (1) The facility shall adopt and implement a policy and procedure for patients who refuse a prescribed medication. The policy shall include the following:~~

~~\_\_\_\_\_ (a) the facility staff shall document the refusal of medications in the individual care plan; and~~

~~\_\_\_\_\_ (b) the interdisciplinary team shall review and assess the patient's refusal of medication, ensuring that the patient's rights are protected.~~

~~\_\_\_\_\_ (2) If the interdisciplinary team determines that the patient requires medication, as part of a behavior management program, or for emergency patient management, or for clinical treatment, and a physician or licensed practitioner orders the medication, then the facility staff shall document the physician's order in the individual treatment plan and administer the medication.~~

~~\_\_\_\_\_ (3) If a patient is administered involuntary medications, the facility staff shall review the administration of medications in a patient care conference, each time the physician renews the medication order, and on a day to day basis as care is delivered.~~

~~\_\_\_\_\_ (4) The facility staff shall evaluate and assess the patient for adverse side effects. The facility staff shall document the evaluation and assessment in the patient record.~~

#### **R432-101-25. Outpatient Emergency Psychiatric Services.**

~~\_\_\_\_\_ (1) If the hospital offers outpatient emergency psychiatric services, the service shall be organized as a service specifically designated for this purpose and under the direction of the medical director or designee.~~

~~\_\_\_\_\_ (a) Services shall be available 24 hours a day to persons presenting themselves for assistance.~~

~~\_\_\_\_\_ (b) If the hospital chooses not to offer emergency outpatient psychiatric services, it shall have a written plan for referral of persons making inquiry regarding such services or presenting themselves for assistance.~~

~~\_\_\_\_\_ (2) The outpatient service shall be supported by policies and procedures including admission, and treatment procedures, and medical and psychiatric reference materials.~~

~~\_\_\_\_\_ (3) Involuntary detention of a person must be according to applicable hospital policy and Utah Law.~~

#### **R432-101-26. Emergency Services.**

~~\_\_\_\_\_ (1) Each facility shall provide physician and registered nurse coverage 24 hours per day. Nursing and other allied health professional staff shall be readily available in the hospital. Staff may have collateral duties elsewhere in the hospital, but must be able to respond when needed without adversely affecting patient care or treatment elsewhere in the hospital.~~

~~\_\_\_\_\_ (2) The facility shall have trained staff to triage emergency care for each patient, staff and visitor, to stabilize the presenting condition, and transfer to an appropriately licensed facility.~~

~~\_\_\_\_\_ (3) The facility must have an emergency area which includes a treatment room, storage for supplies and equipment, provisions for reception and control of patients, convenient patient toilet room, and communication hookup and access to a poison control center.~~

~~\_\_\_\_\_ (4) If the hospital offers additional or expanded emergency services, the service must comply with the provisions of the appropriate sections of R432-100-17.~~

~~\_\_\_\_\_ (5) The hospital shall have protocols for contacting local emergency medical services.~~

#### **R432-101-27. Clinical Services.**

~~\_\_\_\_\_ (1) If the following services are used, R432-100 shall apply:~~

~~\_\_\_\_\_ (a) Surgical Services, R432-100-15.~~

~~\_\_\_\_\_ (b) Critical Care Unit, R432-100-14.~~

~~\_\_\_\_\_ (c) Inpatient Hospice, R432-750.~~

~~\_\_\_\_\_ (2) If chemical dependency or substance abuse services are provided, the R432-102 Specialty Hospital Chemical Dependency/Substance Abuse Rules apply.~~

#### **R432-101-28. Laboratory.**

~~\_\_\_\_\_ (1) Each specialty hospital must have a CLIA certificate. If an outside lab is contracted for providing services, the outside lab shall have a CLIA certificate.~~

~~\_\_\_\_\_ (2) If outside laboratory services are secured through contract, the hospital must maintain an in-house ability to collect, preserve and arrange for delivery to the outside laboratory for testing. If additional laboratory services are provided, the hospital must comply with the appropriate sections of R432-100-23.~~

#### **R432-101-29. Pharmacy.**

~~\_\_\_\_\_ (1) Each specialty hospital must have the ability to provide in-house certain basic services, such as storage, dispensing, and administration of medication.~~

~~\_\_\_\_\_ (2) All pharmacy services must comply with the appropriate sections of R432-100-25.~~

~~\_\_\_\_\_ (3) The facility must have a policy approved by the board and the medical staff on the use of investigational drugs.~~

#### **R432-101-30. Social Services.**

~~(1) The facility shall provide social services to assist staff, patients, and patients' families to understand and cope with a patient's social, emotional, and related health problems.~~

~~(a) Social services shall be under the direction of a licensed clinical social worker. The role and function of social services shall be listed in policy documents and meet generally accepted practices of Mental Health Professional Practice Act.~~

~~(b) Social services personnel shall serve as a patient advocate to:~~

~~(i) provide services to maximize each patient's ability to adjust to the social and emotional aspects of his situation, treatments, and continued stay in the hospital;~~

~~(ii) participate in ongoing discharge planning to assure continuity of care for the patient;~~

~~(iii) initiate referrals to official agencies when the patient needs legal or financial assistance;~~

~~(iv) maintain appropriate liaison with the family or other responsible persons concerning the patient's placement and rights;~~

~~(v) preserve the dignity and rights of each patient.~~

~~(2) Each hospital shall develop social services policies and procedures which include at least the following:~~

~~(a) a system to identify, plan, and provide services according to the social and emotional needs of patients;~~

~~(b) job descriptions, including title and qualifications of all persons who provide social services;~~

~~(c) a method to refer patients to outside social services agencies when the hospital is unable to resolve a patient's problems.~~

~~(3) The Social Service director shall participate in any pertinent quality assurance activities of the hospital.~~

#### **R432-101-31. Activity Therapy.**

~~(1) The hospital shall provide activity therapy services to meet the physical, social, cultural, recreational, health maintenance and rehabilitational needs of patients as defined in the patient care plan.~~

~~(a) The activity therapy service shall have policies that describe the organization of the service and provision for services to the patient population.~~

~~(i) Program goals and objectives shall be stated in writing.~~

~~(ii) Appropriate activities shall be provided to patients during the day, in the evening, and on the weekend.~~

~~(iii) Patient participation in planning shall be sought, whenever possible.~~

~~(iv) Activity schedules shall be posted in places accessible to patients and staff.~~

~~(b) Activity therapy shall be incorporated into the patient care plan.~~

~~(c) Patients shall be permitted leisure time and encouraged to use it in a way that fulfills their cultural and recreational interests and their feelings of human dignity.~~

~~(2) The activity therapy service shall be supervised by an individual.~~

~~(3) The facility shall provide sufficient space, equipment, and facilities to meet the needs of the patients. Space, equipment, and facilities shall meet federal, state and local requirements for safety, fire prevention, health, and sanitation.~~

#### **R432-101-32. Other Services.**

~~If the following services are provided, R432-100 shall apply:~~

~~(a) Anesthesia Services, R432-100-16.~~

~~(b) Rehabilitation Therapy Services, R432-100-21.~~

~~(c) Radiology, R432-100-22.~~

~~(d) Respiratory Care Services, R432-100-20.~~

#### **R432-101-33. Medical Records.**

~~(1) The hospital shall comply with the provisions of R432-100-34.~~

~~(2) Contents of the patient record shall describe a patient's physical, social and mental health status at the time of admission, the services provided, the progress made, and a patient's physical, social and mental health status at the time of discharge.~~

~~(a) The patient record identification data recorded on standardized forms shall include the patient's name, home address, date of birth, sex, next of kin, marital status, and date of admission.~~

~~(b) The patient record shall include:~~

~~(i) involuntary commitment status, including relevant legal documents;~~

~~(ii) date the information was gathered, and names and signatures of the staff members gathering the information.~~

~~(c) The patient record shall contain pertinent information on the course of treatment to include:~~

~~(i) signed orders by physicians and other authorized practitioners for medications and treatments;~~

~~(ii) relevant physical examination, medical history, and physical and mental diagnoses using a recognized diagnostic coding system;~~

~~(iii) information on any unusual occurrences, such as treatment complications, accidents, or injuries to or inflicted by the patient, and procedures that place the patient at risk;~~

~~(iv) documentation of patient and family involvement in the treatment program;~~

~~(v) progress notes written by the psychiatrist, psychologist, social worker, nurse, and others significantly involved in active treatment;~~

~~(vi) temperature, pulse, respirations, blood pressure, height, and weight notations, when indicated;~~

~~(vii) reports of laboratory, radiologic, or other diagnostic procedures, and reports of medical or surgical procedures when performed;~~

~~(viii) correspondence with signed and dated notations of telephone calls concerning the patient's treatment;~~

~~(ix) a written plan for discharge including an assessment of patient needs;~~

~~(x) documentation of any instance in which the patient was absent from the hospital without permission;~~

~~(xi) the patient care plan.~~

~~(d) There shall be a discharge summary signed by the attending member of the medical staff and entered into the patient record within 30 calendar days from the date of discharge. In the event a patient dies, the discharge statement shall include a summary of events leading to the death.~~

~~(e) The patient record shall contain evidence of informed consent or the reason it is unattainable.~~

~~(f) The patient record shall contain consent for release of information, the actual date the information was released, and the signature of the staff member who released the information. The patient shall be informed of the release of information as soon as possible.~~

~~(g) The hospital may release pertinent information to personnel responsible for the individual's care without the patient's consent under the following circumstances:~~

~~(i) in a life threatening situation;~~

~~(ii) when an individual's condition or situation precludes obtaining written consent for release of information;~~  
~~(iii) when obtaining written consent for release of information would cause an excessive delay in delivering essential treatment to the individual.~~

#### **R432-101-34. Ancillary Services.**

~~If the following services are used, R432-100 shall apply:~~

- ~~(1) Central Supply, R432-100-35.~~
- ~~(2) Dietary, R432-100-32.~~
- ~~(3) Laundry, R432-100-36.~~
- ~~(4) Maintenance Services, R432-100-38.~~
- ~~(5) Housekeeping, R432-100-37.~~

#### **R432-101-35. Partial Hospitalization Services.**

~~(1) If the hospital offers a partial hospitalization program, the following services may be included:~~

~~(a) crisis stabilization or the provision of intensive, short-term daily programming which averts psychiatric hospitalization or offers transitional treatment back into community life in order to shorten an episode of acute inpatient care; and~~

~~(b) intermediate term treatment which provides more extended, daily, goal directed clinical services for a population at high risk for hospitalization or readmission due to the serious or persistent nature of their psychiatric, emotional, behavioral, or addictive disorder.~~

~~(2) If the specialty hospital offers partial hospitalization services, the hospital shall establish policies and procedures to address the following:~~

- ~~(a) Criteria for admission indicating a DSM IV Mental or Nervous condition;~~
- ~~(b) Assessment;~~
- ~~(c) Treatment Planning;~~
- ~~(d) Active treatment;~~
- ~~(e) Coordination of Care; and~~
- ~~(f) Discharge criteria.~~

#### **R432-101-36. Penalties.**

~~Any person who violates any provision of this rule may be subject to the penalties enumerated in 26-21-11 and R432-3-7 and be punished for violation of a class A misdemeanor as provided in 26-21-16.]~~

#### **R432-101-1. Legal Authority.**

This rule is authorized by Section 26B-2-202.

#### **R432-101-2. Purpose.**

The purpose of this rule is to promote the public health and welfare through establishment and enforcement of licensure standards for the operation of a psychiatric hospital. This rule outlines standards of patient care that apply to psychiatric hospital inpatient, outpatient, and satellite services. This rule applies to a licensee that chooses to be licensed as a psychiatric specialty hospital and whose single major service is psychiatric service. If a psychiatric specialty hospital licensee chooses to have a dual service, including psychiatric and substance abuse or chemical dependency, then both of the specialty hospital rules apply.

#### **R432-101-3. Time for Compliance.**

Each psychiatric specialty hospital obtaining initial licensure shall comply with this rule.

#### **R432-101-4. Definitions.**

(1) The definitions outlined in Rule R432-1 apply to a psychiatric specialty hospital licensee in addition to the definitions in this section.

(2) "Activity services" means therapies that involve the principles of art, dance, movement, music, occupational therapy, recreational therapy, and other disciplines.

(3) "Ancillary services" means services that support clinical services and are usually diagnostic in nature. Ancillary services do not require direct care or oversight by a nurse or physician including labs, radiology, cardiac testing, outpatient services, and diabetic teaching.

(4) "Clinical Services" means services provided by a licensed physician or nurse or under their direct care and supervision.

(5) "Department" means Utah Department of Health and Human Services.

(6) "Investigational Drug" means a drug that is being investigated for human or animal use by the manufacturer or the Food and Drug Administration (FDA) and has not been approved for use by the FDA.

(7) "Partial Hospitalization" means a time-limited, ambulatory, active treatment program that offers therapeutically intensive, coordinated and structured clinical services where the daily stay lasts no more than 23 hours with the goal of stabilizing the patient to avert inpatient hospitalization or reducing the length of a hospital stay.

(8) "Physical restraint" means an involuntary intervention employing any device intended to control or restrict the physical movement of a patient, whether applied directly to the patient's body or applied indirectly to act as a barrier to voluntary movement. A simple safety device is a type of physical restraint.

(9) "Plan for Patient Care Services" means a written plan that ensures the care, treatment, rehabilitation, and habilitation services provided are appropriate to the needs of the patient population served and the severity of the disease, condition, impairment, or disability.

(10) "Residential Treatment" means a 24-hour group living environment for four or more individuals unrelated to the owner or provider. Individuals are assisted in acquiring the social and behavioral skills necessary for living independently.

(11) "Seclusion" means an involuntary intervention employing a procedure that isolates the patient in a specific room or designated area to temporarily remove the patient from the therapeutic community and reduce external stimuli.

(12) "Secure hospital" means a hospital where access in and out of the hospital setting is controlled to maintain safety for both patients and the community.

(13) "Specialty Hospital" means a facility with the following:

(a) a governing body with overall administrative and professional responsibility;

(b) an organized medical staff that provides 24-hour inpatient care;

(c) a chief executive officer to whom the governing body delegates the responsibility for the operation of the hospital;

(d) a distinct nursing unit of at least six inpatient beds;

(e) current and complete medical records;

(f) continuous registered nursing supervision and other nursing services;

(g) in-house basic services including:

(i) laboratory;

(ii) pharmacy;

(iii) emergency services and provision for interim care of traumatized patients coordinated with an appropriate emergency transportation service;

(iv) specialized diagnostic and therapeutic facilities, medical staff, and equipment required to provide the type of care in the recognized specialty or specialties provided by the hospital; and

(v) provide on-site all basic services required of a general hospital that are needed for the diagnosis, therapy and treatment offered or required by patients admitted to or cared for in the specialty hospital.

(14) "Stable" means a patient is no longer a danger to self or others, and is able to function and demonstrate the ability to maintain improvements outside the hospital setting.

(15) "Time out" means isolating a patient for a period of time, on a voluntary basis in an unlocked room and is based on hospital policy, as a procedure designed to remove the patient who is exhibiting a specified behavior from the source of stimulation or reinforcement.

#### **R432-101-5. Licensure.**

Licensure is required in accordance with Rule R432-2.

#### **R432-101-6. General Construction Rules.**

In addition to the General Construction Rule, R432-4, Rule R432-7 additionally applies to the construction of a psychiatric specialty hospital.

#### **R432-101-7. Organization.**

(1) Section R432-100-6 additionally applies to the governing body of a psychiatric specialty hospital.

(2) The governing body shall develop through its officers, committees, medical and other staff, a mission statement that includes a plan for patient care services.

(3) The licensee shall provide:

(a) current and complete medical records;

(b) continuous registered nursing supervision and other nursing services;

(c) basic in-house services to include:

(i) laboratory;

(ii) pharmacy;

(iii) emergency services;

(iv) interim care of traumatized patients coordinated with an appropriate emergency transportation service;

(v) specialized diagnostic and therapeutic facilities; and

(vi) medical staff and equipment required to provide the type of care in the recognized specialty the hospital provides; and

(d) any basic on-site services required of a general hospital that are needed for the diagnosis, therapy, and treatment offered or required by patients admitted to or cared for in the psychiatric specialty hospital.

#### **R432-101-8. Administrator.**

(1) Section R432-100-7 additionally applies to the administrator of a psychiatric specialty hospital.

(2) The administrator shall organize and staff the hospital according to the nature, scope and extent of services offered.

#### **R432-101-9. Professional Staff.**

(1) The licensee shall ensure the psychiatric services of the hospital are organized, staffed and supported according to the nature, scope and extent of the services provided.

(2) Section R432-100-8 additionally applies to professional staff of a psychiatric specialty hospital.

(3) The medical direction of the psychiatric care and services of the hospital shall be under a licensed physician who is a member of the medical staff, appointed by the governing body, and certified or eligible for certification by the American Board of Psychiatry and Neurology.

(4) Section R432-100-14 additionally applies to nursing staff of a psychiatric specialty hospital.

(5) The licensee shall provide enough qualified, and competent health care professional and support staff to assess and address patient needs within the plan for patient care services.

(6) The licensee may employ qualified professional staff members or retain by contract.

(7) The licensee shall ensure professional staff are assigned or assume specific responsibilities on the treatment team as qualified by training and educational experience and as permitted by hospital policy and the scope of the professional license.

#### **R432-101-10. Personnel Management Service.**

(1) The licensee shall provide licensed, certified, or registered personnel who are able and competent to perform their respective duties, services, and functions.

(2) The licensee shall ensure written personnel policies and procedures include:

(a) job descriptions for each position, including:

(i) job title;

(ii) job summary;

(iii) responsibilities;

(iv) minimum qualifications; and

(v) required skills, licenses, and physical requirements; and

(b) a method to handle and resolve grievances from the staff.

(3)(a) The licensee shall ensure each staff member has access to hospital policy and procedure manuals, a copy of their position description, and other information necessary to effectively perform duties and carry out responsibilities.

(b) The licensee shall conduct a criminal background check with the Department of Public Safety for each employee before beginning employment.

(c) The licensee shall maintain the security and confidentiality of any information obtained in the criminal background check.

(4)(a) The licensee shall orient each employee to job requirements and personnel policies, and be provided job training beginning the first day of employment.

(b) The licensee shall document, with signatures of the employee and supervisor, completion of basic orientation during the first 30 days of employment.

(c) The licensee shall ensure registered nurses, licensed practical nurses, and psychiatric technologists receive additional orientation to the following:

(i) concepts of treatment provided within the hospital;

(ii) roles and functions of nurses in the treatment programs; and

(iii) psychotropic medications.

(d) The licensee shall hold in-service training sessions at least quarterly and ensure they are available to each employee.

(e) The licensee shall establish a policy to outline in-service training attendance standards.

(f) The licensee shall ensure licensed professional staff shall receive continuing education to keep informed of significant new developments and to be able to develop new skills.

(g) The licensee shall ensure the following in-service training topics are addressed annually:

(i) fire prevention;

(ii) review and drill of emergency procedures and evacuation plan;

(iii) prevention and control of infections;

(iv) training in the principles of emergency medical care and cardiopulmonary resuscitation for physicians, licensed nursing personnel, and others as appropriate;

(v) proper use and documentation of restraints and seclusion;

(vi) patients' rights, in accordance with Section R432-101-15;

(vii) confidentiality of patient information;

(viii) reporting abuse, neglect or exploitation of adults or children; and

(ix) provision of age appropriate care to the population being served.

(5)(a) The licensee may utilize volunteers in the daily activities of the hospital but volunteers may not be included in the licensee's staffing plan in place of hospital employees.

(b) The administrator or designee shall screen volunteers and ensure they are supervised according to hospital policy.

(c) The licensee shall ensure volunteers are familiar with the hospital's policies and procedures on volunteers, including patient rights and facility emergency procedures.

(6)(a) The licensee shall ensure that any hospital personnel are licensed, registered, or certified as required by the Utah Department of Commerce.

(b) The licensee shall maintain copies of the current license, registration or certification shall be in the personnel files.

(c) The licensee's failure to ensure that the individual is appropriately licensed, registered or certified may result in sanctions to the facility license.

#### **R432-101-11. Quality Assurance.**

(1) The licensee shall have a well-defined quality assurance plan designed to improve the delivery of patient care through evaluation of the quality of patient care services and resolution of identified problems.

(2) The licensee shall ensure that the quality assurance plan is consistent with the plan for patient care services and is implemented and include methods for:

(a) identification and assessment of problems, concerns, or opportunities for improvement of patient care;

(b) eliminating identified problems where possible;

(c) improving patient care;

(d) documentation of corrective actions and results; and

(e) reporting findings and concerns to the medical, nursing, and allied health care staffs, the administrator, and the governing board.

(3) The licensee shall maintain documentation of minutes of meetings for department review.

#### **R432-101-12. Infection Control.**

(1)(a) The licensee shall have a written plan to effectively prevent, identify, report, evaluate and control infections.

(b) The infection control plan shall include a method to collect and monitor data and carry out necessary follow-up actions.

(c) The licensee shall document infection control actions consistent with the requirements of the plan and in accordance with department requirements and standards of medical practice.

(d) The licensee shall provide in-service education and training to employees for each service and program component of the hospital.

(e) The licensee shall ensure the infection control plan is reviewed and revised as necessary, but at least annually.

(2) The licensee shall implement an employee health surveillance program and infection control policy that meets the requirements of Section R432-100-9 and includes:

(a) requirement to complete, an employee health inventory at the time of hire that:

(i) identifies conditions that may predispose the employee to acquiring or transmitting infectious diseases; and

(ii) identifies conditions that may prevent the employee from satisfactorily performing assigned duties.

(b) development of an employee health screening and immunization components of personnel health programs in accordance with Rule R386-702, regarding communicable diseases;

(c) requires employee skin testing by the Mantoux Method or other FDA approved in-vitro serologic test and follow-up for tuberculosis in accordance with Rule R388-804, Special Measures for the Control of Tuberculosis;

(d) ensures that all employees are skin tested for tuberculosis within two weeks of:

(i) initial hiring;

(ii) suspected exposure to a person with active tuberculosis; and

(iii) development of symptoms of tuberculosis;

(iv) exempts any employee with a known positive reaction to skin tests from the required testing;

(e) requires a report of any infections and communicable diseases reportable by law to the local health department in accordance with Section R386-702-3, regarding reportable diseases; and

(f) complies with the Occupational Safety and Health Administration's Bloodborne Pathogen Standard.

#### **R432-101-13. Patient Security.**

(1) The licensee shall provide enough internal and external security measures consistent with the plan for patient care services.

(2) The licensee shall provide supervision and control of the patient populations at all times to ensure patient and public safety.

(3) If a licensee offers more than one treatment program or serves more than one age group, patient population, or program, the patients may not be co-mingled.

(4) The licensee shall provide enough supervision to ensure a safe and secure living environment as defined in the plan for patient care services.

#### **R432-101-14. Special Treatment Procedures.**

(1) The license shall develop policy regarding the use of special treatment procedures to include the use of seclusion and restraint in accordance with Section R432-101-23.

(2) The licensee shall ensure special treatment policies and procedures address:

(a) the use of convulsive therapy including electroconvulsive therapy;

(b) the use of psychosurgery or other surgical procedures for the intervention or alteration of a mental, emotional or behavioral disorder;

(c) the use of behavior modification with painful stimuli;

(d) the use of unusual, investigational and experimental drugs;

(e) the use of drugs associated with abuse potential and those having substantial risk or undesirable side effects;

(f) an explanation as to whether the hospital will conduct research projects involving inconvenience or risk to the patient; and

(g) involuntary medication administration for emergent and ongoing treatment.

#### **R432-101-15. Patients' Rights.**

(1) The licensee shall provide each patient care and treatment in accordance with the standards and ethics accepted under Title 58, Occupations and Professions, for licensed, registered or certified health care practitioners.

(2) The administrator shall appoint a committee that consists of:

(a) members of the facility staff;

(b) patients or family members, as appropriate;

(c) other qualified persons with knowledge of the treatment of mental illness; and

(d) at least one person who has no ownership or vested interest in the facility.

(3) The committee outlined in Subsection Rule R432-101-15(2) shall:

(a) review, monitor and make recommendations concerning individual treatment programs established to manage inappropriate behavior, and other programs that the committee considers to involve risks to patient safety or restrictions of a patient's rights;

(b) review, monitor and make recommendations concerning facility practices and policies as they relate to:

(i) drug usage;;

(ii) restraints, seclusion and time out procedures;

(iii) applications of painful or noxious stimuli;

(iii) control of inappropriate behavior;

(iv) protection of patient rights; and

(v) any other area that the committee identifies as risks to patient protection and rights;

(c) maintain minutes of each meeting and communicate the findings to the administrator for appropriate action;

(d) designate a person to act as a patient advocate, to be available to respond to questions and requests for assistance from the patients and to bring to the attention of the committee any issues or items of interest that concern the rights of the patients or their care and status;

(e) recommend written policies with regard to patient rights that are consistent with state law; and

(f) once adopted, the licensee shall post the policies outlined in Subsection R432-101-15(3)(e) in areas accessible to patients, and made available upon request to the patient, family, next of kin, or the public.

(4)(a) The licensee shall ensure the individual treatment plan and clinical orders address the patient rights in this section to ensure patients are permitted communication with family, friends and others.

(b) The patient rights or ethics committee shall review any restrictions to a patient's rights.

(c) The licensee may establish limitations to the rights identified in Subsections R432-101-15(5)(a) through (d) to protect the patient, other patients, or staff or where prohibited by law.

(5) The licensee shall ensure that each patient has the right to:

(a) send and receive unopened mail;

(b) reasonable access to a telephone to make and receive unmonitored telephone calls;

(c) receive authorized visitors and to speak with them in private;

(d) attend and participate in social, community and religious groups;

(e) voice grievances and recommend changes in policies and services to hospital staff and outside representatives of personal choice, free from restraint, interference, coercion, discrimination, or reprisal;

(f) communicate via sealed mail with the department, the Disability Law Center, legal counsel and the courts;

(g) communicate with and visit with legal counsel and clergy of choice; and

(h) participate in the planning of their care and treatment.

(6) The licensee shall document the patient's participation in the treatment planning process in the medical record.

(7) The licensee shall ensure that each patient:

(a) receives an explanation of treatment goals, methods, therapies, alternatives and associated costs;

(b) is able to refuse care and treatment, as permitted by law, including experimental research and any treatment that may result in irreversible conditions;

(c) is informed of their medical condition, upon request, unless medically contraindicated, if contraindicated, the licensee shall document the circumstances in the patient record;

(d) is free from mental and physical abuse and free from chemical and physical restraints except as part of the authorized treatment program, or when necessary to protect the patient from injury to themselves or to others;

(e) is given the opportunity to exercise any civil rights, including voting, unless the patient has been adjudicated as incompetent and not restored to legal capacity;

(f) is not required to perform services for the hospital that are not included for therapeutic purposes in the plans of care;

(g) is not required to participate in publicity events, fund raising activities, movies or anything that would exploit the patients;

(h) is permitted to exercise religious beliefs and participate in religious worship services without being coerced or forced into engaging in any religious activity;

(i) is permitted to retain and use personal clothing and possessions as space permits, unless doing so would infringe upon rights of other patients or interfere with treatment; and

(j) is permitted to manage personal financial affairs, or to be given at least a monthly accounting of financial transactions made on their behalf if the licensee accepts a patient's written delegation of this responsibility.



**R432-101-16. Emergency and Disaster.**

(1) The licensee shall ensure the safety and well-being of patients and provide for a safe environment in the event of an emergency or disaster including utility interruption of gas, water, sewer, fuel or electricity, explosion, fire, earthquake, bomb threat, flood, windstorm, epidemic, and injury.

(2) The administrator or designee shall develop a plan, coordinated with state and local emergency or disaster offices, to respond to emergencies or disasters that is:

(a) documented in writing and lists the coordinating authorities by name and title;

(b) distributed or made available to any hospital staff to ensure prompt and efficient implementation;

(c) reviewed and updated as necessary in coordination with local emergency or disaster management authorities; and

(d) available for review by the department.

(3) The administrator shall take charge of operations during any significant emergency. If not on the premises, the administrator shall make every reasonable effort to get to the hospital to relieve subordinates and take charge of the situation.

(4) The licensee shall hold and document the response to disaster drills, in addition to fire drills, on a semi-annual basis for staff.

(5) The licensee shall identify and prominently post:

(a) the name of the person in charge;

(b) the names and telephone numbers of emergency medical personnel or agencies;

(c) emergency transport systems; and

(d) appropriate communication with the entities listed in this subsection.

(6) The licensee shall ensure the emergency response procedures addresses the following:

(a) evacuation of occupants to a safe place within the hospital or to another location;

(b) delivery of essential care and services to hospital occupants by alternate means regardless of setting;

(c) delivery of essential care and services when additional persons are housed in the hospital during an emergency;

(d) delivery of essential care and services to hospital occupants when staff is reduced by an emergency; and

(e) maintenance of safe ambient air temperatures within the hospital in accordance with Subsection 432-101-16(7).

(7)(a) The licensee shall maintain an ambient temperature of 58 degrees Fahrenheit(F) or 14 degrees Celsius(C) within the hospital.

(b) A temperature any lower than 58 degrees F or 14 degrees C may constitute a danger to the health and safety of the patients in the hospital and the person in charge shall take immediate and appropriate action when the temperature meets the minimum threshold.

(c) The licensee shall ensure the local fire department approves emergency heating.

(8) The licensee shall ensure the emergency plan delineates and includes:

(a) the person with decision-making authority for fiscal, medical, and personnel management;

(b) on-hand personnel, equipment, and supplies and instructions on how to acquire additional help, supplies, and equipment after an emergency or disaster;

(c) assignment of personnel to specific tasks during an emergency;

(d) methods of communicating with local emergency agencies, authorities, and other appropriate individuals;

(e) the individuals to be notified in an emergency in order of priority;

(f) method of transporting and evacuating patients and staff to other locations; and

(g) conversion of hospital facilities for emergency use.

(9)(a) The licensee shall schedule and hold at least one fire drill per shift per quarter and document the date and time the drill was held, including a brief description of the event and participants.

(b) The evacuation of patients during a drill is optional

(c) The licensee shall maintain documentation of fire drills for review by the department.

(10)(a) The licensee shall have an emergency evacuation plan, written in consultation with qualified fire safety personnel.

(b) The licensee shall post a physical plant evacuation diagram delineating evacuation routes, location of fire alarm boxes and fire extinguishers, and emergency telephone numbers of the local fire department in exit access ways throughout the hospital.

(c) The written plan shall include fire-containment procedures and how to use the hospital alarm systems and signals.

**R432-101-17. Admission and Discharge.**

(1) The licensee shall develop written admission, exclusion, and discharge policies consistent with the plan for patient care services and the utilization review plan. These policies shall be available to the public upon request.

(2) The licensee shall ensure the following are available to the public and each potential patient:

(a) the various services provided;

(b) methods and therapies used by the hospital; and

(c) associated costs of services.

(3) The licensee shall ensure admission criteria is clearly stated in writing in hospital policies.

(4) The licensee shall assess each potential patient before admission to ensure the facility is the least restrictive to meet the patient's needs.

(5) The licensee shall screen and evaluate each potential patient's history of criminal and violent behavior before admission.

(6)(a) The licensee shall admit a patient for treatment and care only if the hospital is properly licensed for the treatment required and has the staff and resources to meet the medical, physical, and emotional needs of the patient.

(b) The licensee shall admit a patient and ensure the patient remains under the care of a member of the medical staff.

(c) The licensee shall ensure there is a written order for admission and care of the patient at the time of admission. A documented telephone order is acceptable.

(d) The licensee shall develop procedures to govern the referral of ineligible patients to alternate sources of treatment where possible.

(e) A licensee conducting an involuntary commitment shall ensure it is done in accordance with Section 26B-6-608.

(f) The licensee shall process and monitor any out of state adjudicated delinquent juveniles admitted to the hospital only in accordance with Title 80, Chapter 6 Interstate Compact for Juveniles.

(7)(a) The licensee shall discharge a patient when the licensee is no longer able to meet the patient's identified needs, when care can be delivered in a less restrictive setting, or when the patient no longer needs care.

(b) The licensee shall ensure a member of the medical staff creates an order for patient discharge, except as indicated in Subsection R432-101-17(6)(c).

(c) In cases of discharge against medical advice, AMA, the licensee shall ensure the attending physician or qualified designee is contacted and the response documented in the patient record.

(d) The licensee shall ensure discharge planning is coordinated with the patient, family, and other parties or agencies who are able to meet the patient's needs.

(e) Upon discharge of a patient, the licensee shall surrender any money and valuables of that patient that have been entrusted to the hospital to the parties listed in Subsection R432-101-17(7)(d) in exchange for a signed receipt.

#### **R432-101-18. Transfer Agreements.**

(1) The licensee shall maintain a written transfer agreement with at least one general acute hospital to facilitate the placement of patients and transfer of essential patient information in case of medical emergency.

(2) The licensee may not refer a patient to another facility without first contacting that facility.

#### **R432-101-19. Pets in Hospitals.**

(1) If a licensee permits pets in the facility, the licensee shall develop a written policy in accordance with this rule and local ordinances.

(2) Household pets, such as dogs, cats, birds, fish, and hamsters, may be permitted if the licensee ensures the following:

(a) pets are clean and disease free;

(b) the immediate environment of pets is kept clean;

(c) small pets, including birds and hamsters are in appropriate enclosures;

(d) pets not confined in enclosures are hand held, under leash control, or under voice control; and

(e) pets that live at the hospital or are frequent visitors have current vaccinations, including rabies, as recommended by a licensed veterinarian.

(3) The licensee shall develop and follow written policies and procedures for pet care.

(4)(a) The administrator or designee shall determine which pets may be brought into the hospital.

(b) A patient's family member may bring the patient's pet to visit if they have approval from the administrator and offer reasonable assurance that the pet is clean, disease free, and vaccinated as appropriate.

(5) If a licensee permits birds, they shall develop and follow procedures that protect patients, staff, and visitors from psittacosis and ensure:

(a) procedures outline minimum handling of droppings; and

(b) droppings are placed in a plastic bag for disposal.

(6) If a licensee permits pets to be kept overnight, they shall develop and follow written policies and procedures for the care, feeding, and housing of pets and for proper storage of pet food and supplies.

(7) The licensee may not permit pets in food preparation or storage areas.

(8) The licensee may not permit pets in any area where their presence would create a significant health or safety risk to others.

(9) The licensee shall ensure that a person caring for any pets does not have patient care or food handling responsibilities.

#### **R432-101-20. Inpatient Services.**

(1) Upon admission, a physician or qualified designee shall document the need for admission in accordance with hospital policy to include a brief narrative of the patient's condition that includes:

(a) the nurse's admitting notes;

(b) temperature;

(c) pulse;

(d) respiration levels;

(e) blood pressure; and

(f) weight.

(2)(a) A physician or qualified designee shall assess each patient's physical health and conduct a preliminary psychiatric assessment within 24 hours of admission.

(b) The physician or designee's history and physical exam shall include:

(i) appropriate laboratory work-up;

(ii) a determination of the type and extent of special examinations, tests, or evaluations needed; and

(iii) when indicated, a thorough neurological exam.

(3) A psychiatrist or psychologist or qualified designee shall assess each patient's mental health within 24 hours of admission and ensure there is a written emotional or behavioral assessment of each patient entered in the patient's record.

(4) The licensee shall ensure there is a written assessment of the patient's legal status to include:

(a) a history with information about competency, court commitment, criminal convictions, and any pending legal actions;

(b) the urgency of the legal situation; and

(c) how the individual's legal situation may influence treatment.

(5)(a) The licensee shall ensure a written individual treatment plan is initiated for each patient upon admission and completed no later than 7 working days after admission.

(b) The licensee shall ensure the individual treatment plan is based on the information resulting from the assessment of patient needs, as required in Subsection R432-101-20(1).

(c) The licensee shall ensure the person responsible for the patient's care signs the individual treatment plan and administers service according to the individual treatment plan.

(d) The licensee shall ensure that each individual treatment plan is reviewed on a weekly basis for the first three months, and thereafter at intervals determined by the treatment team, not to exceed every other month.

(e) The licensee shall ensure the written individual treatment plan for each patient is based on a comprehensive functional assessment as outlined in Subsection R432-101-22(7).

(f) The licensee shall invite the patient and family to participate in the development and review of the individual treatment plan.

(g) The licensee shall document patient and family participation, or reasons why it is inappropriate.

(h) The licensee shall ensure the individual treatment plan is available to any personnel who provide care for the patient.

(6)(a) The Utah State Hospital is exempt from the time frames required in Subsection R432-101-20(4) and Subsection R432-101-20(4)(d) time frames for initiating and reviewing the individual treatment plan.

(b) The Utah State Hospital administrator shall ensure that an individual treatment plan is initiated for each patient admitted within 14 days and the plan is reviewed on a monthly basis.

**R432-101-21. Adolescent or Child Treatment Program.**

(1)(a) A licensee that admits adolescents or children for care and treatment shall ensure it is organized with staff and space to meet the specialized needs of this specific group of patients.

(b) The licensee shall consider children between ages 5-12 and adolescents between the ages of 13 - 18.

(c) If a child is considered for admission to an adolescent program, the licensee shall assess and document that the child's developmental growth is appropriate for the adolescent program.

(d) The licensee may permit an adolescent patient who reaches their eighteenth birthday while residing in the program to complete the treatment program.

(2) A mental health professional with training in adolescent or child psychiatry, or adolescent or child psychology, as appropriate, shall be responsible for the treatment program.

(3) The licensee shall ensure adolescent or child nursing care is under the direction of a registered nurse qualified by training, experience, and ability to effectively direct the nursing staff.

(4) The licensee shall ensure each nursing staff is trained in the special needs of adolescents or children.

(5) The licensee shall provide education to any school age patients who are in the hospital for over one month.

(6) The licensee may admit an adolescent to an adult unit when specifically ordered by the attending member of the medical staff, but may not permit them to remain there more than three days, unless the clinical director approves an order for the adolescent to remain on the adult unit.

(7) The licensee shall ensure specialized programs for adolescents or children are flexible enough to meet the needs of the population being served.

(8) The licensee shall maintain the following in writing:

(a) a statement of philosophy, purposes and program orientation including short-term and long-term goals;

(b) the types of services provided and the characteristics of the adolescent or child population being served that is available to the public on request;

(c) description of the program's overall approach to family involvement in the care of patients;

(d) a policy regarding visiting and other forms of patient communication with family, friends and significant others;

(e) a plan of basic daily routines that is available to all staff and revised as necessary;

(f) a complaint process for adolescents or children in clear and simple language that identifies how to make a complaint without fear of retaliation; and

(g) a comprehensive guide of preventive, routine, and emergency medical care for any adolescent or child in the program, including policies and procedures regarding the use and administration of psychotropic and other medication.

(9) The licensee shall maintain a complete health record for each adolescent or child including:

(a) immunizations;

(b) medications;

(c) medical examination;

(d) vision and dental examination, if indicated by the medical examination;

(e) a complete record of treatment for each specific illness or medical emergency;

(f) documents related to the referral of the child to the program;

(g) documentation of the adolescent or child's current parental custody status or legal guardianship status;

(h) the adolescent or child's court status, if applicable;

(i) cumulative health records, where possible; and

(j) education records and reports.

(10) The licensee shall ensure the use of emergency medication is specifically ordered by a physician or other person licensed to prescribe and is related to a documented medical need.

(11) The licensee shall ensure adolescent or children's programs within a secure, locked treatment facility maintain:

(a) a statement in the adolescent or child's record identifying the specific security measures employed and demonstrating that these measures are necessary to provide appropriate services to the adolescent or child;

(b) evidence that the staff and the adolescent or child are aware of the hospital's emergency procedures and the location of emergency exits;

(c) a method for unlocking the rooms simultaneously from a central point or upon activation of a fire alarm system if adolescents or children are locked in their rooms during sleeping hours; and

(d) a recreational program offering a wide variety of activities suited to the interests and abilities of the adolescents or children in care.

**R432-101-22. Residential Treatment Services.**

(1) If offered, the licensee shall organize the residential treatment service as a distinct part of the hospital service as either free-standing or as part of the licensed facility.

(2) The licensee shall ensure residential treatment services are under the direction of the medical director or designee.

(3) The hospital administrator shall appoint a program manager responsible for the day-to-day operation and patient supervision.

(a) The administrator shall clearly define the program manager's responsibilities in the job description.

(b) When the manager is absent, the administrator shall ensure a substitute manager is appointed.

(4) The licensee shall ensure residential treatment staff have specialized training in the area of psychiatric treatment and consist of:

(a) a licensed physician;

(b) a certified or licensed clinical social worker;

(c) a licensed psychologist;

(d) a licensed registered nurse; and

(e) any unlicensed staff who are trained to work with psychiatric patients and are supervised by a health care practitioner.

(5)(a) The licensee shall ensure that a program that admits adolescents or children continues their education through grade 12.

(b) The licensee shall ensure any curricula used are approved by the Utah Office of Education.

(c) The licensee shall provide education services that are accredited by the Utah State Board of Education or Board Northwest Association of School and Colleges.

(d) The licensee shall ensure teachers are certified by the Utah State Board of Education and additionally certified in special education to supervise or carry out educational curricula.

(6) The licensee shall ensure an individual treatment plan:  
(a) is developed by an interdisciplinary team that encourages the patient's attendance in the interdisciplinary team meetings;

(b) is initiated for each patient upon admission;

(c) is completed in writing and is placed in the patient record within seven days;

(d) identifies the patient's needs, as described by the comprehensive functional assessment outlined in Subsection R432-101-22(7);

(e) includes the licensee's participation of the patient, their responsible party, if available, and facility staff in the planning of treatment; and

(f) sets goals and objectives stated in terms of desirable behavior that prescribes an integrated program of activities, therapies, and experiences necessary for the patient to reach their goals and objectives.

(7) The licensee shall ensure the comprehensive functional assessment considers the patient's age and the implications for treatment and identifies:

(a) the presenting problems and disabilities and, where possible, their cause;

(b) specific individual strengths;

(c) special behavioral management needs;

(d) physical health status to include:

(i) a history and physical exam performed by a physician or nurse practitioner that includes appropriate laboratory work-up; and

(ii) a determination of the type and extent of special examinations, tests or evaluations needed.

(e) alcohol and drug history;

(f) degree of psychological impairment and measures to be taken to relieve treatable diseases;

(g) the capacity for social interaction and habilitation and rehabilitation measures to be taken; and

(h) the emotional or behavioral status based on an assessment of:

(i) a history of previous emotional or behavioral problems and treatment;

(ii) the patient's current level of emotional or behavioral functioning;

(iii) an evaluation by a psychiatrist, psychologist or qualified designee within 30-days before admission, or within 24 hours after admission; and

(iv) if indicated, psychological testing that includes intellectual and personality testing.

(8) The licensee shall amend the comprehensive assessment to reflect any changes in the patient's condition.

(9) The licensee shall ensure an individual treatment plan is implemented that provides services:

(a) to improve the patient's condition; and

(b) in an environment that encompasses physical, interpersonal, cultural, therapeutic, rehabilitative, and habilitative components.

(10) The licensee shall encourage the patient to participate in professionally developed and supervised activities, experiences or therapies in accordance with the individualized treatment plan.

(11) Section R432-101-23, Physical Restraints, Seclusion, and Behavior Management additionally applies to a psychiatric specialty hospital licensee.

### **R432-101-23. Physical Restraints, Seclusion, and Behavior Management.**

(1) The licensee shall ensure physical restraints, including seclusion are only be used to protect the patient from injury to themselves or to others or to assist patients to attain and maintain optimum levels of physical and emotional functioning.

(2) The licensee shall ensure restraints are not used for the convenience of staff, for punishment or discipline, or as substitutes for direct patient care, activities, or other services.

(3) Each hospital shall develop written policies and procedures that govern the use of physical restraints and seclusion and shall ensure the major focus of these policies is to provide patient safety and ensure civil and patient rights.

(4) The licensee shall ensure policies incorporate and address the following:

(a) examples of the types of restraints and safety devices that are acceptable for use and possible patient conditions dictating when the restraint may be used; and

(b) guidelines for periodic release and position change or exercise, with instructions for documentation of this action.

(5) The licensee may not use bed sheets or other linens as restraints.

(6) The licensee shall ensure restraints do not unduly hinder evacuation of the patient in the event of fire or other emergency.

(7)(a) A member of the medical staff shall authorize restraints in writing every 24 hours.

(b) A licensee may not use PRN or as-needed orders for a restraint.

(c) If a physical restraint is used in behavior management, the licensee shall develop and follow an individualized behavior management program and an ongoing monitoring system to assure effectiveness of the treatment.

(d) The licensee shall ensure the use of restraints is reviewed routinely in the interdisciplinary team meeting, as the order is renewed by the member of the medical staff, and on a daily basis as care is delivered. This is an ongoing process that the licensee shall ensure is documented in the patient's record.

(e) The licensee may use physical restraints, including simple safety devices, only if a specific hazard or need for restraint is present.

(f) The physician order shall indicate the type of physical restraint or safety device that may be used and the length of time it may be used.

(g) The licensee shall develop and follow a restraint policy addressing Subsections R432-101-23(7)(a) through (f) and included in the patient care plan.

(8) The licensee shall ensure physical restraints are:

(a) applied by properly trained staff to ensure a minimum of discomfort, allowing sufficient body movement to ensure that circulation will not be impaired;

(b) not used or applied in a manner that causes injury or the potential for injury;

(c) are each monitored and assessed by staff; and

(d) are released or the patient's position changed at least every two hours, unless written justification is provided for why such restraint release is dangerous to the patient or others.

(9) Physical restraints may be used in an emergency, if there is an obvious threat to life or immediate safety, as follows:

(a) verbal orders may be given by the physician to a licensed nurse by telephone;

(b) a licensed health care professional, identified by policy, may initiate the use of a restraint, only if verbal or written approval from the physician is obtained within one hour;

(c) a physician shall sign any verbal order within 24 hours; and

(d) staff members document the circumstances necessitating emergency use of the restraint and the patient's response in the patient record.

(10) The licensee shall ensure seclusion is used in accordance with hospital policy and authorized by a member of the medical staff.

(11)(a) If seclusion is used for behavior management, the licensee shall ensure there is an individualized behavior management program and an ongoing monitoring system to assure effectiveness of the treatment.

(b) The licensee shall ensure the use of seclusion is reviewed routinely in the interdisciplinary team meeting, as the order is renewed by the member of the medical staff, and on a daily basis as care is delivered. This is an ongoing process that the licensee shall ensure is documented in the patient's record.

(c) The licensee shall ensure staff monitors a patient in seclusion for adverse effects and documents the monitoring evaluations in the patient record.

(12) The licensee shall ensure time out is used in accordance with hospital policy and may be used without authorization by a member of the medical staff for each use.

(13) The licensee shall ensure the use of time out is included in the patient care plan and documented in the patient record.

(14) The licensee shall ensure behavior management policy:

(a) establishes criteria for admission and retention of patients who require behavior management programs;

(b) specifies the data required and the location of the data in the clinical record;

(c) is developed by the interdisciplinary team;

(d) provides an opportunity for involvement of the patient, next of kin or designated representative in the interdisciplinary team; and

(e) describes the team leader's approval process of a behavior management program for a patient.

(15) The licensee shall ensure the behavior management program:

(a) employs the least restrictive methods to produce the desired outcomes and incorporate a process to identify and reinforce desirable behavior;

(b) includes consent for use of any behavior management program that employs aversive stimuli from the patient, next of kin, or designated representative;

(c) is incorporated into the patient care plan; and

(d) is reviewed routinely by an interdisciplinary team, as the order is renewed by the member of the medical staff, and on a daily basis as care is delivered. This is an ongoing process that the licensee shall ensure is documented in the patient's record.

(16) The licensee shall ensure behavior management documentation in the patient's record includes:

(a) a behavior baseline profile, including a description of the undesirable behavior, as well as a statement whether there is a known history of previous undesirable behaviors and previous treatment;

(b) conditions when the behavior occurs;

(c) interventions used and their results;

(d) a behavior management program including specific measurable behavioral objectives, time frames, names, titles, and signature of the person responsible for conducting the program and monitoring and evaluation methods; and

(e) summaries and dates of the evaluations and reviews by the interdisciplinary team.

#### **R432-101-24. Involuntary Medication Administration.**

(1) The licensee shall develop and comply with a policy and procedure for patients who refuse a prescribed medication that includes the following requirements:

(a) staff document the refusal of medications in the individual care plan; and

(b) the interdisciplinary team reviews and assesses the patient's refusal of medication, ensuring that the patient's rights are protected.

(2) If a physician, or licensed physician, orders involuntary medication and the interdisciplinary team determines that a patient needs the involuntary medication as part of the behavior management program, emergency management, or clinical treatment, the facility staff may issue the involuntary medication and document the physician's order in the individual treatment plan.

(3) If a patient is administered involuntary medications, the facility staff shall review the administration of medications in an interdisciplinary team meeting each time the physician renews the medication order, and on a day-to-day basis as care is delivered.

(4) The facility staff shall evaluate and assess the patient for adverse side effects to medications and document the evaluation and assessment in the patient record.

#### **R432-101-25. Outpatient Emergency Psychiatric Services.**

(1)(a) If the hospital offers outpatient emergency psychiatric services, the service shall be organized as a service specifically designated for this purpose and under the direction of the medical director or designee.

(b) The licensee shall ensure services are available 24 hours a day to individuals presenting themselves for assistance.

(c) If the licensee does not offer emergency outpatient psychiatric services, the licensee shall have a written plan for referral of persons making inquiry regarding such services or presenting themselves for assistance.

(2) The licensee shall ensure the outpatient service is supported by policies and procedures including admission and treatment procedures, and medical and psychiatric reference materials.

(3) The licensee shall ensure involuntary detention of an individual is according to applicable hospital policy and in compliance with Sections 26B-5- 3 through 26B-5-5.

#### **R432-101-26. Emergency Services.**

(1)(a) Each licensee shall provide physician and registered nurse coverage 24 hours a day and ensure nursing and other allied health professional staff are readily available in the hospital.

(b) Staff may have collateral duties elsewhere in the hospital, but shall be able to respond when needed without adversely affecting patient care or treatment elsewhere in the hospital.

(c) The licensee shall ensure there are trained staff to triage emergency care for each patient, staff and visitor, to stabilize the presenting condition, and transfer to an appropriately licensed facility.

(2) The licensee shall ensure there is:

(a) an emergency area that includes a treatment room;

(b) storage for supplies and equipment;

(c) provisions for reception and control of patients;

(d) a convenient patient toilet room; and

(e) communication hookup and access to a poison control center.

(3) If the licensee offers additional or expanded emergency services, the licensee shall additionally comply with Section R432-100-18.

(4) The licensee shall develop protocols for contacting local emergency medical services.

#### **R432-101-27. Clinical Services.**

(1) If the licensee provides the following services, the applicable sections of Rule R432-100 shall additionally apply:

(a) Surgical Services, Section R432-100-16;

(b) Critical Care Unit, Section R432-100-15; and

(c) Hospice Rule R432-750.

(2) If chemical dependency or substance abuse services are provided, Rule R432-102 Specialty Hospital - Chemical Dependency/Substance Abuse additionally applies to a psychiatric specialty hospital licensee.

#### **R432-101-28. Laboratory.**

(1) Each psychiatric specialty hospital shall have a Clinical Laboratory Improvement Amendments (CLIA) certificate. If an outside lab is contracted for providing services, the licensee shall ensure the outside lab has a CLIA certificate.

(2) If outside laboratory services are secured through contract, the licensee shall maintain an in-house ability to collect, preserve and arrange for delivery to the outside laboratory for testing.

(3) The licensee shall comply with the appropriate subsections of Section R432-100-24 for any additional laboratory services provided.

#### **R432-101-29. Pharmacy.**

(1) Each psychiatric specialty hospital shall provide basic services including storage, dispensing, and administration of medication in-house.

(2) The licensee shall ensure any pharmacy services comply with the appropriate subsections of Section R432-100-26.

(3) The licensee shall ensure the board and medical staff approve the policy regarding the use of investigational drugs.

#### **R432-101-30. Social Services.**

(1)(a) The licensee shall provide social services to assist staff, patients, and patients' families to understand and cope with a patient's social, emotional, and related health problems.

(b) The licensee shall ensure social services are under the direction of a licensed clinical social worker.

(c) The social worker shall ensure the role and function of social services is listed in policy documents and meets generally accepted practices of the Mental Health Professional Practice Act.

(d) The licensee shall ensure that social services personnel serve as a patient advocate to:

(i) provide services to maximize each patient's ability to adjust to the social and emotional aspects of their situation, treatments, and continued stay in the hospital;

(ii) participate in ongoing discharge planning to ensure continuity of care for the patient;

(iii) initiate referrals to official agencies when the patient needs legal or financial assistance;

(iv) act as liaison with the family or other responsible persons concerning the patient's placement and rights; and

(v) preserve the dignity and rights of each patient.

(2) Each licensee shall develop social services policies and procedures that include the following:

(a) a system to identify, plan, and provide services according to the social and emotional needs of patients;

(b) job descriptions, including title and qualifications of any person who provides social services; and

(c) a method to refer patients to outside social services agencies when the hospital cannot resolve a patient's problems.

(3) The social service director shall participate in any pertinent quality assurance activities of the hospital.

#### **R432-101-31. Activity Therapy.**

(1)(a) The licensee shall provide activity therapy services to meet the physical, social, cultural, recreational, health maintenance and rehabilitation needs of patients as outlined in the patient care plan.

(b) The licensee shall ensure the activity therapy service has policies that describe the organization of the service and provision for services to the patient population that ensure:

(i) program goals and objectives are stated in writing;

(ii) appropriate activities are provided to patients during the day, in the evening, and on the weekend;

(iii) patient participation in planning is sought, when possible; and

(iv) activity schedules are posted in places accessible to patients and staff;

(c) activity therapy is incorporated into the patient care plan;

(d) patients are permitted leisure time and encouraged to use it in a way that fulfills their cultural and recreational interests and their feelings of human dignity; and

(e) the activity therapy service is supervised.

(2) The licensee shall provide enough space, equipment, and facilities, that are compliant with any applicable federal, state and local requirements for safety, fire prevention, health and sanitation, to meet the needs of the patients.

#### **R432-101-32. Other Services.**

(1) If the licensee provides the following services, the applicable sections of Rule R432-100 shall additionally apply:

(a) Anesthesia Services, R432-100-16;

(b) Rehabilitation Therapy Services, R432-100-21;

(c) Radiology, R432-100-22; and

(d) Respiratory Care Services, R432-100-20.

(2) If the licensee provides the following ancillary services, the applicable sections of Rule R432-100 shall additionally apply:

(a) Central Supply, R432-100-36;

(b) Dietary, R432-100-33;

(c) Laundry, R432-100-37;

(d) Maintenance Services, R432-100-39; and

(e) Housekeeping, R432-100-38.

#### **R432-101-33. Medical Records.**

(1) The licensee shall ensure medical records additionally comply with Section R432-100-34.

(2) The licensee shall ensure that patient records contain:

(a) a description of physical, social, and mental health status at the time of admission;

(b) a description of services provided;

(c) a description of progress reports;

(d) status at the time of discharge; and

(e) data on standardized forms that includes:

(i) patient name;

(ii) home address;

(iii) date of birth;

(iv) gender;

(v) next of kin;

(vi) marital status; and

(vii) date of admission;

(f) involuntary commitment status, including relevant legal documents;

(g) date the information was gathered, and names and signatures of the staff members gathering the information;

(h) signed orders by physicians and other authorized practitioners for medications and treatments;

(i) relevant physical examination, medical history, and physical and mental diagnoses using a recognized diagnostic coding system;

(j) information on any unusual occurrences, such as treatment complications, accidents, or injuries to or inflicted by the patient, and procedures that place the patient at risk;

(k) documentation of patient and family involvement in the treatment program;

(l) progress notes written by the psychiatrist, psychologist, social worker, nurse, and others significantly involved in active treatment;

(m) temperature, pulse, respirations, blood pressure, height, and weight notations, when indicated;

(n) reports of laboratory, radiologic, or other diagnostic procedures, and reports of medical or surgical procedures when performed;

(o) correspondence with signed and dated notations of telephone calls concerning the patient's treatment;

(p) a written plan for discharge including an assessment of patient needs;

(q) documentation of any instance when the patient was absent from the hospital without permission; and

(r) the patient care plan.

(3) The licensee shall ensure there is a discharge summary signed by the attending member of the medical staff and entered into the patient record within 30 calendar days from the date of discharge. In the event a patient dies, the licensee shall ensure the discharge statement includes a summary of events leading to the death.

(4) The licensee shall ensure the patient record contains evidence of informed consent or the reason it is unattainable.

(5) The licensee shall ensure the patient record contains consent for release of information, the date the information was released, and the signature of the staff member who released the information and evidence the patient was informed of the release of information as soon as possible.

(6) The licensee may release pertinent information to personnel responsible for the individual's care without the patient's consent under the following circumstances:

(a) in a life-threatening situation;

(b) when an individual's condition or situation precludes obtaining written consent for release of information;

(c) when obtaining written consent for release of information would cause an excessive delay in delivering essential treatment to the individual.

#### **R432-101-34. Partial Hospitalization Services.**

(1) If the licensee offers a partial hospitalization program, the following services may be included:

(a) crisis stabilization or the provision of intensive, short-term, daily programming, that averts psychiatric hospitalization or offers transitional treatment back into community life to shorten an episode of acute inpatient care; and

(b) intermediate term treatment that provides more extended, daily, goal directed clinical services for a population at high risk for hospitalization or readmission due to the serious or persistent nature of their psychiatric, emotional behavioral, or addictive disorder.

(2) If the licensee offers partial hospitalization services, the licensee shall establish policies and procedures to address the following:

(a) criteria for admission indicating a DSM V Mental disorder;

(b) assessment;

(c) treatment planning;

(d) active treatment;

(e) coordination of care; and

(f) discharge criteria.

#### **R432-101-35. Penalties.**

Any person in noncompliance with any part of this rule may be subject to the penalties enumerated in Sections 26B-2-208, 26B-2-216 and R432-3-8.

#### **KEY: health care facilities**

Date of Last Change: **2023**~~[April 11, 2011]~~

Notice of Continuation: September 8, 2020

Authorizing, and Implemented or Interpreted Law: **26B-2-202**~~[26-21-2.1; 26-21-5; 26-21-6; 26-21-20]~~

#### **NOTICE OF PROPOSED RULE**

**TYPE OF FILING:** Repeal and Reenact

<b>Rule or Section Number:</b>	<b>R657-4</b>	<b>Filing ID:</b> <b>55534</b>
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#### **Agency Information**

<b>1. Department:</b>	Natural Resources	
<b>Agency:</b>	Wildlife Resources	
<b>Room number:</b>	Suite 2110	
<b>Building:</b>	Department of Natural Resources	
<b>Street address:</b>	1594 W North Temple	
<b>City, state and zip:</b>	Salt Lake City, UT 84116	
<b>Mailing address:</b>	PO Box 146301	
<b>City, state and zip:</b>	Salt Lake City, UT 84114-6301	
<b>Contact persons:</b>		
<b>Name:</b>	<b>Phone:</b>	<b>Email:</b>
Staci Coons	801-450-3093	stacicoons@utah.gov

Please address questions regarding information on this notice to the persons listed above.

## General Information

### 2. Rule or section catchline:

R657-4. Possession of Live Game Birds

### 3. Purpose of the new rule or reason for the change:

This rule is being amended pursuant to Regional Advisory Council and Wildlife Board meetings conducted annually for taking public input and reviewing the Division of Wildlife Resources' (Division) rule regulating the possession and release of pen-reared gamebirds.

### 4. Summary of the new rule or change:

Pen-reared gamebird related rule sections are currently distributed across six Division rules and one Department of Agriculture and Food (UDAF) rule.

This recommendation is to update rules to align conflicting rule language across agencies, simplify Division rule by consolidating pen-reared gamebird provision into a single rule, shift regulation of commercial gamebirds growers to the UDAF, and update disease testing requirements to meet challenges of emerging disease.

The proposed filing will repeal and reenact Rule R657-4 from "Possession of Live Game Birds" to "Possession and Release of Pen-reared Gamebirds".

The amendments will also:

- 1) define "gamebirds";
- 2) define permitting requirements for possession and release separately;
- 3) establish UDAF as the agency regulating commercial gamebird growers;
- 4) establish the Division as the agency regulating personal use of pen-reared gamebirds and sets requirements;
- 5) establish the Division as the agency regulating release of pen-reared gamebirds and sets requirements;
- 6) establish standards for disease testing;
- 7) incorporate Section R657-20-26, Use of Pen-reared Game Birds for Meets, Trials and Training;
- 8) incorporate Rule R657-22, Commercial Hunting Areas;
- 9) incorporate Rule R657-46, Game Birds in Training and Trials; and
- 10) make technical corrections as needed.

## Fiscal Information

### 5. Provide an estimate and written explanation of the aggregate anticipated cost or savings to:

#### A) State budget:

The amendments are administrative in nature, and establish a clear line of authority between different regulating agencies.

The Division determines that these changes can be initiated within the current workload and resources of the Division, therefore, the Division does not believe that these amendments would create a cost or savings impact to the state budget or the Division's budget since the changes will not increase workload and can be carried out with existing budget.

#### B) Local governments:

Since the proposed rule establishes a clear line of authority between regulating agencies and local governments are not included, this filing does not create any direct cost or savings impact to local governments.

Nor are local governments indirectly impacted because this rule does not create a situation requiring services from local governments.

#### C) Small businesses ("small business" means a business employing 1-49 persons):

The proposed rule amendments will not directly impact small businesses because a service is not required of them.

#### D) Non-small businesses ("non-small business" means a business employing 50 or more persons):

The proposed rule amendments will not directly impact non-small businesses because a service is not required of them.

#### E) Persons other than small businesses, non-small businesses, state, or local government entities ("person" means any individual, partnership, corporation, association, governmental entity, or public or private organization of any character other than an **agency**):

These amendments do not have the potential to create a cost impact to those individuals wishing to participate in the raising of gamebirds because there are not additional requirements made with these new amendments.

#### F) Compliance costs for affected persons (How much will it cost an impacted entity to adhere to this rule or its changes?):

The Division determines that this amendment will not create additional costs for those participating in the raising of gamebirds because there are not additional requirements made.

#### G) Regulatory Impact Summary Table (This table only includes fiscal impacts that could be measured. If there are inestimable fiscal impacts, they will not be included in this table. Inestimable impacts will be included in narratives above.)



Regulatory Impact Table			
Fiscal Cost	FY2024	FY2025	FY2026
State Government	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0
<b>Total Fiscal Cost</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
Fiscal Benefits	FY2024	FY2025	FY2026
State Government	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0
<b>Total Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Net Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>H) Department head comments on fiscal impact and approval of regulatory impact analysis:</b>			
The Executive Director of the Department of Natural Resources, Joel Ferry, has reviewed and approved this fiscal analysis.			

**Citation Information**

<b>6. Provide citations to the statutory authority for the rule. If there is also a federal requirement for the rule, provide a citation to that requirement:</b>		
Section 23A-5-302	Section 23A-2-305	Section 23A-2-304

**Public Notice Information**

<b>8. The public may submit written or oral comments to the agency identified in box 1.</b> (The public may also request a hearing by submitting a written request to the agency. See Section 63G-3-302 and Rule R15-1 for more information.)	
<b>A) Comments will be accepted until:</b>	09/14/2023

<b>9. This rule change MAY become effective on:</b>	09/21/2023
NOTE: The date above is the date the agency anticipates making the rule or its changes effective. It is NOT the effective date.	

**Agency Authorization Information**

<b>Agency head or designee and title:</b>	Justin Shirley, Division Director	<b>Date:</b>	07/31/2023
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**R657. Natural Resources, Wildlife Resources.****[R657 4. Possession of Live Game Birds.****R657 4 1. Purpose and Authority.**

(1) Under authority of Sections 23-13-4, 23-14-18, and 23-14-19, the Wildlife Board has established this rule for the possession, importation, purchase, propagation, sale, barter, trade, or disposal of live game birds.

(2) The provisions of Rule R657-3 do not apply to activities conducted by holders of a valid certificate of registration for aviculture to the extent those activities are covered by this rule.

**R657 4 2. Definitions.**

(1) Terms used in this rule are defined in Section 23-13-2.

(2) In addition:

(a) "Aviculture installation" means an enclosed place such as a pen or aviary where privately owned game birds are propagated or kept, and restricts the game birds from escaping into the wild.

(b) "Commercial use" means, for purposes of this rule, the sales of any game birds authorized by the certificate of registration in excess of \$5,000 annually.

(c) "Game bird" means;

(i) crane;

(ii) Blue, Ruffed, Sage, Sharp-tailed, and Spruce grouse;

(iii) Chukar, Red-legged, and Hungarian partridge;

(iv) pheasant;

(v) Band-tailed Pigeon;

(vi) Bobwhite, California, Gambel's, Harlequin, Mountain, and Sealed quail;

(vii) waterfowl;

(viii) Common Ground, Inca, Mourning, and White-winged dove;

(ix) wild or pen-reared wild turkey of the following subspecies:

(A) Eastern;

(B) Florida or Osceola;

(C) Gould's;

(D) Merriam's;

(E) Ocellated; and

(F) Rio Grande; and

(x) ptarmigan.

(d) "Pen-reared wild turkey" means any turkey or turkey egg held under human control that:

(i) is imprinted on other poultry or humans; and

(ii) has morphological characteristics of wild turkeys.

(e) "Wild turkey" means recognized subspecies and hybrids of free-ranging turkeys hatched in the wild. Recognized subspecies and hybrids between subspecies include Eastern, Florida or Osceola, Gould's, Merriam's, Ocellated, and Rio Grande.

#### **R657-4-3. Certificates of Registration.**

(1) Except as provided in Subsections R657-4-3(5) and R657-4-7(2), a person may not possess, import, purchase, propagate, sell, barter, trade, or dispose of any live game bird, or the eggs of any game bird, without first obtaining a certificate of registration for aviculture from the division.

(2) Any person who has obtained a certificate of registration for aviculture may possess, import, purchase, propagate, sell, barter, trade, or dispose of only those species of game birds designated on that person's certificate of registration.

(3) Certificates of registration for aviculture:

(a) are not transferable; and

(b) are valid for five years from the date of issuance.

(4)(a) Any person who has applied for and obtained a certificate of registration for aviculture must comply with all state, federal, city, and other municipality laws, rules, and regulations pertaining to the possession of live game birds.

(b) A person shall not operate a hatchery or offer any chicks, poults, or hatching eggs for sale in Utah without first obtaining a hatchery license from the Department of Agriculture and Food as provided in Section 4-29-4.

(5) A person who acquires live game birds is not required to obtain a certificate of registration:

(a) if the game birds are used for training dogs as provided in Rule R657-46;

(b) if the game birds are used for the sport of falconry and:

(i) each game bird held in possession is banded with a metal leg band purchased from the division;

(ii) the game birds are not held in possession longer than 60 days;

(iii) a bill of sale establishing proof of purchase from a legal source is in possession; and

(iv) a valid entry permit number and a certificate of veterinary inspection has been obtained from the Department of Agriculture and Food as provided in Rule R58-1 if the game birds are imported into Utah; or

(c) for holding game birds in temporary storage while the game birds are in transit through Utah provided the birds are identified as to their source and destination and are not removed from the shipping containers.

#### **R657-4-4. Application for a Certificate of Registration.**

(1) A person may obtain a certificate of registration for aviculture by submitting a completed application and the appropriate fee to the regional division office in the area in which the aviculture installation is to be located.

(2) If the applicant is under the age of 18, a parent or guardian must co-sign the application and is responsible for compliance with this rule and all other associated laws.

(3) A person may apply to renew a certificate of registration on or three months before the date on which the certificate of registration expires.

#### **R657-4-5. Exhibit of Certificate of Registration, Game Birds, and Equipment.**

A conservation officer or any other peace officer may request any person engaged in activities covered under this rule to exhibit:

(1) the person's certificate of registration, permit, health certificate, bill of sale, or proof of ownership;

(2) any game birds held in possession; or

(3) any device, apparatus, or facility used for activities covered under this rule.

#### **R657-4-6. Unlawful Possession—Release of Game Birds.**

(1) A person may not:

(a) take any live game bird or the egg of any game bird from the wild, except as provided in Rules R657-3 and R657-6 and the proclamation of the Wildlife Board for taking upland game;

(b) release or abandon any live game bird without first obtaining written authorization from the division director or appropriate regional supervisor as provided in Subsection (2), except that game birds may be released for training dogs or raptors as provided in Rule R657-46; or

(c) release any wild turkey or pen-reared wild turkey from captivity.

(2) A person must submit a letter requesting permission to release game birds and must include the operator's:

(a) name, address and telephone number;

(b) certificate of registration number;

(c) area and date of intended release;

(d) species to be released;

(e) number and sex of each species to be released; and

(f) a statement from a veterinarian that the birds have been tested for *Salmonella pullorum* or come from a source flock that participates in the National Poultry Improvement Plan (NPIP).

(3) In determining whether to allow the release of a game bird as allowed under Subsection (1)(b), the division shall consider:

(a) the potential release site and its relative impact on wildlife and wildlife habitat;

(b) the species or subspecies of game birds to be released; and

(c) the activity for which the game birds are to be released.

(4)(a) Any game bird that escapes from captivity becomes the property of the state of Utah.

(b) The director may authorize the destruction of any escaped game birds that may impact wildlife.

(5) The division may dispose of game birds or their eggs held in possession in violation of this rule.

(6) Game birds or their eggs held in captivity must be confined to the registered aviculture installation, except when in transit or being displayed.

#### **R657-4-7. Importation of Live Game Birds and Eggs of Game Birds.**

(1) Except as provided in Subsection (2) and Section R657-4-3(5), a person importing live game birds or the eggs of game birds into Utah must first obtain:

(a) a valid entry permit number and a certificate of veterinary inspection from the Department of Agriculture and Food as provided in Rule R58-1 and in accordance with Section 4-29-2; and

(b) a certificate of registration from the division.

(2) A nonresident importing live game birds into Utah is not required to obtain a certificate of registration for aviculture unless the game birds remain in Utah longer than 72 hours.

#### **R657-4-8. Sale or Purchase of Live Game Birds.**

(1)(a) Any person who sells, barter, trades, or disposes of a live game bird or the egg of a game bird to another person must provide a bill of sale.

~~(b) The transferor's certificate of registration number must be written on the bill of sale.~~

~~(2)(a) Any person who possesses, imports, purchases, propagates, sells, barterers, trades, or disposes of live game birds must keep a record of each transaction that includes:~~

- ~~(i) the species;~~
- ~~(ii) the number and sex of the game birds;~~
- ~~(iii) the name and address of each party to the transaction;~~

~~and~~

~~(iv) the date of the transaction.~~

~~(b) The records required under Subsection (a) must be maintained for five years.~~

#### **R657-4-9. Penalty for Violation.**

~~A violation of any provision of this rule is punishable as provided in Section 23-13-11.]~~

#### **R657-4. Possession and Release of Pen-reared Gamebirds.**

##### **R657-4-1. Purpose and Authority.**

~~(1) Under authority of Sections 23A-5-302, 23A-2-305, and 23A-2-304, the Wildlife Board has established this rule for the possession, importation, purchase, propagation, sale, barter, trade, release or disposal of live pen-reared gamebirds and their eggs.~~

~~(2) The provisions of Rule R657-3b do not apply to activities conducted by holders of a valid Wildlife Document to the extent those activities are covered by this rule.~~

#### **R657-4-2. Definitions.**

~~(1) Terms used in this rule are defined in Section 23A-1-101.~~

~~(2) In addition:~~

~~(a) "Authorized Species" those species specifically authorized on a certificate of registration.~~

~~(b) "Commercial hunting area" or "CHA" means a parcel of land permitted to release pen-reared or propagated gamebirds more than five days per year.~~

~~(c) "Contiguous" means a piece of land that shares a boundary, including a single point at corners.~~

~~(d) "Director" means the director of the Division.~~

~~(e) "Disease free status" means a bird, or representative sample of a flock has tested negative for pathogens listed in Rule R58-6 and Sections R657-4-10, R657-4-11, R657-4-12, R657-4-13.~~

~~(f) "Division" means the Utah Division of Wildlife Resources.~~

~~(g) "Durable marking" means metal leg band, patagial tag, or other marking attached to an animal identifying it as a pen-reared bird that can reasonably be expected to remain attached for more than one year and is easily visible on inspection of a bird in hand.~~

~~(h) "Field trial" means an organized event where the abilities of dog handlers and their dogs are evaluated, including the ability of the dogs to hunt or retrieve gamebirds.~~

~~(i) "NPIP" means National Poultry Improvement Plan.~~

~~(j) "Operator" means a person, group, or business entity, including their agents, employees and contractors, that manages, owns, administers, or oversees the activities and operations of a facility or CHA. Operator further includes any person, group or business entity that employs or contracts another to serve or act as an operator.~~

~~(k) "Pen-reared Gamebird" means species of the following that were breed from legally acquired captive stock and hatched and raised in captivity:~~

~~(i) chukar partridge;~~

~~(ii) red-legged partridge;~~

~~(iii) gray (Hungarian) partridge;~~

~~(iv) pheasant (genus *Syrnaticus*, *Chrysolophus*, and *Phasianus*);~~

~~(v) Bobwhite quail;~~

~~(vi) California quail;~~

~~(vii) Gambel's quail; and~~

~~(viii) waterfowl (family Anatidae).~~

~~(l) "Train" or "training" means informal handling, exercising, teaching, instructing, and disciplining of dogs or falconry birds in the skills and techniques of hunting and retrieving gamebirds characterized by absence of fees, judging, or awards.~~

~~(m) "Wildlife Document" A certificate or registration, permit, license or other document issued by the Division granting permission for a possession of animals or a specific activity.~~

#### **R657-4-3. Prohibited Possession of Pen-reared Gamebirds.**

~~(1) A person may not take any live gamebird or the egg of any gamebird from the wild, except as provided in Rules R657-3, R657-6, R657-9, the proclamation of the Wildlife Board for taking upland game and proclamation of the Wildlife Board for taking waterfowl. Any permit or Wildlife Document granted in this rule does not give permission to take any wild birds or other animals, including species listed as pen-reared gamebirds.~~

~~(2) Except as provided in Section R657-4-14, a person may not possess, purchase, or dispose of a live pen-reared gamebird without first obtaining a Pen-reared Gamebird Personal Possession Wildlife Document from the Division or Commercial Gamebird Facility License from the Department of Agriculture and Food.~~

~~(3) A person may not import, propagate, sell, barter, trade, any live pen-reared gamebird, or the eggs of any pen-reared gamebird, without first obtaining a Personal Use Pen-reared Gamebird Permit from the Division or Commercial Gamebird Facility License from the Department of Agriculture and Food.~~

#### **R657-4-4. Exhibit of Wildlife Document, License, Pen-reared Gamebirds, and Equipment.**

~~(1) A conservation officer or any other law enforcement officer may request any person engaged in activities covered under this rule to exhibit:~~

~~(a) the person's license, permit, health certificate, bill of sale, Wildlife Document, or proof of ownership;~~

~~(b) any pen-reared gamebirds held in possession; and~~

~~(c) any device, apparatus, or facility used for activities covered under this rule.~~

~~(2)(a) Certificates of registration, permits, wildlife documents and licenses are issued upon the express condition that the operator agrees to permit the Division, Department of Agriculture and Food, and public health and safety officials to enter and inspect the premises, facilities, and all required records and health certificates to ensure compliance with this rule and other applicable laws.~~

~~(b) Inspections shall be made during reasonable hours.~~

#### **R657-4-5. Penalty for Violation.**

~~(1) The Division may suspend or revoke any license, permit or certificate related to pen-reared gamebird possession or release, as authorized under Section 23A-4-1106 and Rule R657-26, for violation of Utah Code, rule, or terms of the certificate of registration.~~

~~(2) A violation of this rule is punishable as provided in Section 23A-6-301.~~

~~(3) The Division may dispose of pen-reared gamebirds, or their eggs held in possession in violation of this rule.~~

**R657-4-6. Recapture.**

(1) Recapturing pen-reared gamebirds that have been released or escaped is permitted only:

(a) within CHA release area boundaries for approved species listed on the CHA Wildlife Document as not established in the wild in the area; or

(b) to capture birds who escaped from a registered personal use pen-reared gamebird facility or commercial gamebird facility.

(2) Any pen-reared gamebird that exits a designated release area becomes the property of the state and may not be recaptured.

(3) Any pen-reared gamebirds recaptured may not be recounted or added to the total number of birds released for annual reporting purposes.

**R657-4-7. Importation of Live Pen-reared Gamebirds and Eggs of Gamebirds.**

All pen-reared gamebirds and hatching eggs imported into Utah must meet the requirements found in Rules R58-1 and R58-6.

**R657-4-8. Records of Sale or Purchase of Live Pen-reared Gamebirds.**

(1) Any person who sells, barter, trades, or disposes of a live pen-reared gamebird or the egg of a pen-reared gamebird to another person, including sale of birds released on commercial hunting areas or during high volume pen-reared gamebird releases, must provide a bill of sale that includes:

(a) the seller's Commercial Gamebird Facility License number or Pen-reared Gamebird Personal Possession Wildlife Document number and CHA or High Volume Pen-reared Gamebirds Release Wildlife Document number as applicable;

(b) the species;

(c) the number of pen-reared gamebirds;

(d) the sex of pen-reared gamebirds if plumages exhibit sexual dimorphism; and

(e) the date of the transaction.

(2) Any person who possesses, imports, purchases, propagates, sells, barter, trades, or disposes of live pen-reared gamebirds must keep a record of each transaction that includes:

(a) the species;

(b) the number of pen-reared gamebirds;

(c) the sex of pen-reared gamebirds if plumages exhibits sexual dimorphism;

(d) the name and address of each party to the transaction;

(e) Commercial Gamebird Facility License number, Pen-reared Gamebird Personal Possession Wildlife Document number, CHA Wildlife Document number and High Volume Pen-reared Gamebirds Release Wildlife Document number as applicable; and

(f) the date of the transaction.

(3) The records required under Subsection (2) must be maintained for three years.

**R657-4-9. Unlawful Release of Pen-reared Gamebirds.**

(1) Except as provided in Section R657-4-17, it is unlawful to release or abandon any live pen-reared gamebird without first obtaining written authorization from the Division in the form of a High Volume Pen-reared Gamebird Release Wildlife Document, Commercial Hunting Areas Wildlife Document, or written prior approval of the Division director or regional supervisor.

(2) The director of the Division may authorize the destruction of any escaped pen-reared gamebirds that may impact wildlife.

(3) A person may not restrict a pen-reared gamebird's ability to fly or run during hunting activities in any manner other than dizzying, tucking heads under wings before release or through the use of release mechanisms such as bird launchers and kick cages.

**R657-4-10. Disease General Provisions.**

(1) The Division may:

(a) investigate any reported disease and take any necessary action to control a contagious or infectious disease affecting domestic animals, wildlife, or public health; or

(b) order a veterinarian or certified pathologist's report of a suspected disease, and may order quarantine, immunization, testing, or other sanitary measures.

(2)(a) The Division may order the destruction and disposal of any pen-reared gamebird found to have an untreatable disease which poses a potential threat or health risk to domestic poultry, humans, or wildlife, as determined by the Division, the Department of Agriculture and Food, or the Department of Health and Human Services.

(b) Actions taken pursuant to Subsection (a) may be at the operator's expense.

(c) Actions taken pursuant to Subsection (a) shall be accomplished by following procedures acceptable to the Division that ensure the disease is not transmitted to wildlife, domestic animals, or humans.

(3) Operators must take reasonable precautions to prevent and control the spread of infectious diseases among pen-reared gamebirds under their control.

(4) Commercial Gamebird Facilities must be licensed through the Department of Agriculture and Food under Rule R58-6, and meet requirements outlined therein.

**R657-4-11. Disease Provisions for Holders of High Volume Gamebird Release and Commercial Hunting Area Release Wildlife Documents.**

(1) Groups or individuals releasing pen-reared gamebirds under a High Volume Pen-reared Gamebird Release Wildlife Document or Commercial Hunting Area Pen-reared Gamebird Release Wildlife Document shall:

(a) Obtain pen-reared gamebirds from a Commercial Gamebird Facility within Utah licensed by the Department of Agriculture and Food;

(b) Import pen-reared gamebirds into Utah following Department of Agriculture and Food requirements in Rule R58-1; or

(c) Obtain pen-reared gamebirds from a holder of a pen-reared Gamebird Personal Possession Wildlife Document and test a representative sample prior to release and not more than 30 days of acquisition for:

(i) Mycoplasma gallisepticum;

(ii) Mycoplasma synoviae;

(iii) Avian Influenza virus; and

(iv) Salmonella pullorum-typhoid.

(A) Salmonella pullorum-typhoid testing is only required if any other domestic birds are on the facility or gamebirds did not originate from an NPIP source flock certified for Pullorum-Typhoid.

(v) Additional diseases identified by the Division or Utah Department of Agriculture and Food as threats to wildlife or domestic birds if the wildlife document holder has been notified of additional requirements.

(2) If any birds are kept longer than 30 days, or are housed in the same facility that has contained any birds for more than 30 days operators must obtain a statement from a veterinarian within 30 days before release that a representative sample of birds tested negative for:

(a) Mycoplasma gallisepticum;

(b) Mycoplasma synoviae;

(c) Avian Influenza virus; and

(d) Salmonella pullorum-typhoid.

(i) Salmonella pullorum-typhoid testing is only required if any other domestic birds are on the facility or if any gamebirds did not originate from an NPIP source flock certified as free from Pullorum-Typhoid.

(e) Additional disease identified by the Division or Utah Department of Agriculture and Food as threats to wildlife or domestic birds if the wildlife document holder has been notified of additional requirements.

(3) In the case of game birds testing positive for diseases listed in Subsection (2) game birds shall not be brought into, out of, or released from any holding facilities before disease free status has been established.

(a) Facilities are considered disease free 60 days after negative testing as specified in Subsection (2).

(4) Testing as per Subsection (2) is additionally required before release after positive disease tests.

(5) Additional measures may be applied as deemed appropriate by the Division, the Department of Agriculture and Food, or the Department of Health and Human Services.

(6) A holder of High Volume Pen-reared Gamebird Release Wildlife Documents or Commercial Hunting Area Pen-reared Gamebird Release Wildlife Documents shall notify the Division of any large or unusual mortality events due to infectious disease, diet, or unknown cause within 48 hours of the event.

#### **R657-4-12. Disease Provisions for Holders of Pen-reared Gamebird Personal Possession Wildlife Documents.**

(1) Those holding or propagating pen-reared gamebirds under a Pen-reared Gamebird Personal Possession Wildlife Document shall:

(a) Obtain pen-reared gamebirds from a Commercial Gamebird Facility within Utah licensed by the Department of Agriculture;

(b) Import pen-reared gamebirds into Utah following Department of Agriculture and Food requirements in Rule R58-1; or

(c) Test a representative sample within 30 days of acquisition for:

(i) Mycoplasma gallisepticum;

(ii) Mycoplasma synoviae;

(iii) Avian Influenza virus; and

(iv) Salmonella pullorum-typhoid.

(A) Salmonella pullorum-typhoid testing is only required if any other domestic birds are on the facility or gamebirds did not originate from an NPIP source flock certified for Pullorum-Typhoid.

(v) Additional diseases identified by the Division or Utah Department of Agriculture and Food as threats to wildlife or domestic birds if the wildlife document holder has been notified of additional requirements.

(2) In the case of gamebirds testing positive for diseases listed in Subsection (1)(c), game birds shall not be brought into, out of, or released from any holding facilities before disease free status has been established.

(a) Facilities are considered disease free 60 days after negative testing as specified in Subsection (1)(c).

(b) Additional measures may be applied as deemed appropriate by the Division, the Department of Agriculture and Food, or the Department of Health and Human Services.

(3) Those holding or propagating pen-reared gamebirds under a Pen-reared Gamebird Personal Possession Wildlife Document shall notify the Division of any large or unusual mortality events due to infectious disease, diet, or unknown cause within 48 hours of the event.

#### **R657-4-13. Disease Provisions for Those Possessing Gamebirds Under Short Term Pen-reared Gamebird Possession Provisions or Releasing Gamebirds Under Personal Use Pen-reared Gamebird Release Provisions.**

(1) Those possessing or releasing pen-reared gamebirds under short term pen-reared gamebird possession provisions or personal use pen-reared gamebird release provisions shall:

(a) Obtain pen-reared gamebirds from a Commercial Gamebird Facility within Utah licensed by the Department of Agriculture; or

(b) Import pen-reared gamebirds into Utah following Department of Agriculture and Food requirements in Rule R58-1; or

(c) Test a representative sample within 30 days before release for:

(i) Mycoplasma gallisepticum;

(ii) Mycoplasma synoviae;

(iii) Avian Influenza virus; and

(iv) Salmonella pullorum-typhoid.

(A) Salmonella pullorum-typhoid testing is only required if any other domestic birds are on the facility or gamebirds did not originate from an NPIP source flock certified for Pullorum-Typhoid.

(v) Additional diseases identified by the Division or Utah Department of Agriculture and Food as threats to wildlife or domestic birds if the wildlife document holder has been notified of additional requirements.

(2) In the case of game birds testing positive for diseases listed in Subsection (1)(c) game birds shall not be brought into, out of, or released from any holding facilities before disease free status has been established.

(a) Facilities are considered disease free 60 days after negative testing listed in Subsection (1)(c).

(b) Retesting as per Subsection (1)(c) is additionally required before release.

(c) Additional measures may be applied as deemed appropriate by the Division, the Department of Agriculture and Food, or the Department of Health and Human Services.

(e) Those possessing gamebirds under short term pen-reared gamebird possession provisions shall notify the Division of any large or unusual mortality events due to infectious disease, diet or unknown cause within 48 hours of the event.

#### **R657-4-14. Short Term Pen-reared Gamebird Possession.**

(1) A Wildlife Document is not required if:

(a) a person has pen-reared gamebirds collectively in possession less than 60 days;

(b) fewer than 50 birds are held;  
(c) pen-reared gamebirds were acquired in Utah or imported as per Section R657-4-7;  
(d) each pen-reared gamebird has a durable marking attached;  
(e) a bill of sale establishing proof of purchase from a legal source is in possession;  
(f) pen-reared gamebirds meet disease requirements specified in Sections R657-4-10 and R657-4-13; and  
(g) the pen-reared gamebirds are used for dog training or falconry bird training.  
(2) No registration is needed for holding pen-reared gamebirds in temporary storage while the pen-reared gamebirds are in transit through Utah provided the birds are identified as to their source and destination and are not removed from the shipping containers.  
(3) Any person in possession of pen-reared gamebirds must comply with all state, federal, city, and other municipality laws, rules, and regulations pertaining to the possession of live pen-reared gamebirds.

**R657-4-15. Pen-reared Gamebird Personal Possession Wildlife Document.**

(1) A Pen-reared Gamebird Personal Possession Wildlife Document is required for any of the following:  
(a) Pen-reared gamebirds are held 60 day or longer;  
(b) 50 or more and less than 1,000 total birds and viable eggs are held in possession;  
(c) for import, propagation, sale, barter, trade of pen-reared gamebirds; or  
(d) for hatching of pen-reared gamebird eggs.  
(2) A person who acquires live pen-reared gamebirds is not required to obtain a Pen-reared Gamebird Personal Possession Wildlife Document if they:  
(a) meet criteria in Section R657-4-14; or  
(b) possess a Commercial Gamebird Facility License from the Department of Agriculture and Food as outlined in Rule R58-6.  
(3) Pen-reared Gamebird Personal Possession Wildlife Documents:  
(a) are not transferable;  
(b) are valid for one year from the date of issuance; and  
(c) are limited to authorized pen-reared gamebird species or as indicated on the permit.  
(4) Any person who has applied for and obtained a Pen-reared Gamebird Personal Possession Wildlife Document must comply with all state, federal, city, and other municipality laws, rules, and regulations pertaining to the possession of live pen-reared gamebirds.  
(5) Holders of Pen-reared Gamebird Personal Possession Wildlife Documents shall:  
(a) construct facilities so as to prevent escape of birds;  
(b) construct facilities to preclude access to native waterways; and  
(c) meet other minimum facility standards as specified in Division pen-reared gamebird facility guidelines available at <https://wildlife.utah.gov>.  
(6) A facility inspection is not required to issue a Pen-reared Gamebird Personal Possession Wildlife Document.  
(7) Pen-reared Gamebird Personal Possession Wildlife Document holders must comply with disease provisions as per Sections R657-4-10 and R657-4-12.

(8) Registration for a Pen-reared Gamebird Personal Possession Wildlife Document:

(a) A person may obtain a Pen-reared Gamebird Personal Possession Wildlife Document through the Division's online permitting system.  
(b) If the applicant is under the age of 18, a parent or guardian must co-sign the application and is responsible for compliance with this rule and all other associated laws.

**R657-4-16. Commercial Gamebird Facility.**

(1) A Commercial Gamebird Facility License required if:  
(a) more than 1,000 total birds and viable eggs are held in possession; and  
(b) for importation, propagation, sale, barter, trade of gamebirds.  
(2) A Commercial Gamebird Facility must be licensed by the Department of Agriculture and Food under Rule R657-6.  
(3) Commercial Gamebird Facilities shall comply with Division pen-reared gamebird facility guidelines available at <https://wildlife.utah.gov> in addition to Department of Agriculture and Food Requirements.  
(a) Commercial Gamebird Facilities shall be constructed so as to prevent escape of birds.  
(b) Commercial Gamebird Facilities shall prevent access to native waterways.  
(4) Any person in possession of pen-reared gamebirds must comply with all state, federal, city, and other municipality laws, rules, and regulations pertaining to the possession of live pen-reared gamebirds.

**R657-4-17. Personal Use Pen-reared Gamebird Release.**

(1) A person may release legally acquired pen-reared gamebirds without wildlife documents provided:  
(a) the person or group of persons is not releasing more than ten pen-reared gamebirds per day or three pen-reared gamebirds per dog or registered falcon per day, whichever is greater;  
(b) the group releasing pen-reared gamebirds is less than or equal to ten persons;  
(c) the person or group is releasing legally acquired pen-reared gamebirds for training bird dogs or falconry birds;  
(d) the person or group birds has an invoice or bill of sale in their possession showing lawful personal possession or ownership of the pen-reared gamebirds;  
(e) each pen-reared gamebird must be marked with a durable marking;  
(f) any pen-reared gamebird released in areas with wild populations of the same species must be marked with a visible streamer or tape at least 12 inches in length before being released, and must have the streamer or tape attached when killed; and  
(g) the use of dogs complies with Rules R657-6, R657-9, and R657-54 and use of falconry birds complies with Rule R657-20.  
(2) A person may only take the pen-reared gamebirds they or members of their group have released.  
(3) Pen-reared gamebirds that are not recovered on the day of the training, released without permanent marking, or pen-reared gamebirds that escape shall become property of the state and may not be recaptured or taken except:  
(a) as specified in Section R657-4-6; or  
(b) during legal hunting seasons as specified in the Upland Game and Waterfowl proclamations of the Wildlife Board.

(4) Pen-reared gamebirds released must:

(a) meet requirements specified in Sections R657-4-10 and R657-4-13; and

(b) be healthy, capable of flight, free of disease and suitable for human consumption.

**R657-4-18. High Volume Pen-reared Gamebird Release (Field Trial).**

(1) A High Volume Pen-reared Gamebird Release Wildlife Document is required for:

(a) groups larger than 10 people releasing pen-reared gamebirds in the same area on 5 or fewer days within a 365 day period;

(b) release of greater than ten pen-reared gamebirds per day in the same area on 5 or fewer days within a 365 day period; or

(c) a field trial involving the pursuit of wild rabbits.

(2)(a) A person or group may conduct an event using pen-reared gamebirds provided that person or group applies for and obtains a Wildlife Document from the Division, except as provided in Subsection (b).

(b) A person or group may conduct a field trial using approved pen-reared gamebirds on a commercial hunting area without obtaining a Wildlife Document.

(3)(a) Up to 1,000 pen-reared gamebirds may be in possession for up to ten days under a High Volume Pen-reared Gamebird Release Wildlife Document.

(b) Possession of pen-reared gamebirds must comply with Sections R657-4-10, R657-4-11 and other applicable rule.

(4) Any person or group using pen-reared gamebirds must have an invoice or bill of sale available for inspection showing lawful personal possession or ownership of such birds as specified in Section R657-4-8.

(5)(a) Each pen-reared gamebird must be marked with a durable marking, except as provided in Subsection (c).

(b) The marking must remain attached to the pen-reared gamebird.

(c) The marking is not required for approved pen-reared gamebirds released in a field trial that is conducted on a commercial hunting area.

(6) Pen-reared gamebirds may be released only:

(a) on the property specified in the Wildlife Document;

(b) on the dates specified in the Wildlife Document;

(c) after the release area has been cleared of wild gamebirds using trained pointing or flushing dogs; and

(d) on public property with additional permission from the land management agency for the event.

(7) After release, pen-reared gamebirds may be taken:

(a) on the property specified in the Wildlife Document;

(b) on the dates specified in the Wildlife Document; and

(c) by the person who released the pen-reared gamebirds, or by any person participating in the event.

(8) Pen-reared gamebirds that leave the property where the event is held, and birds remaining at the end of the field trial except within commercial hunting area boundaries, shall become the property of the state and may not be taken, except during legal hunting seasons as specified in the Upland Game or Waterfowl proclamations of the Wildlife Board.

(9) Pen-reared gamebirds released must:

(a) meet requirements specified in Sections R657-4-10 and R657-4-11; and

(b) be healthy, capable of flight, free of disease and suitable for human consumption.

(10) Wild rabbits may be used for field trials provided:

(a) the dog is tracking scent trails of wild rabbits;

(b) following initial contact with a wild rabbit the dog must stop pursuit;

(c) only during the dates of the field trial event as specified in the certificate of registration; and

(d) the dog, or the person training the dog, may not harass, catch, capture, kill, injure, or at any time, possess any wild rabbits, except during legal hunting seasons.

(11) Wild rabbits may be taken only during legal hunting seasons as specified in the Upland Game or Waterfowl proclamations of the Wildlife Board.

(12) Division of Wildlife designated dog training areas are exempt from High Volume Pen-reared Gamebird Release requirements for activities authorized by the area manager.

**R657-4-19. Application for a High Volume Pen-reared Gamebird Release (Field Trial) Wildlife Document.**

(1)(a) Applications for High Volume Pen-reared Gamebird Release Wildlife Documents must be submitted to the appropriate regional Division office where the field trial is being held.

(b) Applications for High Volume Pen-reared Gamebird Release Wildlife Documents must be received at least 60 days before the date of the event.

(2) The Division shall not approve any application for an area where, in the opinion of the Division, the release of pen-reared gamebirds and related activities interferes with wildlife, wildlife habitat, or wildlife nesting periods.

(3) An application for a High Volume Pen-reared Gamebird Release Wildlife Document must include:

(a) operator's name, address and telephone number;

(b) detailed maps depicting boundaries of release areas and ownership of all parcels within the release area;

(c) large scale maps depicting the location of the release area relative to the nearest city or town;

(d) planned number and species of pen-reared gamebirds to be released;

(e) planned number of participants;

(f) outline of events;

(g) dates of events;

(h) written permission from landowner or land management agency, or evidence of ownership from the operator; and

(i) documentation that pen-reared gamebirds being used for the event meet requirements specified in Section R657-4-10, Section R657-4-11 and are healthy, capable of flight, free of disease and suitable for human consumption.

(4) The Division may return any application that is incomplete, completed incorrectly, or that is not accompanied by the information required in Subsection (3).

(5) In determining whether to allow the release of pen-reared gamebirds the Division shall consider:

(a) the potential release site and its relative impact on wildlife and wildlife habitat;

(b) the species or subspecies of pen-reared gamebirds to be released; and

(c) the activity for which the pen-reared gamebirds are to be released.

**R657-4-20. Commercial Hunting Area Pen-reared Gamebird Release.**

(1) A Commercial Hunting Area Pen-reared Gamebird Release Wildlife Document is required for:

(a) release of greater than ten pen-reared gamebirds per day in the same area on more than 5 days within a 365 day period; or

(b) groups of any size releasing pen-reared gamebirds in the same area on more than 5 days within a 365 day period - groups or individuals releasing birds under provisions in Section R657-4-17 on less than 5 consecutive days are exempt from Commercial Hunting Area requirements.

(2) The Wildlife Document for CHA Pen-reared Gamebird Release is valid for three years from the date of issuance.

(3) The Wildlife Document for CHA Gamebird Release is void if annual report and annual fee are not received by the Division.

(4)(a) An operator, their employees, customers or volunteers may release pen-reared gamebirds as specified on their Wildlife Document within the designated commercial hunting area for hunting or training activities during established commercial hunting area season dates.

(b) An operator may conduct a field trial using approved pen-reared gamebirds on a commercial hunting area without obtaining an additional High Volume Pen-reared Gamebird Release Wildlife Document within season dates specified on their Wildlife Document.

(5) CHA certificates of registration are effective from the date issued through June 30 of the third consecutive year.

(6) The operator must have an invoice or bill of sale available for inspection showing lawful personal possession or ownership of such birds.

(7) Pen-reared gamebirds may be released without a durable marking within designated commercial hunting area boundaries.

(8) Pen-reared gamebirds may be released only:

(a) on the property specified in the Wildlife Document; and

(b) on the dates specified in the Wildlife Document;

(9) After release, pen-reared gamebirds may be taken:

(a) on the property specified in the Wildlife Document; and

(b) on the dates specified in the Wildlife Document.

(10) Pen-reared gamebirds that leave the designated commercial hunting area boundaries shall become the property of the state and may not be taken outside of the designated commercial hunting area boundaries, except during legal hunting seasons as specified in the Upland Game or Waterfowl proclamations of the Wildlife Board.

(11) Pen-reared gamebirds released must:

(a) meet requirements specified in Section R657-4-10 and Rule R657-11; and

(b) be healthy, capable of flight, free of disease and suitable for human consumption.

(12)(a) Operators may not allow the harvest of more than 85% of each species released, except as provided in Subsection (b).

(b) There is no limit to the percentage of pen-reared gamebirds that may be harvested that are not, in the opinion of the Division, established as a wild population in the vicinity of the CHA. Any variance to Subsection (a) shall be indicated on the CHA Wildlife Document.

(13) The Division may include more restrictive conditions on approval of CHAs to protect wildlife and wildlife populations.

(14) Division of Wildlife designated dog training areas are exempt from Commercial Hunting Area Pen-reared Gamebird Release requirements for activities authorized by the area manager.

**R657-4-21. Commercial Hunting Area Application.**

(1)(a) Commercial Hunting Area Applications must be submitted to the appropriate regional Division office where the proposed CHA is located.

(b) Review and processing of the application may require up to 60 days.

(c) More time may be required to process an application if the applicant requests authorization from the Wildlife Board for a variance to this rule.

(2) The Division may not approve an application for an area where the release of pen-reared gamebirds and related activities may interfere with wildlife, wildlife habitat or wildlife nesting periods.

(3) An application for a CHA Wildlife Document must include:

(a) operator's name, address, and telephone number;

(b) detailed maps depicting boundaries, pen-reared gamebird holding facilities and ownership of all parcels within the CHA;

(c) large scale maps depicting the location of the CHA relative to the nearest city or town;

(d) planned number and species of pen-reared gamebirds to be released;

(e) evidence of ownership of the property, such as a copy of a title, deed, or tax notice that provides evidence the applicant is the owner of the property described; and

(f) the annual CHA Wildlife Document fee for the first year of operation.

(4) If an applicant is not the owner of the property, in lieu of Subsection (2)(e), the applicant may provide a lease agreement showing the applicant is the lessee of the hunting or shooting rights for the property described for the period of the CHA Wildlife Document that includes the name, address, and telephone number of the lessor.

(5)(a) Any application that does not clearly and legibly verify ownership or lease by the applicant as required in Subsection (3), of all property for which the application applies shall be returned to the applicant.

(b) Discovery of property after issuance of the CHA Wildlife Document, which is not approved by its owner or lessee to be included in the CHA, shall immediately void the CHA Wildlife Document.

(6) The Division may return any application that is incomplete, completed incorrectly, or that is not accompanied by the information required in Subsection (3).

(7) Applications are not accepted for a CHA that is within 1/4 mile of any existing state wildlife or waterfowl management area without requesting a variance from the Wildlife Board.

(8) The Division may deny any application or impose provisions on the CHA Wildlife Document that are more restrictive than this rule:

(a) if CHA operations may present unacceptable risk to wildlife populations or wildlife habitat; or

(b) if the applicant or operator, or any of its agents or employees:

(i) violated this rule, the Wildlife Resources Code, a CHA Wildlife Document, or the CHA application;

(ii) obtained or attempted to obtain a CHA Wildlife Document by fraud, deceit, falsification, or misrepresentation;

(iii) is employed, contracted through writing or verbal agreement, assigned, or requested to apply and act as the operator by a person, group, or business entity that will directly or indirectly benefit from the CHA, but would otherwise be ineligible under this



rule or by virtue of suspension under Section 23-19-9 to operate a CHA if they applied directly as the operator; or

(iv) engaged in conduct that results in the conviction of, a plea of no contest to, a plea held in abeyance, or a diversion agreement to a crime of moral turpitude, or any other crime that when considered with the functions and responsibilities of a CHA operator bears a reasonable relationship to the operator's or applicant's ability to safely and responsibly operate a CHA.

(9) If an application is denied, the Division shall state the reasons in writing.

#### **R657-4-22. Commercial Hunting Area Records and Reports.**

(1) The operator of a CHA shall maintain complete and accurate records of:

(a) the number, species, and source of any pen-reared gamebirds purchased or propagated;

(b) health certificates for all pen-reared gamebirds purchased from outside the state;

(c) the number, species and season the pen-reared gamebirds are released;

(d) the number, species and season of pen-reared gamebirds taken within the CHA boundary;

(e) the number and species and season of wild gamebirds taken within the CHA boundary;

(f) the number, species, and date of unusual mortality events due to sickness, disease, diet or unknown cause; and

(g) copies of the bill of sale issued to hunters and any other person who purchases gamebirds.

(2) Each operator must submit an annual report on a form provided by the Division within 30 days of the close of the season or at the time of renewal, including:

(a) the number of pen-reared gamebirds by species that were released, and the total number of pen-reared gamebirds taken by hunters or sold;

(b) the date, source, and number of the pen-reared gamebirds purchased;

(c) the number of pen-reared gamebirds by species held in possession for carryover breeding stock at the close of the season; and

(d) annual fee.

(3) All records must be maintained on the hunting premises or the principal place of business for three years and must be available for inspection by the Division.

(4) Falsifying or fabricating any record or report is prohibited and may result in forfeiture of CHA wildlife documents.

#### **R657-4-23. Commercial Hunting Area Boundary Marking.**

(1) The CHA area must be posted:

(a) at least every 300 yards along the outer boundary of all hunted areas; and

(b) on all corners, streams, rivers, drainage divides, roads, gates, trails, rights-of-way, dikes, canals, and ditches crossing the boundary lines.

(2) Each sign used to post the property must be at least 8-1/2 by 11 inches and must clearly state:

(a) the name of the CHA as designated on the CHA Wildlife Document;

(b) the words "No Trespassing"; and

(c) wording indicating the sign is located on the CHA boundary.

(3)(a) If the CHA operator fails to renew a CHA Wildlife Document or a renewal application is denied, all signs shall be immediately removed by the operator.

(b) The Division may remove and dispose of any signs that are not removed within 30 days after the termination of the CHA Wildlife Document.

(4) Commercial hunting area activities may only be conducted on property properly posted and specifically authorized in the CHA Wildlife Document.

(5) Commercial hunting area operators may not post or otherwise restrict public access on public roads, rights-of-way, inholdings, or easements within the CHA, including corner crossing to contiguous parcels of publicly owned lands.

#### **R657-4-24. Commercial Hunting Area Acreage Requirements.**

(1)(a) The minimum acreage accepted for a CHA is 160 acres in a single contiguous tract.

(b) Non-contiguous areas may be included under a single CHA Wildlife Document if each area is 160 acres or larger and all areas can be contained within a circular area ten miles in diameter.

(c) The maximum acreage accepted for a CHA is 5,760 acres.

(2)(a) A CHA may not be established closer than 1/4 mile of a wildlife management area, waterfowl management area, or migratory bird refuge unless otherwise allowed by a variance of the Wildlife Board.

(b) a new application for the same area may be reapproved at the end of a three year Wildlife Document term without reauthorization by the Wildlife Board.

#### **R657-4-25. Commercial Hunting Area Season Dates.**

(1) Hunting on CHA areas is permitted from September 1 through March 31.

(2) If September 1 falls on a Sunday, the season will open on August 31.

(3) Extended season dates may be requested for hosting field trials.

#### **R657-4-26. Commercial Hunting Area Hunting Hours and Hunter Requirements.**

(1) Pen-reared gamebirds may be taken on a CHA only one-half hour before sunrise through one-half hour after sunset.

(2) Any person hunting within the state on any CHA must meet hunter education requirements or possess a trial hunting authorization as provided in Section 23A-12-202.

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#### **NOTICE OF PROPOSED RULE**

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## Agency Information

<b>1. Department:</b>	Public Safety	
<b>Agency:</b>	Emergency Management	
<b>Room number:</b>	Suite 2200	
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<b>Street address:</b>	4315 S 2700 W	
<b>City, state and zip:</b>	Taylorsville, UT 84129-2128	
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Kim Gibb	801-556-8198	kgibb@utah.gov
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<b>Please address questions regarding information on this notice to the persons listed above.</b>		

## General Information

<b>2. Rule or section catchline:</b>
R704-4. Response, Recovery, and Post-disaster Mitigation Grant Funding
<b>3. Purpose of the new rule or reason for the change:</b>
<p>This rule is authorized under Section 53-2a-1305, which allows the Division of Emergency Management (Division) to make rules to:</p> <ol style="list-style-type: none"><li>1) designate the requirements and procedures for the governing body of an affected community to apply for a disaster response and recovery grant and conduct an official damage assessment;</li><li>2) establish standards to determine the categories of and criteria for entities and costs that are eligible for grant fund and minimum threshold payment amounts and cost-sharing requirements; and</li><li>3) establish standards and procedures to ensure that funds distributed in accordance with this part are distributed in a cost effective and equitable manner, are reasonably necessary for disaster response and recovery, are an appropriate and necessary use of public funds, and that all receipts and invoices are documented.</li></ol> <p>An emergency rule was enacted on Section 5-24-23 as a result of the passage of S.B. 33 during the 2023 General Session.</p> <p>This rule filing is being submitted to establish a permanent rule as authorized under Section 53-2a-1305. (EDITOR'S NOTE: The 120-day (emergency) rule filing for Rule R704-4, ID 55452, is effective as of 05/16/2023 and was published in the June 15, 2023, Bulletin.)</p>

## 4. Summary of the new rule or change:

This rule filing establishes:

- 1) procedures for a qualified entity to apply for grant funding from the disaster response and recover grant;
- 2) the criteria for the Division to apply when determining eligibility for grant funding to be awarded to the qualifying entity;
- 3) criteria for prioritization of grant funding awards to applicants, the process for awarding grant funding to applicants, including timeframe for disbursement and percentage of eligible expenses to be awarded to applicants;
- 4) the requirement for an official damage assessment to be completed in connection with an application for grant funding; and
- 5) costs eligible to be submitted for consideration in connection with a grant application.

## Fiscal Information

### 5. Provide an estimate and written explanation of the aggregate anticipated cost or savings to:

#### A) State budget:

The Division does not anticipate a cost to the state budget as a result of the enactment of this rule. The Utah Legislature appropriated funding for FY24 in the amount of \$10,000,000 to provide grant funding for disaster recovery and post-disaster mitigation.

This rule determines how the funding will be distributed.

#### B) Local governments:

The Division does not anticipate a cost to local governments as a result of the enactment of this rule. The Utah Legislature appropriated funding for FY24 in the amount of \$10,000,000 to provide grant funding for disaster recovery and post-disaster mitigation.

This rule determines how the funding will be distributed.

#### C) Small businesses ("small business" means a business employing 1-49 persons):

The Division does not anticipate a cost to small businesses as a result of the enactment of this rule. The Utah Legislature appropriated funding for FY24 in the amount of \$10,000,000 to provide grant funding for disaster recovery and post-disaster mitigation.

This rule determines how the funding will be distributed.

#### D) Non-small businesses ("non-small business" means a business employing 50 or more persons):

The Division does not anticipate a cost to non-small businesses as a result of the enactment of this rule. The Utah Legislature appropriated funding for FY24 in the amount of \$10,000,000 to provide grant funding for disaster recovery and post-disaster mitigation.

This rule determines how the funding will be distributed.

**E) Persons other than small businesses, non-small businesses, state, or local government entities** ("person" means any individual, partnership, corporation, association, governmental entity, or public or private organization of any character other than an **agency**):

The Division does not anticipate a cost to persons other than small businesses, state, or local government entities as a result of the enactment of this rule. The Utah Legislature appropriated funding for FY24 in the amount of \$10,000,000 to provide grant funding for disaster recovery and post-disaster mitigation.

This rule determines how the funding will be distributed.

**F) Compliance costs for affected persons** (How much will it cost an impacted entity to adhere to this rule or its changes?):

The Division does not anticipate any compliance costs to affected persons as a result of the enactment of this rule. The Utah Legislature appropriated funding for FY24 in the amount of \$10,000,000 to provide grant funding for disaster recovery and post-disaster mitigation.

This rule determines how the funding will be distributed.

**G) Regulatory Impact Summary Table** (This table only includes fiscal impacts that could be measured. If there are inestimable fiscal impacts, they will not be included in this table. Inestimable impacts will be included in narratives above.)

**Regulatory Impact Table**

<b>Fiscal Cost</b>	<b>FY2024</b>	<b>FY2025</b>	<b>FY2026</b>
State Government	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0
<b>Total Fiscal Cost</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Fiscal Benefits</b>	<b>FY2024</b>	<b>FY2025</b>	<b>FY2026</b>
State Government	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0

Non-Small Businesses	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0
<b>Total Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Net Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**H) Department head comments on fiscal impact and approval of regulatory impact analysis:**

The Commissioner of the Department of Public Safety, Jess L. Anderson, has reviewed and approved this regulatory impact analysis.

**Citation Information**

**6. Provide citations to the statutory authority for the rule. If there is also a federal requirement for the rule, provide a citation to that requirement:**

Section 53-2a-102	Section 53-2a-1301	Section 53-2a-1302
Section 53-2a-1303	Section 53-2a-1304	Section 53-2a-1305

**Public Notice Information**

**8. The public may submit written or oral comments to the agency identified in box 1.** (The public may also request a hearing by submitting a written request to the agency. See Section 63G-3-302 and Rule R15-1 for more information.)

**A) Comments will be accepted until:** 09/14/2023

**9. This rule change MAY become effective on:** 09/21/2023

NOTE: The date above is the date the agency anticipates making the rule or its changes effective. It is NOT the effective date.

**Agency Authorization Information**

<b>Agency head or designee and title:</b>	Kris Hamlet, Director	<b>Date:</b>	07/31/2023
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**R704. Public Safety, Emergency Management.**

**R704-4. Response, Recovery, and Post-disaster Mitigation Grant Funding.**

**R704-4-1. Authority.**

This rule is authorized by Section 53-2a-1305.

**R704-4-2. Purpose.**

The purpose of this rule is to establish requirements, procedures, and standards for administering the Response, Recovery, and Post-disaster Mitigation Restricted Account described in Title 53, Chapter 2a, Part 13.

#### **R704-4-3. Definitions.**

(1) Terms used in this rule are defined in Sections 53-2a-102 and 53-2a-1301.

(2) Additional terms are defined as follows:

(a) "affected community member support services" means actions taken by a governing body to support their affected community members that are intended to support the affected community member to make their home or business safe, sanitary, and functional, and are not covered by insurance;

(b) "facility" means a building or system, built or manufactured, or an improved and maintained natural feature;

(c) "governing body" means the same as defined in Subsection 53-2a-602(2)(f);

(d) "incident" means a natural disaster event that causes damage of sufficient severity and magnitude to warrant disaster assistance to supplement the efforts and available resources of the state, a local government, or a disaster relief organization in alleviating the damage, loss, hardship, or suffering caused thereby, including:

(i) earthquake;

(ii) storm;

(iii) flood;

(iv) tornado;

(v) landslide;

(vi) mudslide;

(vii) snowstorm;

(viii) wildfire; or

(ix) drought;

(e) "incident period" means the time interval during which the disaster-causing incident occurs as established by the division in consultation with the National Weather Service or other disaster event expertise agency;

(f) "post-disaster mitigation integrated repairs" means disaster mitigation measures directly related to recovery damage repair projects that directly reduce the potential of future damage to the facility that was damaged in the incident; and

(g) "recovery damage repair" means the restoration of disaster-damaged publicly owned infrastructure and facilities.

#### **R704-4-4. Application.**

(1) A governing body of an affected community wishing to apply for disaster response, recovery and post-disaster grant funding shall submit to the division:

(a) an application in a form approved by the division;

(b) documentation of an official damage assessment as described in Section R704-4-8; and

(c) documentation of financial records, supporting documents, statistical records, and any other records pertinent to costs associated with response, recovery, and post-disaster mitigation.

(2) Applications shall be submitted to the division's recovery section at <https://recovery-utah-em.hub.arcgis.com/>:

(a) at least 60 days after the end of the incident period; and

(b) before 90 days after the end of the incident period.

#### **R704-4-5. Eligibility Review.**

(1) The Division shall:

(a) review applications received for any eligible incident periods for eligibility, completeness, applicability, and feasibility;

(b) confirm that the applicant is an eligible governing body of an affected community; and

(c) score, rank, and prioritize applications for equitable and cost-effective grant award distribution.

(2) The costs submitted in the application shall:

(a) be the responsibility of the governing body of the affected community, or an individual or entity as allowed in Subsections 53-2a-1304(1)(a) through (c);

(b) have resulted from the disaster-causing incident which took place during the incident period or have occurred in anticipation of that incident;

(c) meet eligible costs for emergency disaster services under Section R704-4-9; and

(d) not be eligible for and not have been covered by any other available sources of funding, such as:

(i) insurance coverage;

(ii) FEMA public assistance or individual assistance programs;

(iii) other state funding sources;

(iv) other relevant federal disaster grant funding; or

(v) services as provided by voluntary or non-profit disaster organizations.

#### **R704-4-6. Prioritization of Awards for Grant Applications.**

In accordance with Sections 53-2a-1302 and 53-2a-1305, the division shall consider the following criteria in prioritizing and awarding disaster response, recovery, and post-disaster hazard mitigation grant funding:

(1) the total balance available in the account;

(2) other sources of funding that might be available to the governing body for the purpose of disaster response, recovery, and post-disaster mitigation;

(3) the severity or scale of the disaster or emergency that has been declared, including:

(a) the severity of the impact on an affected community that submitted a grant application; and

(b) the number of affected communities that submit a grant application; and

(4) the reasonableness, allocability, and allowability of costs submitted with the application.

#### **R704-4-7. Grant Awards.**

(1) Grant funds shall be obligated after applications and corresponding documents are submitted, processed, validated, approved, and appropriately signed by the applicant and the director.

(2) Disbursement of grant proceeds to the grantee shall take place within 10 business days of final approval of the grant application and corresponding documentation.

(3) Grant funds awarded shall be based on a cost match of 75% to the state and 25% to the governing body.

(4) A governing body cost share may be provided as:

(a) a contribution of cash;

(b) third-party in-kind services;

(c) materials; or

(d) a combination of items listed under Subsections R704-4-7(4)(a) through (c).

#### **R704-4-8. Official Damage Assessment Requirement.**

(1) A governing body shall conduct an official damage assessment as required in Section R704-4-4.

(2) Damage assessments shall include:

(a) a completed Preliminary Damage Assessment Cover Sheet as provided by the division; and

(b) associated documentation to support the damage and costs identified in the assessment.

**R704-4-9. Eligible Costs.**

(1) Costs eligible to be submitted for consideration under the Response, Recovery, and Post-disaster Mitigation Restricted Account grant application include:

(a) emergency disaster services as defined in Subsection 53-2a-602(2)(d);

(b) recovery damage repair of:

(i) roads and bridges;

(ii) transportation systems;

(iii) utilities;

(iv) water control facilities;

(v) parks and recreation systems; and

(vi) other relevant facilities;

(c) post-disaster mitigation integrated repairs; and

(d) affected community member support services, if the grant funds are managed and distributed by the governing body of the affected community.

(2) Grant funding for affected community member support services is not guaranteed to be awarded for each applicant in each disaster.

(3) Eligible costs for affected community member support service actions may include:

(a) relevant costs associated with emergency disaster services as defined in Subsection 53-2a-602(2)(d);

(b) costs for services provided to assist affected community members with debris removal from their home or property; and

(c) costs for services provided to assist affected community members with repair or replacement of critical utility services.

**KEY: response grant funding; recovery grant funding; post-disaster mitigation grant funding**

**Date of Last Change: 2023**

**Authorizing, and Implemented or Interpreted Law: 53-2a-102; 53-2a-1301; 53-2a-1302; 53-2a-1303; 53-2a-1304; 53-2a-1305**

**NOTICE OF PROPOSED RULE**

**TYPE OF FILING:** Amendment

<b>Rule or Section Number:</b>	<b>R714-560</b>	<b>Filing ID:</b>
		<b>55552</b>

**Agency Information**

<b>1. Department:</b>	Public Safety
<b>Agency:</b>	Highway Patrol
<b>Building:</b>	Calvin Rampton Complex
<b>Street address:</b>	4501 S 2700 W
<b>City, state and zip:</b>	Salt Lake City, UT 84119-5994
<b>Mailing address:</b>	PO Box 141100
<b>City, state and zip:</b>	Salt Lake City, UT 84114-1100

**Contact persons:**

<b>Name:</b>	<b>Phone:</b>	<b>Email:</b>
Kim Gibb	801-556-8198	kgibb@utah.gov

**Please address questions regarding information on this notice to the persons listed above.**

**General Information**

**2. Rule or section catchline:**

R714-560. Technology and Equipment for Officer-Involved Critical Incident Investigation

**3. Purpose of the new rule or reason for the change:**

Funding for this grant program was changed to non-lapsing funding as a result of the passage of S.B. 6 during the 2023 General Session. As a result, the deadline for applications to be submitted is being removed from this rule.

**4. Summary of the new rule or change:**

This rule change strikes the application submittal deadline of May 1, 2023.

**Fiscal Information**

**5. Provide an estimate and written explanation of the aggregate anticipated cost or savings to:**

**A) State budget:**

The Division of Highway Patrol (Division) does not anticipate a cost or savings to the state budget because this rule change only removes the application submittal deadline of May 1, 2023, because the funding appropriated by the legislature has been changed to non-lapsing funding.

**B) Local governments:**

The Division does not anticipate a cost or savings to local governments because this rule change only removes the application submittal deadline of May 1, 2023, because the funding appropriated by the legislature has been changed to non-lapsing funding.

**C) Small businesses** ("small business" means a business employing 1-49 persons):

The Division does not anticipate a cost or savings to small businesses because this rule change only removes the application submittal deadline of May 1, 2023, because the funding appropriated by the legislature has been changed to non-lapsing funding.

**D) Non-small businesses** ("non-small business" means a business employing 50 or more persons):

The Division does not anticipate a cost or savings to the non-small businesses because this rule change only removes the application submittal deadline of May 1, 2023, because the funding appropriated by the legislature has been changed to non-lapsing funding.

**E) Persons other than small businesses, non-small businesses, state, or local government entities** ("person" means any individual, partnership, corporation, association, governmental entity, or public or private organization of any character other than an **agency**):

The Division does not anticipate a cost or savings to persons other than small businesses, non-small businesses, state, or local government entities because this rule change only removes the application submittal deadline of May 1, 2023, because the funding appropriated by the legislature has been changed to non-lapsing funding.

**F) Compliance costs for affected persons** (How much will it cost an impacted entity to adhere to this rule or its changes?):

There are no compliance costs for affected persons because this rule change only removes the application submittal deadline of May 1, 2023, because the funding appropriated by the legislature has been changed to non-lapsing funding.

**G) Regulatory Impact Summary Table** (This table only includes fiscal impacts that could be measured. If there are inestimable fiscal impacts, they will not be included in this table. Inestimable impacts will be included in narratives above.)

#### Regulatory Impact Table

Fiscal Cost	FY2024	FY2025	FY2026
State Government	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0
<b>Total Fiscal Cost</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
Fiscal Benefits	FY2024	FY2025	FY2026
State Government	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0

Small Businesses	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0
<b>Total Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Net Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**H) Department head comments on fiscal impact and approval of regulatory impact analysis:**

The Commissioner of the Department of Public Safety, Jess L. Anderson, has reviewed and approved this regulatory impact analysis.

#### Citation Information

**6. Provide citations to the statutory authority for the rule. If there is also a federal requirement for the rule, provide a citation to that requirement:**

Section 53-1-121		
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#### Public Notice Information

**8. The public may submit written or oral comments to the agency identified in box 1.** (The public may also request a hearing by submitting a written request to the agency. See Section 63G-3-302 and Rule R15-1 for more information.)

**A) Comments will be accepted until:** 09/14/2023

**9. This rule change MAY become effective on:** 09/21/2023

NOTE: The date above is the date the agency anticipates making the rule or its changes effective. It is NOT the effective date.

#### Agency Authorization Information

<b>Agency head or designee and title:</b>	Michael Rapich, Colonel Utah Highway Patrol	<b>Date:</b>	08/01/2023
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#### R714. Public Safety, Highway Patrol.

##### R714-560. Technology and Equipment for Officer-Involved Critical Incident Investigation.

##### R714-560-1. Purpose.

(1) The purpose of this rule is to create a program to assist law enforcement agencies through monetary grants to purchase technology and equipment to assist in the investigation of officer-involved critical incidents involving a firearm in accordance with Section 53-1-121.

##### R714-560-2. Authority.

This rule is authorized by Section 53-1-121.



**R714-560-3. Definitions.**

- (1) Terms used in this rule are found in Section 53-1-102.
- (2) In addition:
- (a) "committee" means the Technology and Equipment for Officer-Involved Critical Incident Investigation Committee established under this rule; and
- (b) "equipment" means technology and equipment to assist in the investigation of officer-involved critical incidents involving a firearm that meets the criteria specified in Section 53-1-121.

**R714-560-4. Technology and Equipment for Officer-Involved Critical Incident Investigation Committee.**

This rule establishes the Technology and Equipment for Officer-Involved Critical Incident Investigation Committee, which shall be responsible for assisting the department in awarding funds to purchase equipment in accordance with Section 53-1-121.

**R714-560-5. Committee Membership.**

- (1) The committee shall consist of six members made up of one representative from each of the following groups or organizations:
- (a) Utah Highway Patrol Colonel or designee;
- (b) Utah Highway Patrol, Training Section;
- (c) Utah Attorney General's Office;
- (d) Utah Sheriffs Association;
- (e) Utah Chiefs of Police Association; and
- (f) Statewide Association of Prosecutors[?].
- (2) Members of the committee shall:
- (a) be approved by the Commissioner of the Utah Department of Public Safety;
- (b) be appointed for four year terms; and
- (c) cease to be members of the committee immediately upon the termination of their membership in the group or organization they represent.
- (3) If a vacancy occurs during the four year term of a committee member, a new member shall be appointed from the same group or organization to complete the term of that member.
- (4) The committee shall select a chair and vice-chair from among its members.
- (5) Four members shall constitute a quorum for committee action.
- (6) The department's special counsel shall assist the committee as needed.

**R714-560-6. Committee Meetings.**

The committee shall meet at least quarterly to review and approve applications from law enforcement agencies.

**R714-560-7. Applications.**

- (1) Applications for the funding of equipment shall be:
- (a) made on department forms;
- (b) mailed to the committee in care of the department; and
- (c) ~~submitted no later than May 1, 2023; and~~
- (d) ~~submitted before the purchase of technology or equipment.~~

**R714-560-8. Criteria and Awards.**

- (1) The committee shall:
- (a) evaluate equipment as it becomes available to determine if it meets requirements set forth under Section 53-1-121;
- (b) review timely applications submitted by law enforcement agencies as described in Section R714-560-7;

(c) approve funding awards equitably to law enforcement agencies that have submitted completed applications for the purchase of approved equipment; and

(d) notify each law enforcement agency that submitted an application of:

(i) the approval or denial of the application for funding; and

(ii) the amount of funding that will be made available to the law enforcement agency for the purchase of equipment.

(2) In order receive awarded funds for the purchase of equipment, the law enforcement agency shall submit to the committee:

(a) a completed request for reimbursement form for the amount awarded to the law enforcement agency by the committee; and

(b) an invoice for the purchase of equipment that has been approved by the committee.

**R714-560-9. Agency Accountability.**

Law enforcement agencies that receive funding shall:

(a) use the awarded resources only in the manner set forth in the agency's application;

(b) use the awarded resources only to purchase technology and equipment to assist in the investigation of officer-involved critical incidents involving a firearm;

(c) maintain records for five years sufficient to show how the funding is used; and

(d) cooperate with the committee if and when the committee determines it is necessary to audit agency records, and evaluate use of the funding.

**KEY: technology, equipment, officer-involved critical incident**

**Date of Last Change: 2023[May 24, 2022]**

**Authorizing, and Implemented or Interpreted Law: 53-1-121**

**NOTICE OF PROPOSED RULE**

**TYPE OF FILING:** New

**Rule or Section Number:**

**R714-562**

**Filing ID:**  
**55587**

**Agency Information**

<b>1. Department:</b>	Public Safety	
<b>Agency:</b>	Highway Patrol	
<b>Building:</b>	Calvin Rampton Complex	
<b>Street address:</b>	4501 S 2700 W	
<b>City, state and zip:</b>	Salt Lake City, UT 84119-5994	
<b>Mailing address:</b>	PO Box 141100	
<b>City, state and zip:</b>	Salt Lake City, UT 84114-1100	
<b>Contact persons:</b>		
<b>Name:</b>	<b>Phone:</b>	<b>Email:</b>
Kim Gibb	801-556-8198	kgibb@utah.gov

**Please address questions regarding information on this notice to the persons listed above.**

## General Information

### 2. Rule or section catchline:

R714-562. Early Intervention System Grant Program

### 3. Purpose of the new rule or reason for the change:

This rule is authorized as a result of the passage of S.B. 124 during the 2023 General Session under Sections 53-14-202 and 53-14-203.

### 4. Summary of the new rule or change:

This rule creates a program to assist law enforcement agencies through monetary grants using one-time funding appropriated by the legislature during the 2023 General Session.

This rule establishes the Early Intervention System Grant Funding Committee to:

- 1) assist the Department of Public Safety in awarding funds to law enforcement agencies,
- 2) establish criteria for law enforcement agencies to apply for grant funding,
- 3) establish criteria for awarding grant funding to law enforcement agencies, and
- 4) set requirements to ensure accountability for funding provided to law enforcement agencies.

(EDITOR'S NOTE: The 120-day (emergency) rule filing for Rule R714-562, ID 55529, is effective as of 07/12/2023 and was published in the August 1, 2023, Bulletin.)

## Fiscal Information

### 5. Provide an estimate and written explanation of the aggregate anticipated cost or savings to:

#### A) State budget:

The Utah Legislature appropriated \$3,000,000 to provide grant funding for law enforcement agencies for the purchase of early intervention systems as outlined in Section 53-14-203.

The Division of Highway Patrol (Division) does not anticipate a cost or savings to the state as a result of this rule because it is strictly explaining how the appropriated funds will be distributed.

#### B) Local governments:

The Division anticipates a cost savings from \$15,700 to \$31,700 to local governments as a result of the funds appropriated by the legislature.

Local law enforcement agencies will have the ability to apply for funding from the \$3,000,000 appropriation in order to purchase an early intervention system.

Local law enforcement agencies will submit an application for approval of grant funding awards, and once approved, will be awarded funding based on the number of officers employed by the agency.

The Division does not anticipate a cost or savings to the local governments as a result of this rule because it is strictly explaining how the appropriated funds will be distributed.

#### C) Small businesses ("small business" means a business employing 1-49 persons):

The Division is not aware of any small businesses that would satisfy the minimum standards for an early intervention system.

There may be small businesses that are able to provide this service, as would be identified through an RFP.

Under the grant program created in Section 53-14-203, a business that is able to provide a system that meets minimum standards established in the administrative rule will have a potential to sell early intervention systems to law enforcement agencies in the amount of up to \$3,000,000 in grant funding appropriated by the legislature.

The Division does not anticipate a cost or savings to the small businesses as a result of this rule because it is strictly explaining how the appropriated funds will be distributed.

#### D) Non-small businesses ("non-small business" means a business employing 50 or more persons):

The Division is aware of one non-small business that currently has a system available that will meet the minimum standards established by this rule, as authorized under Section 53-14-202, for a law enforcement agency to comply with statutory requirements and receive grant funding as outlined under Section 53-14-203.

There may be other businesses that are able to provide this service, as would be identified through an RFP.

Under the grant program created in Section 53-14-203, a business that is able to provide a system that meets minimum standards established in the administrative rule will have a potential to sell early intervention systems to law enforcement agencies in the amount of up to \$3,000,000 in grant funding appropriated by the legislature.

The Division does not anticipate a cost or savings to the non-small businesses as a result of this rule because it is strictly explaining how the appropriated funds will be distributed.



**E) Persons other than small businesses, non-small businesses, state, or local government entities** ("person" means any individual, partnership, corporation, association, governmental entity, or public or private organization of any character other than an **agency**):

There are no anticipated costs or savings for persons other than small businesses, state, or local government entities because this rule only identifies the process for a law enforcement entity to apply for grant funding appropriated by the legislature for the purchase of an early intervention system.

**F) Compliance costs for affected persons** (How much will it cost an impacted entity to adhere to this rule or its changes?):

There are no compliance costs for affected persons because this rule only identifies the process for a law enforcement entity to apply for grant funding appropriated by the legislature for the purchase of an early intervention system.

**G) Regulatory Impact Summary Table** (This table only includes fiscal impacts that could be measured. If there are inestimable fiscal impacts, they will not be included in this table. Inestimable impacts will be included in narratives above.)

#### Regulatory Impact Table

Fiscal Cost	FY2024	FY2025	FY2026
State Government	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0
<b>Total Fiscal Cost</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
Fiscal Benefits	FY2024	FY2025	FY2026
State Government	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0
<b>Total Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

Net Benefits	Fiscal	\$0	\$0	\$0
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**H) Department head comments on fiscal impact and approval of regulatory impact analysis:**

The Commissioner of the Department of Public Safety, Jess L. Anderson, has reviewed and approved this regulatory impact analysis.

#### Citation Information

**6. Provide citations to the statutory authority for the rule. If there is also a federal requirement for the rule, provide a citation to that requirement:**

Section 53-14-202	Section 53-14-203	
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#### Public Notice Information

**8. The public may submit written or oral comments to the agency identified in box 1.** (The public may also request a hearing by submitting a written request to the agency. See Section 63G-3-302 and Rule R15-1 for more information.)

**A) Comments will be accepted until:** 09/14/2023

**9. This rule change MAY become effective on:** 09/21/2023

NOTE: The date above is the date the agency anticipates making the rule or its changes effective. It is NOT the effective date.

#### Agency Authorization Information

<b>Agency head or designee and title:</b>	Michael Rapich, Colonel Utah Highway Patrol	<b>Date:</b>	08/01/2023
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#### R714. Public Safety, Highway Patrol.

##### R714-562. Early Intervention System Grant Program.

##### R714-562-1. Purpose.

The purpose of this rule is to create a program to assist law enforcement agencies through monetary grants to establish early intervention systems.

##### R714-562-2. Authority.

This rule is authorized by Sections 53-14-202 and 53-14-203.

##### R714-562-3. Definitions.

(1) Terms used in this rule are found in Section 53-14-201.

(2) In addition:

(a) "commissioner" means the commissioner of the Department of Public Safety;

(b) "committee" means the Early Intervention System Grant Program Committee established under this rule;

(c) "department" means the Department of Public Safety; and

(d) "law enforcement agency" means the same as defined in Section 53-1-102.

**R714-562-4. Early Intervention System Grant Program Committee.**

This rule establishes the Early Intervention System Grant Program Committee, which shall be responsible for assisting the department in awarding funds to law enforcement agencies to buy an early intervention system in accordance with Section 17-22-34.

**R714-562-5. Committee Membership.**

(1) The committee shall consist of three members made up of one representative from each of the following groups or organizations:

- (a) Utah Highway Patrol Colonel or designee;
- (b) Utah Sheriffs Association; and
- (c) Utah Chiefs of Police Association.

(2) Members of the committee shall:

- (a) be approved by the commissioner;
- (b) be appointed for four year terms; and

(c) cease to be members of the committee immediately upon the termination of their membership in the group or organization they represent.

(3) If a vacancy occurs during the four year term of a committee member, a new member shall be appointed from the group or organization to complete the term of that member.

(4) The committee shall select a chair and vice-chair from among its members.

(5) Two members shall constitute a quorum for committee action.

(6) The department's special counsel shall assist the committee as needed.

**R714-562-6. Committee Meetings.**

The committee shall meet at least quarterly, until all grant funding appropriated by the Legislature has been spent, to review and approve applications from law enforcement agencies.

**R714-562-7. Applications.**

(1) Applications for the funding of early intervention systems shall:

(a) be made on department forms, or other forms if they contain the information included on department forms;

(b) include criteria required under Section 53-14-203;

(c) meet minimum standards as required by the department under Section R714-562-11;

(d) be submitted before October 31, 2024; and

(e) ensure the early intervention system be in use before January 1, 2025.

**R714-562-8. Eligibility Criteria and Awards.**

(1) The committee shall review timely applications from law enforcement agencies to determine:

(a) the agency does not currently have:

(i) an early intervention system in place; or

(ii) an early intervention system in place that meets the requirements under Sections 53-14-202 and 53-14-203; and

(b) the system the agency seeks to establish meets the minimum standards under Section R714-562-11.

(2) The committee shall approve funding awards to law enforcement agencies that have submitted completed applications to establish an early intervention system:

(a) that meet the requirements of this rule; and

(b) in amounts established under Section R714-562-9.

(3) The department shall notify each law enforcement agency that applied for grant funding of:

(a) the approval or denial of the application for funding; and

(b) the amount of funding that will be made available to the law enforcement agency.

**R714-562-9. Method and Formula for Determining a Grant Amount.**

The committee shall award grant funding to law enforcement agencies based on the criteria included in the application in an amount not to exceed:

(1) for an agency that employs 49 officers or less, \$15,700;

(2) for an agency that employs between 50 and 99 officers, \$18,700;

(3) for an agency that employs between 100 and 149 officers, \$20,700;

(4) for an agency that employs between 150 and 249 officers, \$23,700;

(5) for an agency that employs between 250 and 349 officers, \$27,700; and

(6) for an agency that employs 350 or more officers, \$31,700.

**R714-562-10. Grant Recipient Reporting Requirements.**

(1) Law enforcement agencies that receive funding shall:

(a) use the awarded resources only in the manner set forth in Section 53-14-203;

(b) use the awarded resources only to initially establish an early intervention system that meets the requirements of this rule;

(c) report to the department when the early intervention system was implemented and the amount of grant funds spent;

(d) maintain records for five years sufficient to show how the funding is used; and

(e) cooperate with the committee if and when the committee determines it is necessary to audit agency records, and evaluate use of the funding.

(2) If the law enforcement agency does not spend the funds for purposes specified in Section 53-14-203, the law enforcement agency shall return any grant funds back to the department.

**R714-562-11. Early Intervention System Minimum Standards.**

The minimum standards that an early intervention system shall meet in order for a law enforcement agency to comply with Subsection 53-14-202(1) include:

(1) the ability to record the following in relation to each law enforcement officer employed by the agency:

(a) citizen inquiries, complaints, commendations, or other concerns or requests for information;

(b) investigations or reviews of officer conduct, complaints, use of force, or other significant incidents, commendations; and

(c) other related information as determined by the agency that may include training, corrective or disciplinary actions, investigation findings or review findings;

(2) an alert process, function, or system to bring attention to the agency regarding officer patterns, frequency, or significant incidents that should result in a formal review; and

(3) the ability to maintain information considered part of an officers internal personnel file, and to be shared only pursuant to Section 53-14-103.

**KEY:** early intervention system, early intervention grant program  
**Date of Last Change:** 2023  
**Authorizing, and Implemented or Interpreted Law:** 53-14-202, 53-14-203

#### NOTICE OF PROPOSED RULE

**TYPE OF FILING:** Amendment

<b>Rule or Section Number:</b>	<b>R895-4</b>	<b>Filing ID:</b> <b>55541</b>
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#### Agency Information

<b>1. Department:</b>	Government Operations	
<b>Agency:</b>	Technology Services	
<b>Street address:</b>	4315 S 2700 W	
<b>City, state and zip:</b>	Taylorsville, UT 84129	
<b>Contact persons:</b>		
<b>Name:</b>	<b>Phone:</b>	<b>Email:</b>
Stephanie Weteling	801-599-7870	stephanie@utah.gov
<b>Please address questions regarding information on this notice to the persons listed above.</b>		

#### General Information

<b>2. Rule or section catchline:</b>
R895-4. Sub-Domain Naming Conventions for Executive Branch Agencies
<b>3. Purpose of the new rule or reason for the change:</b>
Changes are needed to be in compliance with domain requirements for government websites in Section 63D-2-105 of the Information Technology Act.
<b>4. Summary of the new rule or change:</b>
The change in this proposed rule updates definitions and requires executive branch agency websites to comply with Section 63D-2-105.

#### Fiscal Information

<b>5. Provide an estimate and written explanation of the aggregate anticipated cost or savings to:</b>
<b>A) State budget:</b>
There is no anticipated cost or savings to the state budget as this rule updates definitions and clarifies references to Section 63D-2-105.

#### B) Local governments:

This rule change will not have a fiscal impact on local governments. This rule only affects state executive branch agencies.

#### C) Small businesses ("small business" means a business employing 1-49 persons):

This rule change will not have a fiscal impact on small businesses. This rule only affects state executive branch agencies.

#### D) Non-small businesses ("non-small business" means a business employing 50 or more persons):

This rule change will not have a fiscal impact on non-small businesses. This rule only affects state executive branch agencies.

#### E) Persons other than small businesses, non-small businesses, state, or local government entities ("person" means any individual, partnership, corporation, association, governmental entity, or public or private organization of any character other than an **agency**):

This rule change will not have a fiscal impact on other persons. This rule only affects state executive branch agencies.

#### F) Compliance costs for affected persons (How much will it cost an impacted entity to adhere to this rule or its changes?):

There are no compliance costs for affected persons because the changes are already required in statute.

#### G) Regulatory Impact Summary Table (This table only includes fiscal impacts that could be measured. If there are inestimable fiscal impacts, they will not be included in this table. Inestimable impacts will be included in narratives above.)

##### Regulatory Impact Table

Fiscal Cost	FY2024	FY2025	FY2026
State Government	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0
<b>Total Fiscal Cost</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

Fiscal Benefits	FY2024	FY2025	FY2026
State Government	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0
<b>Total Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Net Fiscal Benefits</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**H) Department head comments on fiscal impact and approval of regulatory impact analysis:**

The Executive Director of the Department of Government Operations, Marvin Dodge, has reviewed and approved this regulatory impact analysis.

**Citation Information**

**6. Provide citations to the statutory authority for the rule. If there is also a federal requirement for the rule, provide a citation to that requirement:**

Section 63D-2-105	Section 63A-16-205	Section 63G-3-201
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**Public Notice Information**

**8. The public may submit written or oral comments to the agency identified in box 1.** (The public may also request a hearing by submitting a written request to the agency. See Section 63G-3-302 and Rule R15-1 for more information.)

<b>A) Comments will be accepted until:</b>	09/14/2023
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<b>9. This rule change MAY become effective on:</b>	09/21/2023
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NOTE: The date above is the date the agency anticipates making the rule or its changes effective. It is NOT the effective date.

**Agency Authorization Information**

<b>Agency head or designee and title:</b>	Marvin Dodge, Executive Director	<b>Date:</b>	07/19/2023
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**R895. Government Operations, Technology Services.**

**R895-4. Sub[~~D~~]domain Naming Conventions for Executive Branch Agencies.**

**R895-4-1. Purpose.**

This rule establishes standards for executive branch agencies use of the utah.gov subdomain for state websites and compliance with domain requirements for government websites in Section 63D-2-105 of the Information Technology Act.~~[The "utah.gov" identifier is intended to provide the following features to the State of Utah and its agencies.~~

~~(1) The ".gov" sub-domain identifier is controlled by the Federal .gov domain registrar, thereby protecting state interests.~~

~~(2) The State of Utah, Chief Information Officer's (CIO) office is responsible for issuance of all "utah.gov" sub-domains, further protecting the integrity of the identifier.~~

~~(3) The "utah.gov" identifier offers immediate recognition to constituents for developing credibility and confidence through a consistent interface.~~

~~(4) The "utah.gov" sub-domain simplifies constituent access to state agency services.]~~

**R895-4-2. Authority.**

This rule is issued by the Chief Information Officer under the authority of Section 63A-16-205 of the Technology Governance Act, and in accordance with Section 63G-3-201~~[of the Utah Rulemaking Act, Utah Code Annotated].~~

**R895-4-3. Scope of Application.**

All state agencies of the executive branch of the State ~~[of Utah]~~government shall comply with this rule, which provides a consistent internet access identifier for the State ~~[of Utah]~~through the "utah.gov" sub~~[.]~~domain.

**R895-4-4. Definitions.**

~~(1) "Domain Name" means a meaningful name or identifier used for services such as websites and email provided through the internet and organized in multiple hierarchal levels, including:~~

- ~~(a) com;~~
- ~~(b) us; or~~
- ~~(c) gov.~~

~~(2[+]) "Sub[~~D~~]domain[~~;~~]" means [A]a domain name in a subordinate level below a top level domain name in the organization of its hierarchal levels.[meaningful name or "handle" for addressing computers and information on the Internet. Domain names typically end with a suffix that denotes the type or location of a resource (for instance, ".com" for commercial resources or ".gov" for government resources).]~~

~~(2) URL: "Uniform Resource Locator" which is an addressing standard used to find documents and media on the Internet.~~

~~(3) "Sub-Domain Registrar" Authoritative source within the State of Utah's CIO office, or the Federal .gov registrar.]~~

~~(3[4]) [FLD~~;~~]"Top level domain" means a domain name at the top hierarchal level above a subdomain level, including[; including, but not limited to .net, .org, .com, etc]~~

(a) net;

(b) org; or

(c) com.

(4[5]) "Publicize" means[;-] [F]to make accessible, advertise or otherwise publicly disseminate information regarding a domain[TLD].

#### **R895-4-5. Compliance and Responsibilities.**

(1) Any state executive branch agency that develops, hosts, or funds a website shall only register a sub[-]domain using the "utah.gov" naming convention.

(2) No state executive branch agency may publicize a government operated website[sub-domain in a TLD such as .org, .net, .com or any other available TLD] unless it conforms with the requirements of[not conforming to this rule] Section 63D-2-105.

#### **R895-4-6. Exceptions.**

(1) The requirements of this rule do not apply to funds that are ["passed-through[" or contracted to a private ~~[non-profit or for-profit]~~ entity and subsequently used by that entity for its own website or for the purchase of a domain[URL].

(2) The CIO may provide a waiver for the required[an "extraordinary environment" for which it is demonstrated that] use of [the-]"utah.gov" subdomains[identifier] according to Section 63D-2-105[would cause demonstrable harm to citizens or business.

~~Requests for waiver must be submitted with justification to the CIO by the requesting agency Executive Director].~~

(3) A [N]non[-C]conforming domain[TLDs] may be obtained or retained [solely for the purpose of re-direction to an approved "utah.gov" TLD, or -]to retain ownership of the domain[TLD] for avoiding identifier misuse, provided the non-conforming domain[TLD] is not publicized.

#### **R895-4-7. Rule Compliance Management.**

(1) A state executive branch agency executive director, or designee, upon becoming aware of a violation of this rule, shall enforce the rule.

(2) The CIO may, where appropriate, monitor compliance and report to the executive director any findings or violations of this rule.

(3) The CIO may further enforce this rule by requesting that the entity responsible for providing identifier mapping withhold or remove the offending TLD from state production servers.

**KEY:** utah.gov

**Date of Last Change:** 2023[April 15, 2004]

**Notice of Continuation:** April 14, 2023

**Authorizing, and Implemented or Interpreted Law:** 63F-1-206; 63G-3-201

**End of the Notices of Proposed Rules Section**



## FIVE-YEAR NOTICES OF REVIEW AND STATEMENTS OF CONTINUATION

Within five years of an administrative rule's original enactment or last five-year review, the agency is required to review the rule. This review is intended to help the agency determine, and to notify the public, that the administrative rule in force is still authorized by statute and necessary. Upon reviewing a rule, an agency may: repeal the rule by filing a **PROPOSED RULE**; continue the rule as it is by filing a **FIVE-YEAR NOTICE OF REVIEW AND STATEMENT OF CONTINUATION (REVIEW)**; or amend the rule by filing a **PROPOSED RULE** and by filing a **REVIEW**. By filing a **REVIEW**, the agency indicates that the rule is still necessary.

A **REVIEW** is not followed by the rule text. The rule text that is being continued may be found in the online edition of the *Utah Administrative Code* available at [adminrules.utah.gov](http://adminrules.utah.gov). The rule text may also be inspected at the agency or the Office of Administrative Rules. **REVIEWS** are effective upon filing.

**REVIEWS** are governed by Section 63G-3-305.

### FIVE-YEAR NOTICE OF REVIEW AND STATEMENT OF CONTINUATION

Rule Number:	R414-9	Filing ID: 50965
Effective Date:	07/19/2023	

#### Agency Information

1. Department:	Health and Human Services	
Agency:	Health Care Financing, Coverage and Reimbursement Policy	
Building:	Cannon Health Building	
Street address:	288 N 1460 W	
City, state and zip:	Salt Lake City, UT 84116	
Mailing address:	PO Box 143102	
City, state and zip:	Salt Lake City, UT 84114-3102	
Contact persons:		
Name:	Phone:	Email:
Craig Devashrayee	801-538-6641	cdevashrayee@utah.gov
Jonah Shaw	385-310-2389	jshaw@utah.gov
Please address questions regarding information on this notice to the persons listed above.		

#### General Information

2. Rule catchline:
R414-9. Federally Qualified Health Centers and Rural Health Clinics

### 3. A concise explanation of the particular statutory provisions under which the rule is enacted and how these provisions authorize or require this rule:

Section 26B-3-108 requires the Department of Health and Human Services (Department) to implement the Medicaid program through administrative rules, and Section 26B-1-213 grants the Department the authority to adopt, amend, or rescind these rules.

### 4. A summary of written comments received during and since the last five-year review of this rule from interested persons supporting or opposing this rule:

The Department did not receive any written comments regarding this rule.

### 5. A reasoned justification for continuation of this rule, including reasons why the agency disagrees with comments in opposition to this rule, if any:

The Department has determined that this rule is necessary because it implements payment methodologies for federally qualified health centers and rural health clinics. Therefore, this rule should be continued.

#### Agency Authorization Information

Agency head or designee and title:	Tracy S. Gruber, Executive Director	Date:	07/19/2023
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### FIVE-YEAR NOTICE OF REVIEW AND STATEMENT OF CONTINUATION

Rule Number:	R436-16	Filing ID: 54323
Effective Date:	07/19/2023	

**Agency Information**

<b>1. Department:</b>	Health and Human Services	
<b>Agency:</b>	Center for Health Data, Vital Records and Statistics	
<b>Building:</b>	Cannon Health Building	
<b>Street address:</b>	288 N 1460 W	
<b>City, state and zip:</b>	Salt Lake City, UT 84116	
<b>Mailing address:</b>	PO Box 141012	
<b>City, state and zip:</b>	Salt Lake City, UT 84114-1012	
<b>Contact persons:</b>		
<b>Name:</b>	<b>Phone:</b>	<b>Email:</b>
Linda S. Wininger	801-538-6262	lindaw@utah.gov
<b>Please address questions regarding information on this notice to the agency.</b>		

**General Information**

<b>2. Rule catchline:</b>
R436-16. Violation of Rules
<b>3. A concise explanation of the particular statutory provisions under which the rule is enacted and how these provisions authorize or require this rule:</b>
Sections 26B-1-221 through 26B-1-226 set forth the penalties for violations of public health laws and rules. Subsection 63G-3-201(5)(a) requires rules to enumerate any penalty authorized by statute that may result from their violation.
<b>4. A summary of written comments received during and since the last five-year review of this rule from interested persons supporting or opposing this rule:</b>
No written comments were received.
<b>5. A reasoned justification for continuation of this rule, including reasons why the agency disagrees with comments in opposition to this rule, if any:</b>
Following the five-year review of this rule, it has been determined that the rule is no longer necessary and the provisions of the rule will be incorporated into the respective Title R436 rules. This five-year review is being processed to ensure the Department Health and Human Services has adequate time to repeal the rule in its entirety. Therefore, this rule should be continued.

**Agency Authorization Information**

<b>Agency head or designee and title:</b>	Tracy S. Gruber, Executive Director	<b>Date:</b>	07/19/2023
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**FIVE-YEAR NOTICE OF REVIEW AND STATEMENT OF CONTINUATION**

<b>Rule Number:</b>	<b>R590-250</b>	<b>Filing ID: 55091</b>
<b>Effective Date:</b>	<b>08/01/2023</b>	

**Agency Information**

<b>1. Department:</b>	Insurance	
<b>Agency:</b>	Administration	
<b>Room number:</b>	Suite 2300	
<b>Building:</b>	Taylorsville State Office Building	
<b>Street address:</b>	4315 S 2700 W	
<b>City, state and zip:</b>	Taylorsville, UT 84129	
<b>Mailing address:</b>	PO Box 146901	
<b>City, state and zip:</b>	Salt Lake City, UT 84114-6901	
<b>Contact persons:</b>		
<b>Name:</b>	<b>Phone:</b>	<b>Email:</b>
Steve Gooch	801-957-9322	sgooch@utah.gov
<b>Please address questions regarding information on this notice to the persons listed above.</b>		

**General Information**

<b>2. Rule catchline:</b>
R590-250. Professional Employer Organization License Procedure and Assurance Organization Designation
<b>3. A concise explanation of the particular statutory provisions under which the rule is enacted and how these provisions authorize or require this rule:</b>
Section 31A-2-201 authorizes the insurance commissioner to write rules to implement Title 31A, Insurance Code.
Section 31A-40-103 authorizes the insurance commissioner to make rules to prescribe requirements for a professional employer organization (PEO).
Section 31A-40-302 authorizes the insurance commissioner to determine by rule the procedure for PEO licensing and renewal.
Section 31A-40-303 requires the insurance commissioner to designate an assurance organization by rule.
<b>4. A summary of written comments received during and since the last five-year review of this rule from interested persons supporting or opposing this rule:</b>
The Department of Insurance (Department) has received no written comments regarding this rule during the past five years.



**5. A reasoned justification for continuation of this rule, including reasons why the agency disagrees with comments in opposition to this rule, if any:**

This rule provides information regarding PEOs, which are a unique group in statute.

This rule provides forms and instructions for the licensure of PEOs, as well as the steps necessary for a company to become a designated assurance organization; as long as the law allows PEOs to be qualified by an assurance organization, this rule will be necessary.

Unlike other licensees of the Department, PEOs have no other guidance contained within the Insurance Code. Therefore, this rule should be continued.

**Agency Authorization Information**

<b>Agency head or designee and title:</b>	Steve Gooch, Public Information Officer	<b>Date:</b>	08/01/2023
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**FIVE-YEAR NOTICE OF REVIEW AND STATEMENT OF CONTINUATION**

<b>Rule Number:</b>	<b>R590-251</b>	<b>Filing ID:</b>	<b>54944</b>
<b>Effective Date:</b>	<b>08/01/2023</b>		

**Agency Information**

<b>1. Department:</b>	Insurance	
<b>Agency:</b>	Administration	
<b>Room number:</b>	Suite 2300	
<b>Building:</b>	Taylorsville State Office Building	
<b>Street address:</b>	4315 S 2700 W	
<b>City, state and zip:</b>	Taylorsville, UT 84129	
<b>Mailing address:</b>	PO Box 146901	
<b>City, state and zip:</b>	Salt Lake City, UT 84114-6901	
<b>Contact persons:</b>		
<b>Name:</b>	<b>Phone:</b>	<b>Email:</b>
Steve Gooch	801-957-9322	sgooch@utah.gov

Please address questions regarding information on this notice to the persons listed above.

**General Information**

<b>2. Rule catchline:</b>
R590-251. Preneed Life Insurance Minimum Standards to Determine Reserve Liabilities and Nonforfeiture Values

**3. A concise explanation of the particular statutory provisions under which the rule is enacted and how these provisions authorize or require this rule:**

Section 31A-2-201 authorizes the insurance commissioner to write rules to implement Title 31A, Insurance Code.

Section 31A-17-402 authorizes the insurance commissioner to write rules to specify the liabilities required to be reported by an insurer in a financial statement provided to the Insurance Department (Department), as well as the method for valuing the liabilities listed in the statement.

Section 31A-22-408 authorizes the insurance commissioner to adopt rules to interpret, describe, and clarify the application of the nonforfeiture law to a life insurance form that the insurance commissioner considers necessary.

This rule establishes minimum mortality standards for reserves and nonforfeiture reserves.

**4. A summary of written comments received during and since the last five-year review of this rule from interested persons supporting or opposing this rule:**

The Department has received no written comments regarding this rule during the past five years.

**5. A reasoned justification for continuation of this rule, including reasons why the agency disagrees with comments in opposition to this rule, if any:**

This rule must remain in force because it helps protect the public interest on preneed policies by increasing reserves to an appropriate level, promoting a responsible competitive environment by ensuring all insurers act responsibly, creating equitable value for consumers by increasing cash values, and promoting the reliability, solvency, and financial solidarity of insurance institutions by increasing the reserve requirement on preneed policies. Therefore, this rule should be continued.

**Agency Authorization Information**

<b>Agency head or designee and title:</b>	Steve Gooch, Public Information Officer	<b>Date:</b>	08/01/2023
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**FIVE-YEAR NOTICE OF REVIEW AND STATEMENT OF CONTINUATION**

<b>Rule Number:</b>	<b>R652-123</b>	<b>Filing ID:</b>	<b>51704</b>
<b>Effective Date:</b>	<b>07/17/2023</b>		

**Agency Information**

<b>1. Department:</b>	Natural Resources	
<b>Agency:</b>	Forestry, Fire and State Lands	
<b>Room number:</b>	352	
<b>Building:</b>	DNR	
<b>Street address:</b>	1594 W North Temple	
<b>City, state and zip:</b>	Salt Lake City, UT 84116	
<b>Mailing address:</b>	PO BOX 145703	
<b>City, state and zip:</b>	Salt Lake City, UT 84114-5703	
<b>Contact persons:</b>		
<b>Name:</b>	<b>Phone:</b>	<b>Email:</b>
Brianne Emery	385-239-0791	brianneemery@utah.gov
Jamie Barnes	385-222-1536	jamiebarnes@utah.gov
<b>Please address questions regarding information on this notice to the persons listed above.</b>		

**General Information**

<b>2. Rule catchline:</b>
R652-123. Wildland Fire Suppression Cost Recovery Procedure
<b>3. A concise explanation of the particular statutory provisions under which the rule is enacted and how these provisions authorize or require this rule:</b>
As provided in Section 65A-3-4, Liability for causing wildland fires, this rule identifies the procedure to collect suppression costs for wildland fire suppression, included those suspected to be ignited by human activity, identifies eligible recovery costs, and outlines the appeals and/or settlements procedure.
<b>4. A summary of written comments received during and since the last five-year review of this rule from interested persons supporting or opposing this rule:</b>
No written comments were received.
<b>5. A reasoned justification for continuation of this rule, including reasons why the agency disagrees with comments in opposition to this rule, if any:</b>
This rule identifies the procedure to collect suppression costs for wildland fire suppression, included those suspected to be ignited by human activity, identifies eligible recovery costs, and outlines the appeals and/or settlements procedure. Therefore, this rule should be continued.

**Agency Authorization Information**

<b>Agency head or designee and title:</b>	Jamie Barnes, Director/State Forester	<b>Date:</b>	07/17/2023
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**FIVE-YEAR NOTICE OF REVIEW AND STATEMENT OF CONTINUATION**

<b>Rule Number:</b>	<b>R710-13</b>	<b>Filing ID:</b>	<b>51917</b>
<b>Effective Date:</b>	<b>07/31/2023</b>		

**Agency Information**

<b>1. Department:</b>	Public Safety	
<b>Agency:</b>	Fire Marshal	
<b>Building:</b>	Conference Center at Miller Campus	
<b>Street address:</b>	410 W 9800 S, Suite 372	
<b>City, state and zip:</b>	Sandy, UT 84070	
<b>Contact persons:</b>		
<b>Name:</b>	<b>Phone:</b>	<b>Email:</b>
Kim Gibb	801-556-8198	kgibb@utah.gov
Ted Black	801-256-2390	tblack@utah.gov
<b>Please address questions regarding information on this notice to the persons listed above.</b>		

**General Information**

<b>2. Rule catchline:</b>
R710-13. Reduced Cigarette Ignition Propensity and Firefighter Protection Act
<b>3. A concise explanation of the particular statutory provisions under which the rule is enacted and how these provisions authorize or require this rule:</b>
This rule is authorized under Section 53-7-407, which allows the state fire marshal to make rules and regulations necessary to effectuate the purposes of Title 53, Part 7, Utah Fire Prevention and Safety Act.
The Utah State Tax Commission in the regular course of conducting inspections of wholesale dealers, agents, and retail dealers, as authorized under Title 59, Chapter 14, Cigarette and Tobacco Tax and Licensing Act, may inspect cigarettes to determine if the cigarettes are marked as required by Section 53-7-405. If the cigarettes are not marked as required, the State Tax Commission shall notify the state fire marshal. This rule establishes the process by which the fire marshal may address the removal of a cigarette from the market in these instances.

**4. A summary of written comments received during and since the last five-year review of this rule from interested persons supporting or opposing this rule:**

There have been no written comments received during and since the last five-year review of this rule.

**5. A reasoned justification for continuation of this rule, including reasons why the agency disagrees with comments in opposition to this rule, if any:**

This rule is authorized under Section 53-7-407, and is necessary to outline the legal process for the Fire Marshal's Office to remove a cigarette from the market. This rule ensures the rights of the cigarette company and outlines a process for the Fire Marshal's Office if a cigarette does not meet safety requirements. Therefore, this rule should be continued.

**Agency Authorization Information**

<b>Agency head or designee and title:</b>	Ted Black, State Fire Marshal	<b>Date:</b>	07/31/2023
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**FIVE-YEAR NOTICE OF REVIEW AND STATEMENT OF CONTINUATION**

<b>Rule Number:</b>	<b>R895-7</b>	<b>Filing ID:</b>	<b>53730</b>
<b>Effective Date:</b>	<b>07/27/2023</b>		

**Agency Information**

<b>1. Department:</b>	Government Operations		
<b>Agency:</b>	Technology Services		
<b>Street address:</b>	4315 S 2700 W		
<b>City, state and zip:</b>	Taylorsville, UT 84129		
<b>Contact persons:</b>			
<b>Name:</b>	<b>Phone:</b>	<b>Email:</b>	
Stephanie Weteling	801-599-7870	stephanie@utah.gov	

Please address questions regarding information on this notice to the persons listed above.

**General Information****2. Rule catchline:**

R895-7. Acceptable Use of Information Technology Resources

**3. A concise explanation of the particular statutory provisions under which the rule is enacted and how these provisions authorize or require this rule:**

This rule is issued by the Chief Information Officer under the authority of Section 63A-16-205 of the Technology Governance Act, and in accordance with Section 63G-3-201 of the Utah Rulemaking Act.

**4. A summary of written comments received during and since the last five-year review of this rule from interested persons supporting or opposing this rule:**

No written comments were received during and since the last five-year review of this rule from interested parties supporting or opposing this rule.

**5. A reasoned justification for continuation of this rule, including reasons why the agency disagrees with comments in opposition to this rule, if any:**

Information technology resources are provided to state employees to assist in the efficient day to day operations of state agencies. This rule is necessary to ensure employees understand the appropriate use of state information technology resources. Therefore, this rule should be continued.

**Agency Authorization Information**

<b>Agency head or designee and title:</b>	Marvin Dodge, Executive Director	<b>Date:</b>	07/19/2023
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**End of the Five-Year Notices of Review and Statements of Continuation Section**



## NOTICES OF FIVE-YEAR EXPIRATIONS

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Rulewriting agencies are required by law to review each of their administrative rules within five years of the date of the rule's original enactment or the date of last review (Section 63G-3-305). The Office of Administrative Rules (Office) is required to notify agencies of rules due for review at least 180 days prior to the anniversary date. If the agency finds that it will not meet the deadline for review of the rule (the five-year anniversary date), it may file a **NOTICE OF FIVE-YEAR EXTENSION (EXTENSION)** with the Office. However, if the agency fails to file either the **FIVE-YEAR NOTICE OF REVIEW AND STATEMENT OF CONTINUATION** or the **EXTENSION** by the date provide by the Office, the rule expires.

Upon expiration of the rule, the Office files a **NOTICE OF FIVE-YEAR EXPIRATION (EXPIRATION)** to document the action. The Office is required to remove the rule from the *Utah Administrative Code*. The agency may no longer enforce the rule and it must follow regular rulemaking procedures to replace the rule if it is still needed.

The Office has filed **EXPIRATIONS** for each of the rules listed below which were not reviewed in accordance with Section 63G-3-305. These rules have expired and have been removed from the *Utah Administrative Code*.

The expiration of administrative rules for failure to comply with the five-year review requirement is governed by Subsection 63G-3-305(8).

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### NOTICE OF EXPIRED RULE

Rule Number:	R622-1	Filing ID: 51519
Effective Date:	08/10/2023	

### Agency Information

<b>1. Department:</b>	Lieutenant Governor	
<b>Agency:</b>	Administration	
<b>Street address:</b>	350 N State St, Suite 220	
<b>City, state, and zip:</b>	Salt Lake City. UT 84114	
<b>Contact person(s):</b>		
<b>Name:</b>	<b>Phone:</b>	<b>Email:</b>
Nancy L. Lancaster	801-957-7102	rulesonline@utah.gov

### General Information

#### 2. Title of rule (catchline):

R622-1. Adjudicative Proceedings

#### 3. Summary:

The five-year review and notice of continuation was not filed for this rule by the deadline. This rule has expired and will be removed from the Utah Administrative Code.

End of the Notices of Notices of Five Year Expirations Section



## NOTICES OF RULE EFFECTIVE DATES

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State law provides for agencies to make their administrative rules effective and enforceable after publication in the *Utah State Bulletin*. In the case of **PROPOSED RULES** or **CHANGES IN PROPOSED RULES** with a designated comment period, the law permits an agency to make a rule effective no fewer than seven calendar days after the close of the public comment period, nor more than 120 days after the publication date. In the case of **CHANGES IN PROPOSED RULES** with no designated comment period, the law permits an agency to make a rule effective on any date including or after the thirtieth day after the rule's publication date, but not more than 120 days after the publication date. If an agency fails to file a **NOTICE OF EFFECTIVE DATE** within 120 days from the publication of a **PROPOSED RULE** or a related **CHANGE IN PROPOSED RULE** the rule lapses.

Agencies have notified the Office of Administrative Rules that the rules listed below have been made effective.

**NOTICES OF EFFECTIVE DATE** are governed by Subsection 63G-3-301(12), Section 63G-3-303, and Sections R15-4-5a and R15-4-5b.

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### Agriculture and Food

#### Conservation Commission

No. 55441 (Amendment) R64-4: Agricultural Water  
Optimization Program  
Published: 06/15/2023  
Effective: 07/31/2023

#### Plant Industry

No. 55439 (Amendment) R68-25: Industrial Hemp  
Program- Cannabinoid Product Processors  
Published: 06/15/2023  
Effective: 07/31/2023

No. 55345 (Amendment) R68-29: Quality Assurance  
Testing on Cannabis  
Published: 05/15/2023  
Effective: 08/01/2023

No. 55345 (Change in Proposed Rule) R68-29: Quality  
Assurance Testing on Cannabis  
Published: 07/01/2023  
Effective: 08/01/2023

No. 55442 (New Rule) R68-39: Industrial Hemp Producer  
Registration  
Published: 06/15/2023  
Effective: 08/01/2023

#### Regulatory Services

No. 55403 (Amendment) R70-330: Raw Milk for Retail  
Published: 06/01/2023  
Effective: 08/01/2023

### Commerce

#### Real Estate

No. 55495 (Amendment) R162-2c: Utah Residential  
Mortgage Practices and Licensing Rules  
Published: 07/01/2023  
Effective: 08/08/2023

### Education

#### Administration

No. 55486 (Amendment) R277-110: Educator Salary  
Adjustment  
Published: 07/01/2023  
Effective: 08/08/2023

No. 55487 (Amendment) R277-496: K-3 Reading Software  
Licenses  
Published: 07/01/2023  
Effective: 08/08/2023

No. 55488 (Amendment) R277-497: School Accountability  
System  
Published: 07/01/2023  
Effective: 08/08/2023

No. 55489 (Amendment) R277-607: Absenteeism and  
Truancy Prevention  
Published: 07/01/2023  
Effective: 08/08/2023

No. 55490 (Amendment) R277-613: LEA Policies and  
Training Regarding Bullying, cyber-bullying, Hazing,  
Retaliation, and Abusive Conduct  
Published: 07/01/2023  
Effective: 08/08/2023

No. 55491 (Repeal) R277-619: Student Leadership Skills  
Development  
Published: 07/01/2023  
Effective: 08/08/2023

No. 55492 (Amendment) R277-726: Statewide Online  
Education Program  
Published: 07/01/2023  
Effective: 08/08/2023

## NOTICES OF RULE EFFECTIVE DATES

### Governor

#### Economic Opportunity

No. 55412 (Amendment) R357-22: Rural Employment  
Expansion Program  
Published: 06/01/2023  
Effective: 07/18/2023

### Health and Human Services

#### Population Health, Environmental Health

No. 55428 (Amendment) R392-102: Food Truck Sanitation  
Published: 06/01/2023  
Effective: 07/17/2023

#### Health Care Financing, Coverage and Reimbursement Policy

No. 55386 (Amendment) R414-14: Home Health Services  
Published: 05/15/2023  
Effective: 07/26/2023

#### No. 55357 (Amendment) R414-32: Hospital Record- keeping Policy

Published: 05/15/2023  
Effective: 07/26/2023

#### Health Care Facility Licensing

No. 55309 (Amendment) R432-2: General Licensing  
Provisions  
Published: 05/15/2023  
Effective: 07/26/2023

#### No. 55347 (Amendment) R432-11: Orthopedic Hospital Construction

Published: 05/15/2023  
Effective: 07/26/2023

#### No. 55437 (Amendment) R432-102: Specialty Hospital - Chemical Dependency/Substance Abuse

Published: 06/15/2023  
Effective: 07/28/2023

#### Human Services Program Licensing

No. 55380 (Amendment) R501-11: Social Detoxification  
Programs  
Published: 05/15/2023  
Effective: 08/02/2023

#### No. 55431 (Repeal and Reenact) R501-13: Adult Day Care

Published: 06/01/2023  
Effective: 07/19/2023

#### No. 55383 (Amendment) R501-18: Recovery Residence Services

Published: 05/15/2023  
Effective: 08/02/2023

### Insurance

#### Administration

No. 55451 (Amendment) R590-222: Life Settlements  
Published: 06/15/2023  
Effective: 07/25/2023

#### No. 55452 (Amendment) R590-249: Secondary Medical Condition Exclusion

Published: 06/15/2023  
Effective: 07/25/2023

#### No. 55453 (Repeal and Reenact) R590-274: Submission and Required Disclosures of Public Adjuster Contracts

Published: 06/15/2023  
Effective: 07/25/2023

### Natural Resources

#### Wildlife Resources

#### No. 55462 (Repeal) R657-3: Collection, Importation, Transportation, and Possession of Animals

Published: 07/01/2023  
Effective: 08/10/2023

#### No. 55463 (New Rule) R657-3a: Collection, Importation, Transportation, and Possession of Animals

Published: 07/01/2023  
Effective: 08/10/2023

#### No. 55464 (New Rule) R657-3b: Certification of Registration – Birds and Mammals

Published: 07/01/2023  
Effective: 08/10/2023

#### No. 55465 (New Rule) R657-3c: Certification of Registration – Fish, Mollusks, and Crustaceans

Published: 07/01/2023  
Effective: 08/10/2023

#### No. 55467 (Amendment) R657-5: Taking Big Game

Published: 07/01/2023  
Effective: 08/10/2023

#### No. 55468 (Amendment) R657-6: Taking Upland Game

Published: 07/01/2023  
Effective: 08/10/2023

#### No. 55469 (Amendment) R657-9: Taking Waterfowl, Snipe and Coot

Published: 07/01/2023  
Effective: 08/10/2023

#### No. 55470 (Amendment) R657-10: Taking Cougar

Published: 07/01/2023  
Effective: 08/10/2023

#### No. 55471 (Amendment) R657-11: Taking Furbearers and Trapping

Published: 07/01/2023  
Effective: 08/10/2023

#### No. 55472 (Amendment) R657-13: Taking Fish and Crayfish

Published: 07/01/2023  
Effective: 08/10/2023



No. 55473 (Amendment) R657-14: Commercial Harvesting  
of Protected Aquatic Wildlife  
Published: 07/01/2023  
Effective: 08/10/2023

No. 55476 (Amendment) R657-33: Taking Bear  
Published: 07/01/2023  
Effective: 08/10/2023

No. 55477 (Amendment) R657-37: Cooperative Wildlife  
Management Units for Big Game or Turkey  
Published: 07/01/2023  
Effective: 08/10/2023

No. 55478 (Amendment) R657-42: Fees, Exchanges,  
Surrenders, Refunds and Reallocation of Wildlife Documents  
Published: 07/01/2023  
Effective: 08/10/2023

No. 55480 (Amendment) R657-54: Taking Wild Turkey  
Published: 07/01/2023  
Effective: 08/10/2023

No. 55481 (Amendment) R657-59: Private Fish Ponds,  
Short Term Fishing Events, Private Fish Stocking, and  
Institutional Aquaculture  
Published: 07/01/2023  
Effective: 08/10/2023

No. 55482 (Amendment) R657-62: Drawing Application  
Procedures  
Published: 07/01/2023  
Effective: 08/10/2023

No. 55483 (Amendment) R657-67: Utah Hunter Mentoring  
Program  
Published: 07/01/2023  
Effective: 08/10/2023

No. 55484 (Amendment) R657-69: Turkey Depredation  
Published: 07/01/2023  
Effective: 08/10/2023

**End of the Notices of Rule Effective Dates Section**

