

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

NOTICES OF PROPOSED RULES	1
ALCOHOLIC BEVERAGE SERVICES, ADMINISTRATION	
R82-4. Criminal Offenses and Procedure	2
ATTORNEY GENERAL, ADMINISTRATION	
R105-1. Attorney General's Selection of Outside Counsel, Expert Witnesses and Other Litigation Support Services	6
ENVIRONMENTAL QUALITY, ADMINISTRATION	
R305-7. Extraordinary Enforcement Expenses	13
ENVIRONMENTAL QUALITY, AIR QUALITY	
R307-110-11. Section IX, Control Measures for Area and Point Sources, Part B, Sulfur Dioxide	16
R307-110-13. Section IX, Control Measures for Area and Point Sources, Part D, Ozone	19
R307-110-17. Section IX, Control Measures for Area and Point Sources, Part H, Emission Limits	23
HEALTH AND HUMAN SERVICES, ADMINISTRATION	
R380-350. Community Health Worker Certification	26
HEALTH AND HUMAN SERVICES, CHILD CARE CENTER LICENSING	
R381-70. Out-of-School-Time Child Care Programs	31
HEALTH AND HUMAN SERVICES, RESIDENTIAL CHILD CARE LICENSING	
R430-50. Residential Certificate Child Care	49
R430-90. Licensed Family Child Care	68
LABOR COMMISSION, OCCUPATIONAL SAFETY AND HEALTH	
R614-1-4. Incorporation of Federal Standards	88
LABOR COMMISSION, BOILER, ELEVATOR AND COAL MINE SAFETY	
R616-3-3. Safety Codes for Elevators	93
NATURAL RESOURCES, WATER RESOURCES	
R653-11. Water Conservation Requirements and Incentives	96
R653-17. Regional Water Conservation Goals	104
HIGHER EDUCATION (UTAH BOARD OF), ADMINISTRATION	
R765-607. PRIME Program Grant	108
R765-621. Terrell H. Bell Education Scholarship Program	113
R765-622. Career and Technical Education Scholarship Program	117

TRANSPORTATION, ADMINISTRATION	
R907-66. Procurement of Consultant Services, Procedures and Contract Administration	121
TRANSPORTATION, PROGRAM DEVELOPMENT	
R926-9. Establishment, Designation and Operation of Tollways	127
NOTICES OF CHANGES IN PROPOSED RULES.....	130
COMMERCE, PROFESSIONAL LICENSING	
R156-60e. Mental Health Professional Practice Act Rule	131
HEALTH AND HUMAN SERVICES, HEALTH CARE FACILITY LICENSING	
R432-100. General Hospital Standards	151
R432-950. Mammography Quality Assurance	172
FIVE-YEAR NOTICES OF REVIEW AND STATEMENTS OF CONTINUATION	180
HEALTH AND HUMAN SERVICES, SUBSTANCE ABUSE AND MENTAL HEALTH, STATE HOSPITAL	
R525-8. Forensic Mental Health Facility	180
NATURAL RESOURCES; OIL, GAS AND MINING; ABANDONED MINE RECLAMATION	
R643-870. Abandoned Mine Reclamation Regulation Definitions	181
R643-872. Abandoned Mine Reclamation Fund	182
R643-874. General Reclamation Requirements	183
R643-875. Noncoal Reclamation	183
R643-877. Rights of Entry	184
R643-879. Acquisition, Management, and Disposition of Lands and Water	185
R643-882. Reclamation on Private Land	186
R643-884. State Reclamation Plan	186
R643-886. State Reclamation Grants	187
PARDONS (BOARD OF), ADMINISTRATION	
R671-402. Special Conditions of Parole	188
PUBLIC SAFETY, DRIVER LICENSE	
R708-46. Knowledge Test in Individual's Preferred Language	189
SCHOOL AND INSTITUTIONAL TRUST LANDS, ADMINISTRATION	
R850-12. Prohibited and Restricted Uses of Trust Lands	190
TRANSPORTATION, OPERATIONS, CONSTRUCTION	
R916-1. Advertising and Awarding Construction Contracts	191
R916-2. Prequalification of Contractors	192
TRANSPORTATION, PROGRAM DEVELOPMENT	
R926-9. Establishment, Designation and Operation of Tollways	193

TRANSPORTATION COMMISSION, ADMINISTRATION

R940-1. Establishment of Toll Rates 193

R940-7. Marda Dillree Corridor Preservation Fund..... 194

NOTICES OF RULE EFFECTIVE DATES 196

NOTICES OF PROPOSED RULES

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 March 17, 2026, 12:00 a.m., and April 01, 2026, 11:59 p.m. are included in this, the April 15, 2026, 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 May 15, 2026. 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 August 13, 2026, 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.

The Proposed Rules Begin on the Following Page

NOTICE OF SUBSTANTIVE CHANGE

TYPE OF FILING: Amendment

Rule or section number:

R82-4

Filing ID: 57878

Agency Information

1. Title catchline:	Alcoholic Beverage Services, Administration	
Building:	Administration building	
Street address:	1625 S 900 W	
City, state:	Salt Lake City, UT	
Mailing address:	1625 S 900 W	
City, state and zip:	Salt Lake City, UT 84104	
Contact persons:		
Name:	Phone:	Email:
Brian Swan	801-707-1292	bswan@utah.gov

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

General Information

2. Rule or section catchline:	
R82-4. Criminal Offenses and Procedure	
3. Are any changes in this filing because of state legislative action?	Changes are because of legislative action.
If yes, any bill number and session:	HB 597 and HB 59 (General Session 2026)
4. Purpose of the new rule or reason for the change:	
To better align Section R82-4-101, Age Verification, with the now-current statute after changes in the 2026 General Session.	
5. Summary of the new rule or change:	
This amendment revises requirements related to electronic scanning of identification for certain alcohol licensees to be consistent with statutory changes made during the 2026 General Session.	
Secondly, this amendment makes additional clarifications to current language for ease in readability.	

Fiscal Information

6. Provide an estimate and written explanation of the aggregate anticipated cost or savings to:	
A. State budget:	
No anticipated impact on state budget. The proposed revisions make changes to requirements related to electronic scanning of identification for certain alcohol licensees to align with statutory changes made in HB 59 and HB 597 (2026).	
The proposed changes do not apply to state stores nor require additional audits to be conducted by the Department of Alcoholic Beverage Services.	
B. Local governments:	
No anticipated impact on local government. The proposed revisions make changes to requirements related to electronic scanning of identification for certain alcohol licensees to align with statutory changes made in HB 59 and HB 597 (2026).	
The proposed changes do not require additional action by local governments.	

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

No anticipated impact on small businesses. The proposed revisions make changes to requirements related to electronic scanning of identification for certain alcohol licensees to align with statutory changes made in HB 59 and HB 597 (2026).

The proposed changes do not require additional action by businesses that are currently in compliance.

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

No anticipated impact on non-small businesses. The proposed revisions make changes to requirements related to electronic scanning of identification for certain alcohol licensees to align with statutory changes made in HB 59 and HB 597 (2026).

The proposed changes do not require additional action by businesses that are currently in compliance.

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**):

No anticipated impact on persons. The proposed revisions make changes to requirements related to electronic scanning of identification for certain alcohol licensees to align with statutory changes made in HB 59 and HB 597 (2026).

The proposed changes do not require additional action by other persons.

F. Compliance costs for affected persons:

No anticipated impact on compliance cost for affected persons. The proposed revisions make changes to requirements related to electronic scanning of identification for certain alcohol licensees to align with statutory changes made in HB 59 and HB 597 (2026).

The proposed changes do not require additional action by persons that are currently in compliance.

G. Regulatory Impact Summary Table (This table includes only fiscal impacts the agency was able to measure. If the agency could not estimate an impact, it is excluded from this table but described in boxes A through F.)

Regulatory Impact Summary Table					
Fiscal Cost	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
Total Fiscal Cost	\$0	\$0	\$0	\$0	\$0
Fiscal Benefits	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
Total Fiscal Benefits	\$0	\$0	\$0	\$0	\$0
Net Fiscal Benefits	\$0	\$0	\$0	\$0	\$0

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

The Executive Director of the Department of Alcoholic Beverage Services, Ericka Evans, has reviewed and approved this regulatory impact analysis.

Citation Information

7. 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 32B-2-202	Section 32B-1-407	

Public Notice Information

9. The public may submit written or oral comments to the agency identified in box 1.	
A. Comments will be accepted until:	05/15/2026

10. This rule change MAY become effective on:	05/29/2026
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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

Agency head or designee and title:	Brian Swan, Deputy Director of Legal and Regulatory Affairs	Date:	03/30/2026
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R82. Alcoholic Beverage Control, Administration.

R82-4. Criminal Offenses and Procedure.

R82-4-101. Electronic Proof of Age Verification.

(1) Authority. This rule is made pursuant to Sections 32B-2-202 and [32B-1-401, 32B-1-404, 32B-1-405,]32B-1-407[and 32B-4-411].

(2) ~~[Purpose.]~~Definitions. As used in this rule, "applicable licensee" means the same as that term is defined in Section 32B-1-407. ~~[Section 32B-1-407 requires applicable licensees to verify proof of age of persons who appear to be 35 years of age or younger either by an electronic age verification device, or an acceptable alternate process established by Commission rule.~~

- ~~(b) This rule:~~
- ~~(i) establishes the minimum technology specifications of electronic age verification devices;~~
 - ~~(ii) establishes the procedures for recording identification that cannot be electronically verified; and~~
 - ~~(iii) establishes the security measures that must be used by the applicable licensee to ensure that information obtained is used only to verify proof of age and is not disclosed to others except to the extent authorized by Title 32B, Alcoholic Beverage Control Act.~~

~~(3) [Application of Rule.]~~Except as provided in Subsection (6), an applicable licensee ~~[is required to]~~shall verify an individual's proof of age in accordance with Section 32B-1-407 using an electronic age verification device or program.

- ~~(4) An electronic age verification device or program described in Subsection (3) must contain a technology that:~~
- ~~(a) verifies the validity of a physical:~~
 - ~~(i) state issued driver's license;~~
 - ~~(ii) state issued identification card; and~~
 - ~~(iii) military identification card; and~~
 - ~~(b) visually displays no more than the following for the individual who presents a physical proof of age for verification:~~
 - ~~(i) the name;~~
 - ~~(ii) the age;~~
 - ~~(iii) the number assigned to the individual's proof of age by the issuing authority;~~
 - ~~(iv) the birth date;~~
 - ~~(v) the gender; and~~
 - ~~(vi) the status and expiration date of the individual's proof of age.~~

~~(5) An electronic age verification device or program meets the requirement of Subsection (4) if the electronic age verification device or program contains:~~

- ~~(a) a technology that can determine the validity of a state issued identification card from the barcode located on the back of the state issued identification card by:~~
 - ~~(i) comparing the card's barcode to other legitimate barcodes; or~~
 - ~~(ii) identifying patterns within legitimate state issued identification cards;~~
- ~~(b) [the technology of] a magnetic stripe card reader; or~~
- ~~(c) [the technology of] a two-dimensional (["2d"]) stack symbology card reader[; or].~~
- ~~(C) an alternate technology capable of electronically verifying the proof of age;~~

~~(6) If the electronic age verification device or program described in Subsection (4) [is unable to]cannot verify an individual's proof of age, the applicable licensee shall:~~

- ~~(a) document:~~
 - ~~(i) the type of proof of age;~~
 - ~~(ii) the number assigned to the proof of age;~~
 - ~~(iii) the expiration date of the proof of age;~~

- ~~(iv) the individual's name; and~~
- ~~(v) the individual's birth date; or~~
- ~~(b) use an alternate technology capable of reading the proof of age and retaining the information described in Subsections (6)(a)(ii) through (v).~~
- ~~(7)(a) An applicable licensee shall retain, for a period of seven calendar days:~~
 - ~~(i) the information obtained from an individual's proof of age under Subsection (4) or (6); and~~
 - ~~(ii) the time and date the proof of age was verified under Subsection (4) or presented under Subsection (6).~~
- ~~(b) An applicable licensee may not retain the information described in Subsection (7)(a) for more than seven calendar days.~~
- ~~(c) An applicable licensee may not use or retain the information collected under Subsection (4) or (6) for a purpose other than to verify an individual's proof of age.~~
 - ~~[(ii) shall be capable of reading:~~
 - ~~(A) a valid state issued driver's license;~~
 - ~~(B) a valid state issued identification card;~~
 - ~~(C) a valid military identification card; and~~
 - ~~(D) a valid passport;~~
 - ~~(iii) shall have a screen that displays no more than:~~
 - ~~(A) the individual's name;~~
 - ~~(B) the individual's age;~~
 - ~~(C) the number assigned to the individual's proof of age by the issuing authority;~~
 - ~~(D) the individual's the birth date;~~
 - ~~(E) the individual's gender; and~~
 - ~~(F) the status and expiration date of the individual's proof of age; and~~
 - ~~(iv) shall have the capability of electronically storing the following information for seven days (168 hours):~~
 - ~~(A) the individual's name;~~
 - ~~(B) the individual's date of birth;~~
 - ~~(C) the individual's age;~~
 - ~~(D) the expiration date of the proof of age identification card;~~
 - ~~(E) the individual's gender; and~~
 - ~~(F) the time and date the proof of age was scanned.~~
- ~~(b) An alternative method of verifying an individual's proof of age when proof of age cannot be scanned electronically:~~
 - ~~(i) shall include a record or log of the information obtained from the individual's proof of age including the following information:~~
 - ~~(A) the type of proof of age identification document presented;~~
 - ~~(B) the number assigned to the individual's proof of age document by the issuing authority;~~
 - ~~(C) the expiration date of the proof of age identification document;~~
 - ~~(D) the date the proof of age identification document was presented;~~
 - ~~(E) the individual's name; and~~
 - ~~(F) the individual's date of birth.~~
 - ~~(e) Any data collected either electronically or otherwise:~~
 - ~~(i) may be used by the licensee, and employees or agents of the licensee, solely for the purpose of verifying an individual's proof of age;~~
 - ~~(ii) may be acquired by law enforcement, or other investigative agencies for any purpose under sections 32B-6-406-407;~~
 - ~~(iii) may not be retained by the licensee in a data base for mailing, advertising, or promotional activity;~~
 - ~~(iv) may not be retained to acquire personal information to make inappropriate personal contact with the individual; and~~
 - ~~(v) shall be retained for a period of seven days from the date on which it was acquired, after which it must be deleted.~~
 - ~~(d) Any person who still questions the age of the individual after being presented with proof of age, shall require the individual to sign a statement of age form as provided under section 32B-1-405.~~

KEY: alcoholic beverages
 Date of Last Change: ~~2026~~February 25, 2020
 Notice of Continuation: February 5, 2025
 Authorizing, and Implemented or Interpreted Law: 32B-2-202; 32B-1-407

NOTICE OF SUBSTANTIVE CHANGE		
TYPE OF FILING: New		
Rule or section number:	R105-1	Filing ID: 57874

Agency Information	
1. Title catchline:	Attorney General, Administration
Building:	Utah State Capitol

Street address:	350 N State Street, Suite #230	
City, state:	Salt Lake City, UT	
Contact persons:		
Name:	Phone:	Email:
Paul Tonks	385-266-4104	phtonks@agutah.gov
Please address questions regarding information on this notice to the persons listed above.		

General Information

2. Rule or section catchline:
R105-1. Attorney General's Selection of Outside Counsel, Expert Witnesses and Other Litigation Support Services
4. Purpose of the new rule or reason for the change:
Section 67-5-32 requires the Utah Attorney General's Office (Office) to make rules to establish public disclosure, transparency, accountability, reasonable fees and limits on fees, and reporting in relation to the procurement of outside counsel, expert witnesses, and other litigation support services.
5. Summary of the new rule or change:
Provide new defined terms for Title 105, Attorney General, Administration, and a new approved vendor process for the Office.

Fiscal Information

6. Provide an estimate and written explanation of the aggregate anticipated cost or savings to:																								
A. State budget:																								
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Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
Total Fiscal Benefits	\$0	\$0	\$0	\$0	\$0
Net Fiscal Benefits	\$0	\$0	\$0	\$0	\$0

H. Department head comments on fiscal impact and approval of regulatory impact analysis:
 Derek Brown, the Attorney General of Utah, Attorney General's Office, has reviewed and approved this regulatory impact analysis.

Citation Information

7. 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:
 Subsection 67-5-32(1)

Public Notice Information

9. The public may submit written or oral comments to the agency identified in box 1.
A. Comments will be accepted until: 05/15/2026

10. This rule change MAY become effective on: 05/22/2026
 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

Agency head or designee and title:	Paul Tonks, Assistant Attorney General	Date:	03/25/2026
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R105. Attorney General, Administration.

R105-1. Attorney General's Selection of Outside Counsel, Expert Witnesses and Other Litigation Support Services.

R105-1-1. Purpose and Authority.

(1) The purpose of this rule is to provide the requirements for procurements that are managed by the Attorney General, including the hiring of ~~outside~~ counsel, expert witnesses, and litigation support services.

(2) This rule is adopted pursuant to authority granted by the Utah Procurement Code and ~~Section~~ Subsection 67-5-32(1)(a), including authority to manage procurement of procurement items directly or by delegation of the Chief Procurement Officer of the Division of Purchasing of the Department of ~~Administrative Services~~ Government Operations.

(3) The Attorney General may procure any procurement item and exercise any action authorized by the Procurement Code and this rule.

R105-1-2. Definitions.

Terms in this Rule R105-1 shall be as defined in Title 63G, Chapter 6a, Utah Procurement Code. The definitions in Rule R33-1 also apply to this Rule R105-1, except in case of conflict, the definitions in this Rule R105-1 shall control. ~~Additional definitions are provided below.~~

- (1) "Agency" is as defined in Section 67-5-3.
- (2) "Attorney General" means the Attorney General of the State of Utah, or the Attorney General's designee.
- (3) "Contingent fee case" means a legal matter for which legal services are provided under a contingent fee contract.
- (4) "Contingent fee contract" means a contract for legal services under which the compensation for legal services is a percentage of the amount recovered in the legal matter for which the legal services are provided.
- (5) "Expert witness" means a person whose knowledge, skill, experience, training or education in a scientific, technical, or other specialized area, would enable the person to give testimony under the Utah Rules of Evidence, Rule 702.

NOTICES OF PROPOSED RULES

(6) "Legal matter" means a legal issue or administrative or judicial proceeding within the scope of the [a]Attorney [g]General's authority.

(7) "Litigation Support Services" includes goods, services, software, or technology.

(8) "Office" means the Office of the Utah Attorney General.

[8]9) "Outside [C]ounsel" means an attorney or attorneys who are not, or a law firm whose attorneys are not, employed by the Attorney General's [e]Office, pursuant to Section 67-5-7[et seq.], which the Attorney General hires, pursuant to Section 67-5-5, to represent, provide legal advice, or counsel to an agency of the [S]state. [2]Outside [C]ounsel[2] may or may not be designated as [2]Special Assistant Attorney General[2], as the Attorney General determines.

[9]10) "Procurement item" or "Procurement items" is as defined in Section 63G-6a-103.

[10]11) "Securities class action" means an action brought as a class action alleging a violation of federal securities law, including a violation of the Securities Act of 1933, 15 U.S.C. Sec. 77a et seq., or the Securities Exchange Act of 1934, 15 U.S.C. Sec. 78a et seq.

[11]12) "Small purchase" means a purchase under [Rule-]Section R105-1-6.

[12]13) "Sole source" means a determination by the Attorney General, in writing, that the sole source requirements of the Utah Procurement Code and this [R]rule have been met.

[13]14) "State" means the State of Utah.

[15) "Vendor" means attorney, law firms, or other entities providing or interested in providing outside counsel legal services to the Office.

R105-1-3. General Process.

(1) This rule applies to the procurement and appointment of [O]outside [C]ounsel, expert witnesses, litigation support services, litigation related consultants, as well as management software and services by the Attorney General.

(2) [In order to]To properly fulfill the responsibilities of the Office, the procurement of [O]outside [C]ounsel, expert witnesses, litigation support services, litigation related consultants, and management software and services may require that public notice of a particular procurement not be provided. Public notice of a procurement may only be waived in the event of an emergency procurement or as authorized by the Procurement Code.

(3) The Attorney General may select [O]outside [C]ounsel, expert witnesses, professional litigation support services, litigation related consultants, as well as management software and services pursuant to any authorized process under the Utah Procurement Code. In any such selection process, it may be specified that the [O]outside [C]ounsel is responsible for providing the expert witnesses or other litigation goods and services through the selection process for [O]outside [C]ounsel and pursuant to the contract provisions with the Attorney General.

(4) The Attorney General shall comply with the Utah Procurement Code. The Attorney General shall comply with [Rule-]Title R33 only when necessary to comply with Utah Code, except when [Rule-]Title R33 is in conflict with or preempted by this Rule R105-1.

(5) The Attorney General may, in a multistate case involving other states as parties aligned with Utah, elect to enter into a fee sharing agreement in which each state contributes to a litigation fund that is used to purchase expert witnesses [and/or] other litigation support services including litigation related consultants, as well as management software and services, or through a similar group procurement agreement. The agreement shall be treated collectively as a sole source procurement of all goods and services purchased under the terms of the agreement.

(6) The Attorney General may, in a multistate case involving other states as parties aligned with Utah, select [O]outside [C]ounsel jointly with some or all [e]the other states as a sole source procurement.

(7) The Attorney General's [e]Office shall ensure that the procurement of outside counsel is supported by a determination by the Attorney General that the procurement is in the best interests of the state, in light of available resources of the Attorney General's [e]Office.

(8) The Attorney General's [e]Office shall provide for the fair and equitable treatment of all potential providers of outside counsel, expert witnesses, and other litigation support services including, litigation related consultants, as well as management software and services consistent with the limitations and procedures set forth in this Rule R105-1.

(9) The Attorney General's [e]Office shall ensure that fees for outside counsel, whether based on an hourly rate, contingency fee, or other arrangement, are reasonable and do not exceed industry standards.

(10) The procurement and requirements regarding a Contingency Fee Contract must meet the requirements of this Rule R105-1 and the applicable provisions of the Utah Code.

R105-1-4. Available Procurement Processes.

[Prior to]Before any procurement for legal services, the Attorney General shall determine which process under the Utah Procurement Code shall be used.

R105-1-5. Approved Vendor List Process.

(1) In accordance with Section 63G-6a-507, the Attorney General may establish an approved vendor list. The approved vendor list shall be an ongoing, amendable and open-ended list of approved outside counsel based on the statements of qualifications received in accordance with Section 63G-6a-410. The Attorney General will periodically update the list to include:

(a) a schedule indicating when a vendor not on the initial approved vendor list may submit a statement of qualifications to be considered to be added to the approved vendor list; and

(b) the specified period after which a vendor shall submit a new statement of qualifications for evaluation before the vendor's status as an approved vendor on the approved vendor list may be renewed.

(2) Attorneys, law firms, or other entities interested in providing outside counsel legal services to the Office may, using the process outlined in Section 63G-6a-410, submit a statement of qualifications and an expression of interest at any time to be considered for its approved vendor list.

(3) The Attorney General may specify a uniform format for statements of qualifications.

(4) Any attorney, law firm, or entity may amend its statement of qualifications for the approved vendor list at any time by filing a new statement.

(5) The Attorney General may reject a statement of qualifications if the Attorney General or the Attorney General's designee determines that:

(a) the vendor:

(i) has excessive or unwaivable conflicts of interest involving current or previous clients; or

(ii) has previously represented parties adverse to the best interests of the state;

(iii) is not responsible;

(iv) is in violation of a provision found in the Utah Procurement Code, Title 63G, Chapter 6a;

(v) has engaged in unethical conduct;

(vi) has been the subject of formal or informal discipline imposed by the Utah State Bar; or

(vii) receives a performance rating below the satisfactory performance threshold specified in the request for statement of qualifications.

(b) there has been a change in the vendor's circumstances after the vendor submits a statement of qualifications that, if the change had been known when the statement of qualifications was evaluated, would have caused the statement of qualifications not to have received a qualifying score; or

(c) the statement of qualifications:

(i) is not responsive; or

(ii) does not meet the mandatory minimum requirements, evaluation criteria, or applicable score thresholds stated in the request for statement of qualifications.

(6) A determination to reject a statement of qualifications made under Subsection (5) is final and non-appealable.

R105-1-[5]6. Request for Proposals Process.

(1) The Request for Proposals shall contain, in addition to the requirements of ~~[Rule]~~Section R33-7-102, at a minimum, the following information:

(a) A description of the project or law practice areas of anticipated need.

(b) Fee arrangements.

(c) The persons or entities being sought in the procurement, including whether an individual person, firm or association of firms may respond.

(d) The qualification criteria and the relative importance of the criteria. The Attorney General shall request qualifications from outside counsel being considered to provide services under a contingent fee contract unless the Attorney General:

(i) determines that requesting qualifications is not feasible under the circumstances; and

(ii) sets forth the basis for this determination in writing.

(e) Examples of criteria include:

(i) Identification by name and experience of the proposed service provider~~{[s]}~~;

(ii) A description of the duties and responsibilities of each person providing the service; and

(iii) The ability of the persons providing the service to meet the needs of the project, including the consideration of any association with other persons, expert witnesses or firms;

(f) The Contractual Requirements, which may be accomplished by including a copy of the contract.

(g) A request for a conflicts analysis, including potential conflicts of interest or other related matters concerning the offeror's ability to ethically perform the requested services.

(2) In any selection process for outside counsel, it may be specified that the outside counsel is responsible for providing the expert witnesses or other litigation goods and services including litigation related consultants, as well as management software and services through the outside counsel's selection process and pursuant to the contract provisions with the Attorney General.

(3) Minimum scores for any of the criteria may be established.

R105-1-[6]7. Small Purchases.

(1) The maximum thresholds for small purchases shall be as described in this ~~[Rule]~~Section R105-1-6.

(2) For ~~[O]~~outside ~~[C]~~counsel, litigation related consultants, management software and services, as well as expert witnesses, the small purchase maximum threshold is \$250,000 per contract. A written justification statement shall be filed explaining the reason~~{[s]}~~ for selection of the contractor.

(3) For the selection of litigation support services that are not included under ~~[Rule]~~Subsection R105-1-6(2), including ~~[but not limited to]~~ court reporting, litigation related copying and printing services, the small purchase maximum threshold is \$50,000 per contract. For a purchase of litigation support services that are not included under ~~[Rule]~~Subsection R105-1-6(2) between \$2,500 and \$50,000, a minimum of two quotes shall be obtained or there shall be developed a rotation system of qualified persons or firms that meet the qualifications for the service. For any purchase of litigation support services that are not included under ~~[Rule]~~Subsection R105-1-6(2) of \$2,500 or less, a direct award may be made.

(4) Under ~~[Section]~~Subsection 63G-6a-506(3), a threshold stated in this ~~[R]~~rule may be exceeded if the Attorney General or a person specifically designated in writing by the Attorney General gives written authorization to exceed the threshold that includes the reasons for exceeding the threshold.

NOTICES OF PROPOSED RULES

R105-1-~~7~~8. Sole Source.

Unless the Attorney General determines that a publication of a sole source shall be published, sole sourced procurement items need not be published regardless of cost.

R105-1-~~8~~9. Emergency Procurements.

(1) An emergency procurement may only be used when an emergency exists as described in, and in compliance with, Section 63G-6a-803.

(2) Emergency procurements are limited to those necessary to mitigate the emergency.

R105-1-~~9~~10. Confidentiality of Procurement Records.

(1) The Attorney General shall comply with Title 63G, Chapter 2, Governmental Records Access and Management Act (GRAMA).

(2) Pricing may not be classified as protected and is considered public information.

(3) An entire response to a solicitation may not be designated as "PROTECTED," "CONFIDENTIAL" or "PROPRIETARY" and shall be considered non-responsive unless the vendor removes the designation.

(4) Publicizing Awards.

(a) In addition to the requirements of Section 63G-6a-709.5, the following shall be disclosed after receipt of a GRAMA request and applicable fees:

(i) the executed contract~~[(s)]~~ and the successful proposal~~[(s)]~~, except for those portions that are not Public;

(ii) unsuccessful proposals, except for those portions that are not Public;

(iii) the rankings of the proposals;

(iv) the names of the members of any evaluation committee;

(v) the final scores used by the evaluation committee to make the selection, except that the names of the individual scorers ~~shall~~ may not be associated with their individual scores or rankings; and

(vi) the written justification statement supporting the selection, except for those portions that are not Public.

(b) After due consideration and public input, the following has been determined by the Procurement Policy Board and the Attorney General's Office to impair governmental procurement proceedings or give an unfair advantage to any person proposing to enter into a contract or agreement with a governmental entity, and will not be disclosed by the Attorney General's Office:

(i) the names of individual scorers~~[(s)]~~ or evaluators in relation to their individual scores or rankings;

(ii) any individual scorer's~~[(s)]~~ or evaluator's notes, drafts, and working documents;

(iii) non-public financial statements; and

(iv) past performance and reference information which is not provided by the vendor and which is obtained as a result of the efforts of the Attorney General's Office. To the extent such past performance or reference information is included in the written justification statement, the justification statement is still subject to public disclosure.

(c) In regard to an Invitation for bids issued by the Attorney General's Office, the Attorney General's Office shall, on the day on which the award of a contract is announced, make available to each vendor and to the public, a notice that includes:

(i) the name of the vendor to which the contract is awarded and the price~~[(s)]~~ of the procurement item~~[(s)]~~; and

(ii) the names and the prices of each vendor to which the contract is not awarded.

R105-1-~~10~~11. Special Provisions ~~[(r)]~~Regarding Procurement of Outside Counsel.

(1) The Attorney General ~~shall~~ may not enter into a contract for outside counsel unless the requirements of this ~~[Rule]~~ Section R105-1-10 are met throughout the contract period and any extensions.

(2) The Attorney General shall review the proposed fee arrangement to hire outside counsel to ensure that there is a reasonable, good faith legal basis to pursue the litigation in the interest of the citizens of the ~~[S]~~ State.

(3) The Attorney General shall retain oversight and control over the course and conduct of the litigation or anticipated litigation.

(4) The Attorney General shall designate a member of the Attorney General's Office to personally oversee the litigation.

(5) The Attorney General shall retain veto power over any decisions made by outside counsel, and no lawsuit will be filed, or party added to or served with process in any lawsuit, by outside counsel, without express written permission of the Attorney General.

(6) The Attorney General shall be apprised of, attend, and participate in all settlement offers or conferences.

(7) Decisions regarding settlement of the case shall be made by the Attorney General and not the outside counsel, provided that the Attorney General may give outside counsel a reasonable range of specific settlement authority in writing, within which outside counsel ~~is authorized to~~ may settle the case.

(8) Written Determination regarding using a Contingency Fee Contracts. The Attorney General may not enter into a contingent fee contract with outside counsel unless the Attorney General makes a written determination that the contingent fee contract is cost-effective and in the public interest. This written determination shall:

(a) be made before or within a reasonable time after the Attorney General enters into a contingent fee contract; and

(b) include specific findings regarding:

(i) whether sufficient and appropriate legal and financial resources exist in the Attorney General's ~~[e]~~ Office to handle the legal matter that is the subject of the contingent fee contract; and

(ii) the nature of the legal matter, unless information conveyed in the findings would violate an ethical responsibility of the Attorney General or a privilege held by the state.

(9) Contingency Fee Limit. The Attorney General may not enter into a contingent fee contract with outside counsel that provides for outside counsel to receive a contingent fee, exclusive of reasonable costs and expenses, that exceeds:

- (a) 25% of the amount recovered, if the amount recovered is no more than \$10,000,000;
 - (b) 25% of the first \$10,000,000 recovered, plus 20% of the amount recovered that exceeds \$10,000,000, if the amount recovered is over \$10,000,000 but no more than \$15,000,000;
 - (c) 25% of the first \$10,000,000 recovered, plus 20% of the next \$5,000,000 recovered, plus 15% of the amount recovered that exceeds \$15,000,000, if the amount recovered is over \$15,000,000 but no more than \$20,000,000; and
 - (d) 25% of the first \$10,000,000 recovered, plus 20% of the next \$5,000,000 recovered, plus 15% of the next \$5,000,000 recovered, plus 10% of the amount recovered that exceeds \$20,000,000, if the amount recovered is over \$20,000,000; or
 - (e) \$50,000,000.
- (10) Opt-out regarding Contingency Fee Contracts.
- (a) A provision of a contingent fee contract that is inconsistent with a provision of this section is invalid unless, before the contract is executed, the contingent fee contract provision is approved by a majority of the Attorney General, state treasurer, and state auditor.
- (11) Exceptions regarding Contingency Fee Contracts:
- (a) A contingent fee under a contingent fee contract may not be based on the imposition or amount of a penalty or civil fine.
 - (b) A contingent fee under a contingent fee contract may be paid only on amounts actually recovered by the state.
 - (c) Throughout the period covered by a contingent fee contract, including any extension of the contingent fee contract:
 - (i) outside counsel that is a party to the contingent fee contract shall acknowledge that the Attorney General retains complete control over the course and conduct of the contingent fee case for which outside counsel provides legal services under the contingent fee contract;
 - (ii) the Attorney General with supervisory authority shall oversee any litigation involved in the contingent fee case;
 - (iii) the Attorney General retains final authority over any pleading or other document that outside counsel submits to court;
 - (iv) an opposing party in a contingent fee case may contact the Attorney General directly, without having to confer with outside counsel;
 - (v) the Attorney General with supervisory authority over the contingent fee case may attend all settlement conferences; and
 - (vi) the outside counsel shall acknowledge that final approval regarding settlement of the contingent fee case is reserved exclusively to the discretion of the Attorney General.
 - (d) Nothing in ~~[Rule]~~ Subsection R105-1-10(11) may be construed to limit the authority of the client regarding the course, conduct, or settlement of the contingent fee case.
- (12) Website Posting regarding Contingency Fee Contracts. Within five business days after entering into a contingent fee contract, the Attorney General shall post on the Attorney General's website:
- (a) the contingent fee contract;
 - (b) the written determination under Subsection R105-1-10[-](8) relating to that contingent fee; and
 - (c) if applicable, any written determination made under ~~[Rule]~~ Subsection R105-1-5(1)(d) relating to that contingent fee contract.
- (d) The Attorney General shall keep the contingent fee contract and written determination posted on the Attorney General's website throughout the term of the contingent fee contract.
- (13) Contingency Fee Contract Records. The outside counsel that enters into a contingent fee contract with the Attorney General shall:
- (a) from the time the contingent fee contract is entered into until three years after the contract expires, maintain detailed records relating to the legal services provided by outside counsel under the contingent fee contract, including documentation of all expenses, disbursements, charges, credits, underlying receipts and invoices, and other financial records that relate to the legal services provided by outside counsel; and
 - (b) maintain detailed contemporaneous time records for the outside counsel's attorneys and paralegals working on the contingent fee case and promptly provide the records to the Attorney General upon request.
- (14) Exemption regarding Contingency Fee Contracts. ~~[Rule]~~ Subsections R105-1-10(8) through (13) as well as ~~[Rule]~~ Subsection R105-1-11(3) do not apply to:
- (a) to a contingent fee contract in existence before May 12, 2015, or to any renewal or modification of a contingent fee contract in existence before that date;
 - (b) to a contingent fee contract with outside counsel that the Attorney General hires to collect a debt that the Attorney General is authorized by law to collect; and
 - (c) with respect to a contingent fee contract with outside counsel in a securities class action in which the state is appointed as lead plaintiff under Section 27(a)(3)(B)(i) of the Securities Act of 1933 or Section 21D(a)(3)(B)(i) of the Securities Exchange Act of 1934 or in which any state is a class representative, or in any other action in which the state is participating with one or more other states:
 - (i) apply only with respect to the state's share of any judgment, settlement amount, or common fund; and
 - (ii) do not apply to attorney fees awarded to outside counsel for representing other members of a class certified under Rule 23 of the Federal Rules of Civil Procedure or applicable state class action procedural rules.
- (15) Notwithstanding any other provision of this ~~[Rule]~~ Section R105-1-10, the solicitation for outside counsel may provide a lower fee limitation ~~and~~ or provide for weights and scoring of the proposed fees in accordance with the Utah Procurement Code, which will allow for a competitive process and may provide for fees below the limitations set forth in this ~~[R]~~ rule.

R105-1-~~11~~12. Transparency in Contingency Fee Contracts with Outside Counsel.

- (1) Except as otherwise provided by GRAMA, applicable law, Rules of Professional Conduct or this ~~[R]~~ rule, a copy of the executed contract with outside counsel shall be made available for public inspection in accordance with GRAMA.
- (2) Any payment by the Attorney General under a contingency fee contract shall be made available for public inspection in accordance with GRAMA.

NOTICES OF PROPOSED RULES

(3) After June 30 but on or before September 1 of each year, the Attorney General shall submit a written report to the president of the Senate and the ~~S~~[s]peaker of the House of Representatives describing the Attorney General's use of contingent fee contracts with outside counsel during the fiscal year that ends the immediately preceding June 30.

(a) A report under ~~Subsection~~[~~Rule~~] R105-1-11(3) shall identify:

(i) each contingent fee contract the Attorney General entered into during the fiscal year that ends the immediately preceding June 30; and

(ii) each contingent fee contract the Attorney General entered into during any earlier fiscal year if the contract remained in effect for any part of the fiscal year that ends the immediately preceding June 30.

(iii) state the name of the outside counsel that is a party to the contingent fee contract, including the name of the outside counsel's law firm if the outside counsel is an individual;

(iv) describe the nature of the legal matter that is the subject of the contingent fee contract, unless describing the nature of the legal matter would violate an ethical responsibility of the Attorney General or a privilege held by the state;

(v) identify the state agency which the outside counsel was engaged to represent or counsel;

(vi) state the total amount of attorney fees approved by the Attorney General for payment to an outside counsel for legal services under a contingent fee contract during the fiscal year that ends the immediately preceding June 30; and

(vii) be accompanied by each written determination under ~~Subsection~~ R105-1-10(8) and [~~Rule~~]Subsection R105-1-5(1)(d) made during the fiscal year that ends the immediately preceding June 30.

R105-1-~~12~~13. Contracts.

Those awarded a contract under this ~~r~~[~~R~~]ule shall be required to enter into a written contract with the Attorney General. The written contract shall contain all material terms set forth in:

(1) The final procurement documents issued by the Utah Attorney General;

(2) The provisions in documents submitted by the provider to the extent such provisions are accepted by the Attorney General;

(3) A termination for cause and a termination for convenience clause; and

(4) Any terms required by law, whether by the constitutions, statutes, or rules or regulations of the United States or the State of Utah.

(5) Nothing in this ~~r~~[~~R~~]ule regarding ~~[contingency]~~Contingency ~~[fee]~~Fee ~~[contracts]~~Contracts may be construed to expand the authority of a state department, division, or other agency to enter into a contract if that authority does not otherwise exist.

R105-1-~~13~~14. Retention and Non-availability of Files.

(1) All proposals submitted to the Attorney General under this rule become the property of the ~~[State of Utah]~~state and the ~~[e]~~Office of the Attorney General.

(2) All information in all proposals shall be placed in a file relating to the project for which the proposal was submitted. Each file shall contain:

(a) If applicable, a copy of all written determinations of the Attorney General required by the Utah Procurement Code or this ~~[Rule]~~rule;

(b) A copy of the procurement documents and any written documentation related to notification requirements; and

(c) All responses to procurements and modifications, in writing, to any procurement if those modifications have been negotiated by the Attorney General.

(d) All records shall be maintained or disposed of in accordance with Part 20 of the Utah Procurement Code.

KEY: Attorney General, litigation support, outside counsel, expert witnesses

Date of Last Change: ~~January 20, 2017~~2026

Notice of Continuation: August 4, 2022

Authorizing, and Implemented or Interpreted Law: Art VII Sec 16; 67-5; 63G-6

NOTICE OF SUBSTANTIVE CHANGE

TYPE OF FILING: New

Rule or section number:

R305-7

Filing ID: 57853

Agency Information

1. Title catchline:	Environmental Quality, Administration
Building:	Multi-Agency State Office Building
Street address:	195 N 1950 W, DEQ 4th floor
City, state:	Salt Lake City, UT
Mailing address:	PO Box 144870
City, state and zip:	Salt Lake City, UT 84114-4870

Contact persons:		
Name:	Phone:	Email:
Ashley Sumner	801-856-5683	ssumner@utah.gov
Sarah Ward	385-332-9574	sarahward@utah.gov
Please address questions regarding information on this notice to the persons listed above.		

General Information

2. Rule or section catchline:	
R305-7. Extraordinary Enforcement Expenses	
3. Are any changes in this filing because of state legislative action?	Changes are because of legislative action.
If yes, any bill number and session:	SB 172 (2025 General Session)
4. Purpose of the new rule or reason for the change:	
SB 172, passed in the 2025 General Session, directed the Department of Environmental Quality (department) to make rules defining, "a qualifying environmental enforcement activity" and "a qualifying extraordinary expense."	
5. Summary of the new rule or change:	
This rule provides definitions and other requirements that govern the department's reimbursement of extraordinary enforcement expenses incurred by the department, local health departments, and other local governments from civil penalties collected under the authority of Title 19.	

Fiscal Information

6. Provide an estimate and written explanation of the aggregate anticipated cost or savings to:	
A. State budget:	
<p>This rule will not generate new funds, rather it creates the conditions for the department to reimburse itself, local health departments, or a local government for the cost of enforcement under Title 19 that goes beyond the scope of ordinary enforcement expenses. The reimbursement and spending authority will come from funds deposited into the General Fund by the department as the result of qualifying civil penalties or criminal fines recovered by the department per Subsection 19-1-303(5).</p> <p>However, the fiscal impact is inestimable, as the information required to conduct a fiscal analysis does not yet exist. Qualifying extraordinary expenses were not defined prior to the drafting of this rule, and therefore, the department has not been tracking qualifying extraordinary expenditures.</p>	
B. Local governments:	
<p>This rule may have a beneficial fiscal impact if a local government seeks reimbursement of extraordinary expenditures through this rule. However, the exact fiscal impact is inestimable as the information required to conduct a fiscal analysis does not yet exist. Qualifying extraordinary expenses were not defined prior to the drafting of this rule, and therefore, the department has not been tracking qualifying extraordinary expenditures.</p> <p>In addition, this rule will not generate new funds, rather it creates the conditions for the department to reimburse itself, local health departments, or a local government for the cost of enforcement that goes beyond the scope of ordinary enforcement expenses. The reimbursement and spending authority will come from funds deposited into the General Fund by the department as the result of qualifying civil penalties or criminal fines recovered by the department per Subsection 19-1-303(5).</p>	
C. Small businesses ("small business" means a business employing 1-49 persons):	
This rule is not expected to have any impact on small businesses' revenues or expenditures because businesses are not subject to this rule.	
D. Non-small businesses ("non-small business" means a business employing 50 or more persons):	
This rule is not expected to have any impact on non-small businesses' revenues or expenditures because businesses are not subject to 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 rule is not expected to have any impact on revenues or expenditures on persons other than state and local government entities, as only state and local government entities are subject to this rule.

F. Compliance costs for affected persons:

There will not be a cost for an entity to adhere to this rule or changes. Requesting reimbursement under this rule is voluntary for any entity, and both ordinary and extraordinary enforcement activities are already conducted by the department, local health departments, and other local governments.

G. Regulatory Impact Summary Table (This table includes only fiscal impacts the agency was able to measure. If the agency could not estimate an impact, it is excluded from this table but described in boxes A through F.)

Regulatory Impact Summary Table					
Fiscal Cost	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
Total Fiscal Cost	\$0	\$0	\$0	\$0	\$0
Fiscal Benefits	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
Total Fiscal Benefits	\$0	\$0	\$0	\$0	\$0
Net Fiscal Benefits	\$0	\$0	\$0	\$0	\$0

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

The Executive Director of the Department of Environmental Quality, Tim Davis, has reviewed and approved this regulatory impact analysis.

Citation Information

7. 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:

Subsection 19-1-303(5)(d)

Public Notice Information

9. The public may submit written or oral comments to the agency identified in box 1.

A. Comments will be accepted until: 05/15/2026

10. This rule change MAY become effective on: 05/22/2026

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

Agency head or designee and title: Ashley Sumner, Deputy Director **Date:** 03/13/2026

R305. Environmental Quality, Administration.**R305-7. Administrative Procedures.****R305-7-701. Extraordinary Enforcement Expenses.**

(1) This rule provides definitions and other requirements that govern the department's reimbursement of extraordinary enforcement expenses incurred by the department, local health departments, and other local governments from civil penalties collected under the authority of Title 19, Environmental Quality Code.

(2) The executive director or division directors, as the case may be, may delegate responsibilities under Title 19, Part 7, Administrative Procedures, to appropriate persons employed by the department.

R305-7-702. Definitions.

As used in this rule, the following terms shall have the following meanings:

(1) "Cost of enforcement" means the actual, reasonable cost of a qualifying enforcement activity, including costs of investigation, sampling, monitoring, and related enforcement activities incurred under the authority of Title 19, Environmental Quality Code.

(2) "Extraordinary enforcement expenses" means any cost of enforcement incurred by the department or a local government that goes beyond the scope of ordinary enforcement expenses.

(3) "Local government" means local health departments or other local governments authorized to engage in enforcement activities under the authority of Title 19, Environmental Quality Code.

(4) "Ordinary enforcement expenses" means costs of enforcement related to routine, planned compliance inspections and similar ordinary enforcement activities.

(5) "Qualifying enforcement action" means an enforcement activity that results in the incurrence of extraordinary enforcement expenses.

(6) "Qualifying penalty" means civil, administrative, and other penalties, including civil fines, collected under the authority of chapters in Title 19, Environmental Quality Code, requiring that such penalties be deposited into the General Fund.

R305-7-703. Initiation of Qualifying Enforcement Actions by the Department; Documentation.

(1) Division directors shall be responsible for determinations whether an enforcement activity meets the definition of or is reasonably expected to meet the definition of a qualifying enforcement action, subject to department oversight.

(2) For each qualifying enforcement action, division directors shall maintain records that are adequate to document and calculate costs of enforcement.

(3) Records documenting costs of enforcement for matters resulting in reimbursement of extraordinary enforcement expenses shall be maintained by division directors in accordance with approved retention schedules.

(4) For each enforcement action for which the department or division director has received notice from a local government in accordance with Subsection R305-7-704(2), the department or division director shall keep the local government apprised of the status of the enforcement matter, including whether the department intends to seek to impose or settle a qualifying penalty.

R305-7-704. Initiation of Qualifying Enforcement Actions by Local Governments; Documentation; State Fiscal Year Due Date.

(1) If a local government determines that an enforcement activity under the authority of Title 19, Environmental Quality Code, qualifies as or is reasonably expected to meet the definition of a qualifying enforcement action for which the local government intends to seek reimbursement from the department, the local government shall provide reasonable notice to the department of its determination and intent. Notice to a division director is considered to be notice to the department.

(2) For each qualifying enforcement action, the local government shall maintain records that are adequate to document and calculate the local government's cost of enforcement. Cost of enforcement shall be attributable to the specific qualifying enforcement action.

(3) Records documenting cost of enforcement for matters resulting in reimbursement of extraordinary enforcement expenses shall be maintained by the local government in accordance with approved retention schedules.

(4) Local governments shall submit claims for extraordinary enforcement expenses in a timely manner, as such expenses are incurred. All claims for reimbursement for extraordinary enforcement expenses incurred during a state fiscal year shall be submitted to the department on or before July 15th of the new fiscal year. A local government's failure to comply with this deadline shall operate as a waiver as to such claims.

R305-7-705. Reimbursement of Local Government Extraordinary Enforcement Expenses; Allocation.

(1) To obtain reimbursement of its extraordinary enforcement expenses from a qualifying penalty, the local government shall provide a reimbursement request to the department. The reimbursement request shall include the following:

(a) Documentation of the local government's notice to the department pursuant to Subsection R305-7-704(1);

(b) Documentation that the department requested the local government to engage in the qualifying enforcement action, which may include a standing request; and

(c) Documentation and supporting records that are adequate to calculate and justify the extraordinary enforcement expenses for which reimbursement is sought, including the basis for billing rates for staff time.

(2) A request for reimbursement under Subsection (1) shall be made within a reasonable time after the local government's incurrence of extraordinary enforcement expenses.

(3) In response to a request for reimbursement under Subsection (1), the department may request that the local government provide additional information, documentation, or other justification supporting its request.

NOTICES OF PROPOSED RULES

(4) Not more than 60 days following receipt of a request for reimbursement under Subsection (1), the department shall reimburse extraordinary enforcement expenses claimed by the local government that the department finds, in the department's sole discretion, qualify for reimbursement.

(5) If the department determines that costs claimed by the local government do not qualify as extraordinary enforcement expenses, the department shall provide the local government with notice of the department's determination. The local government may dispute the department's determination in accordance with Section R305-7-706.

(6) The reimbursement of extraordinary enforcement expenses shall be limited by the availability of funding through qualifying penalties recovered by the department and the timeliness of requests for reimbursement.

R305-7-706. Dispute Resolution.

If a local government disagrees with a determination by the department respecting the reimbursement of the local government's extraordinary enforcement expenses, the local government may provide the executive director with written notice of the objections within 30 days of the date of the determination. The executive director may compromise and settle any objections made by a local government. The executive director's determination of any objection shall constitute a final and unappealable action involving the disposition of state funds under Subsection 63G-4-102(2)(g).

KEY: administrative law, enforcement expenses

Date of Last Change: 2026

Authorizing, and Implemented or Interpreted Law: 19-1-303(5)(d)

NOTICE OF SUBSTANTIVE CHANGE		
TYPE OF FILING: Amendment		
Rule or section number:	R307-110-11	Filing ID: 57881

Agency Information

1. Title catchline:	Environmental Quality, Air Quality	
Building:	Multi-Agency State Office Building	
Street address:	195 N 1950 W	
City, state:	Salt Lake City, UT	
Mailing address:	PO Box 144820	
City, state and zip:	Salt Lake City, UT 84114-4820	
Contact persons:		
Name:	Phone:	Email:
Tasnuva Islam	801-536-0076	tislam@utah.gov
Jazmine Lopez	801-536-4050	jazminelopez@utah.gov
Please address questions regarding information on this notice to the persons listed above.		

General Information

2. Rule or section catchline:
R307-110-11. Section IX, Control Measures for Area and Point Sources, Part B, Sulfur Dioxide
4. Purpose of the new rule or reason for the change:
The Utah Air Quality Board has proposed for public comment amendments to Utah State Implementation Plan (SIP), Section IX, Part B. The amendments to the SIP add plans that demonstrate maintenance of all three 1971 SO2 National Ambient Air Quality Standards (NAAQS) through the year 2040 for the Salt Lake County Nonattainment Area (SLC NAA) and Tooele County Nonattainment Area (TC NAA).
Section R307-110-11 incorporates Section IX, Part B into this rule, and must be amended to change the Board adoption date to the anticipated date of the amended plan.
5. Summary of the new rule or change:
This rule amendment incorporates a SIP revision establishing maintenance plans for the 1971 SO2 NAAQS for the SLC NAA and the TC NAA. The maintenance plans demonstrate continued attainment of the standard in the applicable area and fulfil the

requirements of Section 175A of the Clean Air Act. If the EPA approves the plans, the nonattainment areas will be redesignated to attainment status.

Section R307-110-11 Section IX, Control Measures for Area and Point Sources, Part B, Sulfur Dioxide is being amended to change the Board adoption date to the anticipated date of the amended plan.

Fiscal Information

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

A. State budget:

This amendment is not expected to have any fiscal impact on the state budget because the plan being incorporated into the rule shows how already existing regulations have led to attainment of the 1971 SO2 air quality standards.

This amendment does not alter current regulations or practices.

B. Local governments:

This amendment is not expected to have any fiscal impact on local governments because this amendment does not apply to local governments.

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

This amendment is not expected to have any fiscal impact on small businesses because this amendment does not apply to small businesses.

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

This amendment is not expected to have any fiscal impact on non-small businesses because this amendment does not apply to non-small businesses.

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 amendment is not expected to have any fiscal impact on persons other than small businesses, non-small businesses, state, or local government entities because this amendment does not apply to persons other than small businesses, non-small businesses, state, or local government entities.

F. Compliance costs for affected persons:

This amendment will not have compliance costs for affected persons because the plan being incorporated into the rule shows how already existing regulations have led to attainment of the 1971 SO2 air quality standards.

This amendment does not alter current regulations or practices.

G. Regulatory Impact Summary Table (This table includes only fiscal impacts the agency was able to measure. If the agency could not estimate an impact, it is excluded from this table but described in boxes A through F.)

Regulatory Impact Summary Table					
Fiscal Cost	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
Total Fiscal Cost	\$0	\$0	\$0	\$0	\$0
Fiscal Benefits	FY2026	FY2027	FY2028	FY2029	FY2030

NOTICES OF PROPOSED RULES

State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
Total Fiscal Benefits	\$0	\$0	\$0	\$0	\$0
Net Fiscal Benefits	\$0	\$0	\$0	\$0	\$0

H. Department head comments on fiscal impact and approval of regulatory impact analysis:
 The Executive Director of the Department of Environmental Quality, Tim Davis, has reviewed and approved this regulatory impact analysis.

Citation Information

7. 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 19-2-104	42 U.S.C. 85, Part D, Section 7505a
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Incorporation by Reference Information

8. Incorporation by Reference:

A. This rule adds or updates the following title of material incorporated by reference (a copy of the material incorporated by reference must be submitted to the Office of Administrative Rules. *If none, leave blank*):

Official Title of Materials Incorporated (from title page)	Utah State Implementation Plan Section IX, Control Measures for Area and Point Sources, Part B, Sulfur Dioxide.
Publisher	Division of Air Quality (DAQ), Utah Department of Environmental Quality
Issue Date	July 1, 2026

Public Notice Information

9. The public may submit written or oral comments to the agency identified in box 1.

A. Comments will be accepted until:	05/15/2026	
B. A public hearing (optional) will be held (The public may request a hearing by submitting a written request to the agency, as outlined in Section 63G-3-302 and Rule R15-1.):		
Date:	Time:	Place (physical address or URL):
05/05/2026	03:00 PM - 04:00 PM	<p>A public hearing is set for 05/05/2026.</p> <p>Further details may be found below. The hearing will be cancelled should no request for one be made by 05/01/2026, at 10 AM MT. The final status of the public hearing will be posted on 05/01/2026, after 10 AM MT. The status of the public hearing may be checked at the following website location under the corresponding rule. https://deq.utah.gov/public-notices-archive/air-quality-rule-plan-changes-open-public-comment</p> <p>Interested Persons can participate in person or electronically, via the internet. In Person: MASOB 195 N 1950 W, Salt Lake City, UT First Floor, Air Quality Board Room</p>

		Virtual Attendance: Time zone: America/Denver Google Meet joining info: Video call link: https://meet.google.com/amj-xjne-yqq Or dial: (US) +1 406-616-2412 PIN: 335 196 879#
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10. This rule change MAY become effective on:	07/01/2026
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

Agency head or designee and title:	Bryce C. Bird, Director, DAQ	Date:	03/12/2026
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R307. Environmental Quality, Air Quality.

R307-110. General Requirements: State Implementation Plan.

R307-110-11. Section IX, Control Measures for Area and Point Sources, Part B, Sulfur Dioxide.

The Utah State Implementation Plan, Section IX, Control Measures for Area and Point Sources, Part B, Sulfur Dioxide, as most recently amended by the Utah Air Quality Board on ~~January 5, 2005~~ July 1, 2026, pursuant to Section 19-2-104, is ~~hereby~~ incorporated by reference and made a part of ~~these rules~~ Rule R307-110.

KEY: air pollution, PM10, PM2.5, ozone

Date of Last Change: ~~July 2, 2025~~ 2026

Notice of Continuation: December 1, 2021

Authorizing, and Implemented or Interpreted Law: 19-2-104

NOTICE OF SUBSTANTIVE CHANGE

TYPE OF FILING: Amendment		
Rule or section number:	R307-110-13	Filing ID: 57882

Agency Information

1. Title catchline:	Environmental Quality, Air Quality	
Building:	Multi-Agency State Office Building	
Street address:	195 N 1950 W	
City, state:	Salt Lake City, UT	
Mailing address:	PO Box 144820	
City, state and zip:	Salt Lake City, UT 84114-4820	
Contact persons:		
Name:	Phone:	Email:
Sheila Vance	801-518-3132	svance@utah.gov
Jazmine Lopez	801-536-4050	jazminelopez@utah.gov

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

General Information

2. Rule or section catchline:	R307-110-13. Section IX, Control Measures for Area and Point Sources, Part D, Ozone
4. Purpose of the new rule or reason for the change:	
The State of Utah is required to submit periodic emission inventories for marginal ozone nonattainment areas to the Environmental Protection Agency as part of the Clean Air Act (CAA) requirements (Section 182(a)(3)(A)).	

The first periodic emission inventory for the Uinta Basin nonattainment area (NAA) was completed and submitted for the year 2017.

This amendment incorporates the periodic inventories for the years 2020 and 2023 into Utah's State Implementation Plan (SIP) and as such the Division of Air Quality (DAQ) are proposing to amend Section R307-110-13 Section IX, Control Measures for Area and Point Sources, Part D, Ozone to change the Board adoption date to the anticipated date of the amended plan.

5. Summary of the new rule or change:

This proposed rule amendment incorporates the required periodic emission inventory reports for the years 2020 and 2023 for the Uinta Basin NAA into the Utah SIP as required by the CAA. Pursuant to Section 182(a)(3) of the CAA, this inventory includes a comprehensive accounting of actual VOC and NOX emissions from the following source categories: point, area, on-road mobile, non-road mobile, and oil and gas sources.

Section R307-110-13, Section IX, Control Measures for Area and Point Sources, Part D, Ozone is being amended to change the Board adoption date to the anticipated date of the amended plan.

Fiscal Information

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

A. State budget:

This rule change does not have any impact on the state budget as the change reflects work already completed by the DAQ as part of staff's required workload.

This rule change does not alter current regulations or practices.

B. Local governments:

This rule change does not have any impact on local government budgets as this rule requires no action by local governments.

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

This rule change does not have any impact on small businesses as this rule requires no action by small businesses.

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

This rule change does not have any impact on non-small businesses as this rule requires no action by non-small businesses.

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 does not impact persons other than small businesses, non-small businesses, state or local government entities as this rule requires no action by persons other than small businesses, non-small businesses, state or local government entities.

F. Compliance costs for affected persons:

There are no compliance costs associated with this rule change, the change is editorial to incorporate already prepared reports into the SIP.

This rule change does not alter current regulations or practices.

G. Regulatory Impact Summary Table (This table includes only fiscal impacts the agency was able to measure. If the agency could not estimate an impact, it is excluded from this table but described in boxes A through F.)

Regulatory Impact Summary Table					
Fiscal Cost	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0

Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
Total Fiscal Cost	\$0	\$0	\$0	\$0	\$0
Fiscal Benefits	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
Total Fiscal Benefits	\$0	\$0	\$0	\$0	\$0
Net Fiscal Benefits	\$0	\$0	\$0	\$0	\$0

H. Department head comments on fiscal impact and approval of regulatory impact analysis:
 The Executive Director of the Department of Environmental Quality, Tim Davis, has reviewed and approved this regulatory impact analysis.

Citation Information

7. 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 19-2-104	42 U.S.C. 85, Part D, Section 7511a
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Incorporation by Reference Information

8. Incorporation by Reference:

A. This rule adds or updates the following title of material incorporated by reference (a copy of the material incorporated by reference must be submitted to the Office of Administrative Rules. *If none, leave blank*):

Official Title of Materials Incorporated (from title page)	Utah State Implementation Plan Section IX, Control Measures for Area and Point Sources, Part D, Ozone.
Publisher	Division of Air Quality, Utah Department of Environmental Quality
Issue Date	July 1, 2026

Public Notice Information

9. The public may submit written or oral comments to the agency identified in box 1.

A. Comments will be accepted until: 05/15/2026

B. A public hearing (optional) will be held (The public may request a hearing by submitting a written request to the agency, as outlined in Section 63G-3-302 and Rule R15-1.):

Date:	Time:	Place (physical address or URL):
05/13/2026	02:00PM - 03:00PM	A public hearing is set for 05/13/2026. Further details may be found below. The hearing will be cancelled should no request for one be made by 05/11/2026, at 10 AM MT. The final status of the public hearing will be posted on 05/11/2026, after 10 AM MT. The status of the public hearing may be checked at the following website location under the corresponding rule. https://deq.utah.gov/public-notices-archive/air-quality-rule-plan-changes-open-public-comment

		Interested Persons can participate in person or electronically, via the internet. In Person: MASOB 195 N 1950 W, Salt Lake City, UT First Floor, Air Quality Board Room Virtual Attendance: Time zone: America/Denver Google Meet joining info: Video call link: https://meet.google.com/brq-boro-amh Or dial: (US) +1 470-222-7694 PIN: 642 227 764#
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10. This rule change MAY become effective on:	07/01/2026
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

Agency head or designee and title:	Bryce C. Bird, Director, DAQ	Date:	03/10/2026
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R307. Environmental Quality, Air Quality.

R307-110. General Requirements: State Implementation Plan.

R307-110-13. Section IX, Control Measures for Area and Point Sources, Part D, Ozone.

The Utah State Implementation Plan, Section IX, Control Measures for Area and Point Sources, Part D, Ozone, as most recently amended by the Utah Air Quality Board on ~~November 6, 2024~~ July 1, 2026, pursuant to Section 19-2-104, is incorporated by reference and made a part of Rule R307-110.

KEY: air pollution, PM10, PM2.5, ozone

Date of Last Change: ~~July 2, 2025~~ 2026

Notice of Continuation: December 1, 2021

Authorizing, and Implemented or Interpreted Law: 19-2-104

NOTICE OF SUBSTANTIVE CHANGE

TYPE OF FILING: Amendment		
Rule or section number:	R307-110-17	Filing ID: 57883

Agency Information

1. Title catchline:	Environmental Quality, Air Quality	
Building:	Multi-Agency State Office Building	
Street address:	195 N 1950 W	
City, state:	Salt Lake City, UT	
Mailing address:	PO Box 144820	
City, state and zip:	Salt Lake City, UT 84114-4820	
Contact persons:		
Name:	Phone:	Email:
Jazmine Lopez	801-536-4050	jazminelopez@utah.gov
Ana Williams	385-306-6505	anawilliams@utah.gov
Please address questions regarding information on this notice to the persons listed above.		

General Information

2. Rule or section catchline:

R307-110-17. Section IX, Control Measures for Area and Point Sources, Part H, Emission Limits

4. Purpose of the new rule or reason for the change:

The Utah Air Quality Board has proposed for public comment amendments to the Utah State Implementation Plan (SIP), amending Subsections IX.H.12 and IX.H.13 Source-Specific Emission Limitations to comply with source requests for emission limitation changes.

Section R307-110-17 incorporates SIP Section IX, Control Measures for Area and Point Sources, Part H, Emission Limits into this rule, and shall be amended to change the Board adoption date to the anticipated adoption date of the amended plan.

5. Summary of the new rule or change:

This rule amendment is in response to source requests to change emission limitations after US EPA approval of the Utah PM2.5 nonattainment redesignation.

The following plan amendments are being proposed: 1) increase the emission limitation for one source under Subsection IX.H.12 Source-Specific Emission Limitations; 2) increase the emission limitation for one source under Subsection IX.H.13 Source-Specific Emission Limitations; or 3) remove requirements for five minor sources under Subsection IX.H.13 Source-Specific Emission Limitations that do not need to be included in the state requirements due to minor source status.

The plan also includes a 110(I), or anti-backsliding, demonstration to show that the relaxation of requirements will not interfere with continued attainment or maintenance of National Ambient Air Quality Standards, and quantitatively or qualitatively show that it has a negligible air quality impact.

Fiscal Information

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

A. State budget:

This rule amendment is not expected to create additional costs or savings for the state government.

These facilities are already permitted and inspected under existing rules and have existing compliance requirements in place.

B. Local governments:

This rule amendment is not expected to impact local governments; therefore, no costs or savings are anticipated.

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

This rule amendment is not expected to impact small businesses; therefore, no costs or savings are anticipated.

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

This rule amendment is not expected to create additional costs or savings for seven non-small businesses.

The increased emission limitations for two non-small businesses (HF Sinclair Woods Cross Refinery and McWane Ductile) will not fundamentally change how those businesses operate or are inspected because all existing requirements will stay the same for these two sources.

The removal of the five non-small businesses (Brigham Young University: Main Campus, Geneva Nitrogen Inc.: Geneva Nitrogen Plant, Payson City Corporation: Payson City Power, Provo City Power: Power Plant, and Springville City Corporation: Whitehead Power Plant) from Subsection IX.H.13 will not change existing minor source permitting requirements or compliance requirements, and therefore all existing requirements will stay the same for these five sources.

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 amendment does not apply to persons other than small business, non-small businesses, state, or local government entities; therefore, no additional costs are expected as a result of these changes.

F. Compliance costs for affected persons:

There are no additional compliance costs expected for the seven non-small businesses because all existing compliance requirements will stay the same for these sources.

G. Regulatory Impact Summary Table (This table includes only fiscal impacts the agency was able to measure. If the agency could not estimate an impact, it is excluded from this table but described in boxes A through F.)

Regulatory Impact Summary Table					
Fiscal Cost	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
Total Fiscal Cost	\$0	\$0	\$0	\$0	\$0
Fiscal Benefits	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
Total Fiscal Benefits	\$0	\$0	\$0	\$0	\$0
Net Fiscal Benefits	\$0	\$0	\$0	\$0	\$0

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

The Executive Director of the Department of Environmental Quality, Tim Davis, has reviewed and approved this regulatory impact analysis.

Citation Information

7. 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 19-2-104	40 CFR 51, Subpart Z
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Incorporation by Reference Information

8. Incorporation by Reference:

A. This rule adds or updates the following title of material incorporated by reference (a copy of the material incorporated by reference must be submitted to the Office of Administrative Rules. *If none, leave blank*):

Official Title of Materials Incorporated (from title page)	Utah State Implementation Plan, Section IX, Control Measures for Area and Point Sources, Part H, Emission Limits and Operating Practices.
Publisher	Division of Air Quality (DAQ), Utah Department of Environmental Quality
Issue Date	July 1, 2026

Public Notice Information

9. The public may submit written or oral comments to the agency identified in box 1.

A. Comments will be accepted until:	05/15/2026
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B. A public hearing (optional) will be held (The public may request a hearing by submitting a written request to the agency, as outlined in Section 63G-3-302 and Rule R15-1.):

Date:	Time:	Place (physical address or URL):
05/12/2026	03:00 PM - 04:00 PM	<p>A public hearing is set for 05/12/2026.</p> <p>Further details may be found below. The hearing will be cancelled should no request for one be made by 05/11/2026, at 10 AM MT. The final status of the public hearing will be posted on 05/11/2026, after 10 AM MT. The status of the public hearing may be checked at the following website location under the corresponding rule. https://deq.utah.gov/public-notice-archive/air-quality-rule-plan-changes-open-public-comment</p> <p>Interested Persons can participate in person or electronically, via the internet. In Person: MASOB 195 N 1950 W, Salt Lake City, UT First Floor, Air Quality Board Room</p> <p>Virtual Attendance: Time zone: America/Denver Google Meet joining info: Video call link: https://meet.google.com/tvd-adeq-xry Or dial: (US) +1 402-307-1278 PIN: 367 842 220#</p>

10. This rule change MAY become effective on:	07/01/2026
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

Agency head or designee and title:	Bryce C. Bird, Director, DAQ	Date:	03/13/2026
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R307. Environmental Quality, Air Quality.

R307-110. General Requirements: State Implementation Plan.

R307-110-17. Section IX, Control Measures for Area and Point Sources, Part H, Emission Limits.

The Utah State Implementation Plan, Section IX, Control Measures for Area and Point Sources, Part H, Emission Limits and Operating Practices, as most recently amended by the Utah Air Quality Board on ~~May 7, 2025~~ July 1, 2026, pursuant to Section 19-2-104, is incorporated by reference and made a part of Rule R307-110.

KEY: air pollution, PM10, PM2.5, ozone

Date of Last Change: ~~July 2, 2025~~ 2026

Notice of Continuation: December 1, 2021

Authorizing, and Implemented or Interpreted Law: 19-2-104

NOTICE OF SUBSTANTIVE CHANGE

TYPE OF FILING: Amendment		
Rule or section number:	R380-350	Filing ID: 57873

Agency Information

1. Title catchline:	Health and Human Services, Administration	
Building:	Multi-Agency State Office Building	
Street address:	195 N 1950 W	
City, state:	Salt Lake City, UT	
Mailing address:	PO Box 142003	
City, state and zip:	Salt Lake City, UT 84114-2003	
Contact persons:		
Name:	Phone:	Email:
Breck Trawick	801-879-1546	btrawick1@utah.gov
Dulce Diez	801-703-0064	ddiez@utah.gov
Please address questions regarding information on this notice to the persons listed above.		

General Information

2. Rule or section catchline:
R380-350. Community Health Worker Certification
4. Purpose of the new rule or reason for the change:
Based on Department of Health and Human Services (department) discussions with stakeholders, it was determined that this rule amendment should be made to temporarily extend the recertification period from two years to three years for all community health worker certifications issued from 12/01/2023 through 12/31/2027.
This extension allows for the standardization of Continuing Education Unit (CEU) requirements and the implementation of administrative recertification infrastructure. Once that appropriate administrative recertification infrastructure is in place, it is anticipated that, beginning 01/01/2028, the recertification interval for all newly issued community health worker state certifications will revert to two years.
5. Summary of the new rule or change:
This amendment updates language to clarify that mandatory CEU requirements must be completed within each recertification cycle.
Additionally, it updates the recertification cycle for community health worker recertification to be three years from the original expiration date if the original certification is issued before 01/01/2028. Original certifications made on or after 01/01/2028, will remain on a recertification cycle of two years.

Fiscal Information

6. Provide an estimate and written explanation of the aggregate anticipated cost or savings to:
A. State budget:
This proposed amendment is not expected to have a fiscal impact on the state budget because the department already supports the recertification process for community health workers.
While this change alters the timing for some certifications, it does not alter the process the department uses to recertify community health workers affected by the temporary three-year recertification cycle and is therefore not anticipated to have a fiscal impact.
B. Local governments:
This proposed amendment is not anticipated to have fiscal impact on local governments as it does not apply to local governments.
C. Small businesses ("small business" means a business employing 1-49 persons):
This proposed amendment is not anticipated to have fiscal impact on small businesses as it does not apply to small business.

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

This proposed amendment is not anticipated to have fiscal impact on non-small businesses as it does not apply to non-small business.

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 proposed amendment is not anticipated to have a fiscal impact on other persons, identified as certified community health workers whose recertification cycle will be three years instead of two as a result of this amendment.

This amendment does not modify, introduce, or remove processes, fee rates, or requirements related to a potential cost or savings for community health workers.

This amendment does not alter the process that any community health workers would follow or use for recertification and is therefore, not anticipated to have a fiscal impact.

F. Compliance costs for affected persons:

This proposed amendment is not anticipated to have a compliance cost for affected persons, identified as the department and certified community health workers.

A community health worker seeking to recertify will not incur a cost to adhere to this change because there is no change to the criteria or the cost of certification or recertification.

The department is not anticipated to see a compliance cost, as this filing does not alter the process the department uses to recertify the community health workers affected by the temporary three-year recertification cycle.

G. Regulatory Impact Summary Table (This table includes only fiscal impacts the agency was able to measure. If the agency could not estimate an impact, it is excluded from this table but described in boxes A through F.)

Regulatory Impact Summary Table					
Fiscal Cost	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
Total Fiscal Cost	\$0	\$0	\$0	\$0	\$0
Fiscal Benefits	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
Total Fiscal Benefits	\$0	\$0	\$0	\$0	\$0
Net Fiscal Benefits	\$0	\$0	\$0	\$0	\$0

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 S. Gruber, has reviewed and approved this regulatory impact analysis.

Citation Information

7. 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-2-502	
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Public Notice Information

9. The public may submit written or oral comments to the agency identified in box 1.

A. Comments will be accepted until: 05/15/2026

10. This rule change MAY become effective on: 05/22/2026

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

Agency head or designee and title:	Tracy S. Gruber, Executive Director	Date:	03/26/2026
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R380. Health and Human Services, Administration.

R380-350. Community Health Worker Certification.

R380-350-1. Authority and Purpose.

- (1) Sections 26B-1-202 and 26B-2-502 authorize this rule.
- (2) This rule establishes the state certification standards for community health workers by:
 - (a) defining the 300 hours of community involvement;
 - (b) establishing a procedure to notify each state certified community health worker when the certification is due for renewal;
 - (c) establishing a renewal process for the certification;
 - (d) establishing continuing education requirements; and
 - (e) establishing standards of professional conduct.

R380-350-2. Definitions.

- (1) "Applicant" means an individual applying to be a state certified community health worker.
- (2) "Capacity building" has the same meaning as provided in Section 26B-2-501.
- (3) "Community health worker" has the same meaning as provided in Section 26B-2-501.
- (4) "Core-skill education" has the same meaning as provided in Section 26B-2-501.
- (5) "Core-skill training" has the same meaning as provided in Section 26B-2-501.
- (6) "Department" means the Utah Department of Health and Human Services.
- (7) "State certified" has the same meaning as provided in Section 26B-2-501.

R380-350-3. Community Involvement.

- (1) A community health worker seeking to become a state certified community health worker shall complete:
 - (a) 90 hours of core-skill training; and
 - (b) 300 hours of community involvement.
- (2)(a) The applicant shall demonstrate completion through the submission of a portfolio to the department with the applicant's certification application.
 - (b) The portfolio shall include:
 - (i) a detailed resume or curriculum vitae;
 - (ii) a cover letter; and
 - (iii) a minimum of two of the following additional elements:
 - (A) three letters of recommendation;
 - (B) a summary sheet of research projects;
 - (C) a list and description of publications, presentations, reports, or projects authored by the applicant;
 - (D) a statement of professional experience by the applicant;
 - (E) a list of achievements and awards received by the applicant; or
 - (F) a recent performance evaluation.
 - (c) The portfolio shall demonstrate:
 - (i) the setting of the experience, including:
 - (A) churches;
 - (B) schools;
 - (C) community organizations;
 - (D) neighborhoods;
 - (E) clinics;
 - (F) health centers; or
 - (H) work in the public sector;
 - (ii) the communities or populations served, including:

- (A) low-income communities;
- (B) lesbian, gay, bisexual, transgender, queer, intersex, and asexual individuals and individuals with other sexual identities;
- (C) people experiencing homelessness;
- (D) rural communities;
- (E) individuals with chronic disease;
- (F) individuals with disabilities;
- (G) people with visual impairments;
- (H) older adults;
- (I) immigrant or refugee communities;
- (J) people without health insurance;
- (K) racial and ethnic minorities; or
- (L) individuals with complex health needs; and
- (iii) the services provided, including:
 - (A) community organizing;
 - (B) community presentations;
 - (C) community projects;
 - (D) community coalitions;
 - (E) health fairs;
 - (F) community mapping;
 - (G) community programming;
 - (H) workshops;
 - (I) resource coordination;
 - (J) outreach; and
 - (K) promotion.

(3) An applicant who has 4,000 hours or more experience as a community health worker shall:

- (a) complete an application designed by the department;
- (b) sign a statement agreeing to abide by the Code of Ethics of the Utah Community Health Workers Association (UCHWA), approved by the 2022 UCHWA board, which is incorporated by reference in this rule; and
- (c) pay the established certification fee set by the department.

R380-350-4. Notification of Expiring Certification.

(1) In accordance with Section 26B-2-507, the department shall notify each state certified community health worker through the email on file with the Office of Health Equity when the certification is due for renewal.

(2) The department shall inform state certified community health workers via email six months before their certification expires with an additional reminder one month before their certification expires.

(3) A state certified community health worker shall be responsible to ensure that a valid and current email address is provided to the department through the application portal. A state certified community health worker, or applicant, shall update their email address within 30 days of a change.

R380-350-5. Renewal Process.

(1) In accordance with Section 26B-2-507, a state certified community health worker shall file an application for recertification within six months of the printed date of expiration on their certification.

(2) The department shall issue a recertification to a community health worker if the community health worker has:

- (a) submitted an application for recertification;
- (b) paid the established renewal fee set by the department;
- (c) established current Utah residency; and
- (d) submitted proof of completion of 15 continuing education units ~~[within the past two years of the current certification period]~~ earned since the community health worker's previous certification or recertification.

(3) The applicant shall submit an application for recertification before six months after the printed expiration date on the certification certificate. The individual applicant shall resubmit an application for the community health worker certification if the certification has been expired more than six months.

(4) The department shall date the new certificate of state certification for:

- (a) three years from the original expiration date if the original certification was issued before January 1, 2028; or
- (b) two years from the original expiration date if the original certification was issued on or after January 1, 2028.

R380-350-6. Continuing Education.

(1) A state certified community health worker shall complete 15 hours of continuing education units every recertification cycle ~~[two years, or during the duration of the certification,]~~ to qualify for the renewal of the certification.

(2) One continuing education unit equals one hour of training that focuses on capacity building, an element of core-skill training, or improves the knowledge or skills of a state certified community health worker within the purview of their work.

(3) An event must be approved as a continuing education event by:

- (a) the department through the Office of Health Equity; or

NOTICES OF PROPOSED RULES

- (b) a state professional association that:
 - (i) is associated with the community health worker profession; and
 - (ii) is aligned with a national community health worker professional association.

R380-350-7. Professional Conduct.

- (1) "Unprofessional conduct" includes:
 - (a) engaging in or aiding or abetting conduct or practices that are dishonest, deceptive, or fraudulent;
 - (b) engaging in or aiding or abetting deceptive or fraudulent billing practices;
 - (c) failing to establish and maintain professional boundaries with a client or former client;
 - (d) engaging in dual or multiple relationships with a client or former client in which there is a risk of harm to the client;
 - (e) engaging in sexual activities or sexual contact with a client with or without client consent;
 - (f) engaging in or aiding or abetting sexual harassment or any conduct that is exploitive or abusive with respect to a student, trainee, employee, or colleague;
 - (g) failing to exercise professional discretion and impartial judgment required for the performance of professional activities, duties, and functions;
 - (h) failing to provide impartial, objective, and informed services, recommendations, or opinions with respect to custodial or parental rights, divorce, domestic relationships, adoptions, sanity, competency, mental health, or any other determination concerning an individual's civil or legal rights;
 - (i) exploiting a client or former client for personal gain;
 - (j) exploiting a person who has a personal relationship with a client for personal gain;
 - (k) failing to protect the confidences of other persons named or contained in the client records; and
 - (l) failing to abide by the Code of Ethics as approved by the UCHWA board.
- (2) Any violation by a state certified community health worker of the Code of Ethics as approved by the UCHWA board, unprofessional conduct, or misrepresentation of credentialing shall be reported to the department through the Office of Health Equity.
- (3) If the department, through the Office of Health Equity, finds a violation has occurred, it shall revoke the state certification.
- (4) The department may issue a fine in an amount up to \$100 in accordance with Section 26B-2-504 if an individual uses the term "state certified" in conjunction with the individual's work as a community health worker if the individual is not state certified.

R380-350-8. Application Denial.

An application shall be denied if the applicant fails to:

- (1) submit any required documentation to the state through the application portal within six months of original application submission date;
- (2) submit payment for the application fee within six months of the original application submission date; or
- (3) meet community health worker state certification requirements as outlined in this rule.

KEY: health care, community health worker

Date of Last Change: ~~December 2, 2024~~ 2026

Authorizing, and Implemented or Interpreted Law: 26B-1-202[7]; 26B-2-502

NOTICE OF SUBSTANTIVE CHANGE

TYPE OF FILING: Amendment		
Rule or section number:	R381-70	Filing ID: 57869

Agency Information

1. Title catchline:	Health and Human Services, Child Care Center Licensing	
Building:	Multi-Agency State Office Building	
Street address:	195 N 1950 W	
City, state:	Salt Lake City, UT	
Mailing address:	PO Box 142003	
City, state and zip:	Salt Lake City, UT 84114-2003	
Contact persons:		
Name:	Phone:	Email:
Kamille Sheikh	385-227-1290	kamillesheikh@utah.gov
Jada Stelmach	801-230-4296	jstelmach3@utah.gov
Mariah Noble	385-214-1150	mariahnoble@utah.gov

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

General Information

2. Rule or section catchline:

R381-70. Out-of-School-Time Child Care Programs

4. Purpose of the new rule or reason for the change:

The Office of Licensing (OL), within the Division of Licensing and Background Checks, acts as the lead regulatory authority, in partnership with the Utah Office of Child Care (OCC), to ensure oversight of health and safety requirements for any child care provider receiving a license, certification, or license-exempt status through OL.

In October 2024, the Utah OCC received conditional approval from the federal OCC for the federal fiscal year (FFY) 2025-2027 Child Care and Development Fund (CCDF) state plan. This conditional approval requires the lead regulatory partner (OL) to update the existing immunization standard to be age-appropriate for school-age children attending any child care program receiving a license, certification, or license-exempt status through OL, including in this rule.

Therefore, OL determined it is necessary to update this rule to comply with the CCDF requirement, as part of the Utah OCC state plan, for an immunization standard for school-age children attending any child care program regulated by OL.

5. Summary of the new rule or change:

This filing updates the immunization record language in Subsections R381-70-6(13) through R381-70-6(14) to comply with the CCDF requirement.

This filing also removes individual definitions for terms already defined in Rule R380-600 and updates an outdated citation.

Additionally, the filing makes style and formatting changes to align with the Rulewriting Manual for Utah and other rules under the department.

Fiscal Information

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

A. State budget:

There is no anticipated cost or savings to the state budget as a result of this filing, as the provisions in this rule are part of OL's existing process of issuing a license, certification, or license-exempt status to child care providers.

The filing clarifies language in this rule regarding documentation for immunization records for any child in the care of a provider to be in compliance with federal child care funding requirements for immunization record standards.

This filing does not add to or remove any existing licensing processes.

The Department of Health and Human Services (department) does not anticipate any fiscal impact on the state budget as a result of the style and formatting changes included in this rule amendment.

B. Local governments:

There is no anticipated fiscal impact to local governments as a result of this filing, as this filing will not add to, modify, or remove requirements for local business licensing or any other process with which local government is involved.

Currently, there are two out of school time child care programs operated by a local government.

The providers affected by this rule are regulated by the department for basic health and safety requirements. This filing does not add to or remove any existing licensing processes for local government compliance, including for providers operated by a local government.

The department does not anticipate any fiscal impact on local governments as a result of the style and formatting changes included in this rule amendment.

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

There is no anticipated cost or savings to small businesses as a result of this filing, as child care providers have already been complying with this rule's requirements as part of OL's existing process.

This filing clarifies language in this rule regarding documentation for immunization records for any child in the care of a provider to be in compliance with federal child care funding requirements for immunization record standards.

This filing does not add to or remove any existing licensing processes for small business compliance.

The department does not anticipate any fiscal impact on small businesses as a result of the style and formatting changes included in this rule amendment.

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

There is no anticipated cost or savings to non-small businesses as a result of this filing, as child care providers have already been complying with this rule's requirements as part of OL's existing process.

This filing clarifies language in this rule regarding documentation for immunization records for any child in the care of a provider to be in compliance with federal child care funding requirements for immunization record standards.

This filing does not add to or remove any existing licensing processes for non-small business compliance.

The department does not anticipate any fiscal impact on non-small businesses as a result of the style and formatting changes included in this rule amendment.

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 to other persons as a result of this rule filing, as child care providers have already been complying with this rule's requirements as part of OL's existing process.

The filing clarifies language in this rule regarding documentation for immunization records for any child in the care of a provider to be in compliance with federal child care funding requirements for immunization record standards.

This filing does not add to or remove any existing licensing processes for compliance for other persons.

The department does not anticipate any fiscal impact to persons other than small businesses, state, or local government small businesses as a result of the style and formatting changes included in this rule amendment.

F. Compliance costs for affected persons:

There are no anticipated compliance costs for affected persons, identified as child care providers and the department, as a result of this rule filing, as child care providers have already been complying with this rule's requirements as part of OL's existing process.

This filing does not add to or remove any existing licensing processes for compliance for child care providers and the department.

The filing clarifies language in this rule regarding documentation for immunization records for any child in the care of a provider to be in compliance with federal child care funding requirements for immunization record standards.

The department does not anticipate any compliance costs as a result of the style and formatting changes included in this filing.

G. Regulatory Impact Summary Table (This table includes only fiscal impacts the agency was able to measure. If the agency could not estimate an impact, it is excluded from this table but described in boxes A through F.)

Regulatory Impact Summary Table					
Fiscal Cost	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0

Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
Total Fiscal Cost	\$0	\$0	\$0	\$0	\$0
Fiscal Benefits	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
Total Fiscal Benefits	\$0	\$0	\$0	\$0	\$0
Net Fiscal Benefits	\$0	\$0	\$0	\$0	\$0

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 S. Gruber, has reviewed and approved this regulatory impact analysis.

Citation Information

7. 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-2-402

Public Notice Information

9. The public may submit written or oral comments to the agency identified in box 1.
A. Comments will be accepted until: 05/15/2026

10. This rule change MAY become effective on: 05/22/2026
 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

Agency head or designee and title:	Tracy S. Gruber, Executive Director	Date:	03/25/2026
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R381. Health and Human Services, Child Care Center Licensing.

R381-70. Out-of-School-Time Child Care Programs.

R381-70-1. Authority and Purpose.

- (1) Section 26B-2-402 authorizes this rule.
- (2) This rule establishes the foundational standards necessary to protect the health and safety of children in out-of-school-time programs and defines the general procedures and requirements to get and maintain a license.

R381-70-2. Definitions.

- (1) Definitions in this rule are found in Rule R380-600. Additionally:
- (2) "Background finding" means information in a background check ~~that~~ the Office of Background Processing (OBP) uses to determine if a covered individual is or is not eligible to be involved with child care.
- (3) "Barrier" means an enclosing structure including a fence, wall, bars, railing, or solid panel to prevent accidental or deliberate movement through or access to something.
- (4) "Body fluid" means blood, urine, feces, vomit, mucus, or saliva.
- (5) "Business day" means a day of the week the facility is open for business.
- (6) "Business hours" means the hours the facility is open for business.
- (7) "CCL" means Child Care Licensing in the Office of Licensing (OL), within the Division of Licensing and Background Checks (division), under the Department of Health and Human Services (department), ~~that~~ and is delegated with the responsibility to enforce ~~the rules under~~ Titles R381 and R430 and Rule R380-600.
- (8) "Capacity" means the maximum number of children the provider is allowed to care for at any given time.

NOTICES OF PROPOSED RULES

(~~9~~)⁸ "Caregiver" means a covered individual who protects the health and safety of children. A covered individual is a caregiver when they:

- (a) count in the caregiver-to-child ratio;
- (b) meet the physical or emotional needs of the children, including diapering, toileting, feeding, or protecting them from harm; or
- (c) supervise children.

~~(10) "Covered Individual" means the same as defined in Rule R380-600.~~

~~(11) "Department" means the Utah Department of Health and Human Services.~~

]
(~~12~~)⁹ "Designated play surface" means any:

- (a) accessible elevated surface for standing, walking, crawling, sitting or climbing; or
- (b) accessible flat surface that is at least two by two inches in size and has an angle less than 30 degrees from horizontal.

(~~13~~)¹⁰ "Director" means an individual who meets the director qualifications in this rule, and who assumes the child care program's day-to-day responsibilities for compliance with CCL rules.

~~(14) "Eligible" means the same as defined in Rule R380-600.~~

]
(~~15~~)¹¹ "Entrapment Hazard" means an opening greater than 3-1/2 by 6-1/4 inches and less than nine inches in diameter where a child's body could fit through but the child's head could not fit through, potentially causing entrapment and strangulation.

(~~16~~)¹² "Experiencing homelessness" means anyone who lacks a fixed, regular, and adequate regular nighttime residence.

(~~17~~)¹³ "Facility" means a program or the premises approved and licensed by OL to be used for child care.

(~~18~~)¹⁴ "Group" means the children who the provider assigns to one or more caregivers for their care and supervision.

(~~19~~)¹⁵ "Group size" means the total number of children in a group per room or area.

(~~20~~)¹⁶ "Guest" means an individual who is not a covered individual and is at the child care facility with the provider's permission.

(~~21~~)¹⁷ "Health care provider" means a licensed health professional, including a physician, dentist, nurse practitioner, or physician's assistant.

(~~22~~)¹⁸ "Inaccessible" means out of reach of children by being:

- (a) behind a properly secured child safety gate;
- (b) if in a bathroom, locked or secured with a safety device;
- (c) located in a cupboard or on a shelf that is at least 48 inches above the floor;
- (d) locked, including in a locked room, cupboard, or drawer; or
- (e) secured with a safety device, including a child safety cupboard lock or doorknob device.

(~~23~~)¹⁹ "Infectious disease" means an illness that is capable of being spread from one person to another.

(~~24~~)²⁰ "Involved with child care" means to do any of the following at or for an out-of-school-time program:

- (a) count in the staff-to-child ratio;
- (b) have unsupervised contact with a child in care;
- (c) own, operate, direct;
- (d) reside;
- (e) supervise or be assigned to work with children; or
- (f) volunteer.

(~~25~~)²¹ "License" means a license issued by OL to provide out-of-school-time program services.

(~~26~~)²² "Licensee" means the legally responsible person or business that holds a valid license from OL.

(~~27~~)²³ "LIS supported finding" means a supported finding of child abuse or neglect in the Licensing Information System (LIS) database for child abuse and neglect, maintained by the department.

~~(28) "OBP" means the same as defined in Rule R380-600.~~

~~(29) "OL" means the same as defined in Rule R380-600.~~

]
(~~30~~)²⁴ "Over-the-counter medication" means medication that an individual can purchase without a written prescription, including any herbal remedy, vitamin, and mineral supplement.

(~~31~~)²⁵ "Parent" means the parent or legal guardian of a child in the program.

~~(32) "Person" means the same as defined in Rule R380-600.~~

]
(~~33~~)²⁶ "Play equipment platform" means a flat surface on a piece of stationary play equipment intended for more than one child to stand on and upon which a child can move freely.

(~~34~~)²⁷ "Protective barrier" means a structure including bars, lattice, or a panel around an elevated platform intended to prevent accidental or deliberate movement through or access to something.

(~~35~~)²⁸ "Protective cushioning" means a shock-absorbing surface under and around play equipment that reduces the severity of an injury from a fall.

(~~36~~)²⁹ "Qualifying child" means a child:

- (a) who is between five and 13 years old and is the child of a person other than the provider or a staff member; and
- (b) with a disability who is between five and 18 years old and is the child of a person other than the provider or a staff member.

(~~37~~)³⁰ "Related child" means a child for whom a provider is the parent, stepparent, grandparent, step-grandparent, great-grandparent, sibling, step-sibling, aunt, step-aunt, great-aunt, uncle, step-uncle, or great-uncle.

(~~38~~)³¹ "Room" means a designated area or a physical space enclosed by solid barriers or partitions as follows:

(a) if a large room is divided into smaller rooms or areas with barriers including furniture or with half walls, the room or area is considered:

- (i) one room, if the room is divided by a solid barrier that is less than 24 inches, whether the barrier is movable or immovable;

(ii) one room, if the room is divided by a solid barrier that is between 24 and 40 inches in height and there is an opening in the barrier through which caregivers and children can move freely;

(iii) two rooms, if the room is divided by a solid barrier that is between 24 and 40 inches in height and there is no opening in the barrier through which caregivers and children can move freely, or there is an opening between the two sides but the opening is blocked including with a child safety gate, including a diaper changing station that is located behind a closed gate;

(iv) two rooms, if the room is divided by a solid barrier that is over 40 inches in height and there is no opening in the barrier through which caregivers and children can move freely, or there is an opening between the two sides but the opening is blocked including with a child safety gate; or

(v) if there is an opening through which caregivers and children can move freely and the opening is not blocked, refer to the instructions for a large opening, archway, or doorway;

(b) if two rooms or areas are connected by a large opening, archway, or doorway, the rooms or areas are considered:

(i) one room, if the width of the opening or archway is equal to or greater than the combined width of the walls on each side of the opening or archway, in the larger of the two rooms or areas, and there is no furniture or other dividers blocking the opening or archway, otherwise OL shall consider this to be two rooms; or

(ii) two rooms, if the width of the opening or archway is smaller than the combined width of the walls on each side of the opening or archway, in the larger of the two rooms or areas; and

(c) if in outdoor areas separated by interior fences, OL considers it:

(i) one area, if the interior fence is 24 inches in height or lower, whether or not the fence has an opening;

(ii) one area, if the interior fence is 40 inches or lower in height with an opening through which caregivers and children can move freely;

(iii) two areas if the interior fence is higher than 24 inches and there is no opening; or

(iv) two areas, if the interior fence is higher than 40 inches whether or not the fence has an opening.

~~[39]~~^[32] "Sanitize" means to use a product or process to reduce contaminants and bacteria to a safe level.

~~[40]~~^[33] "School-age child" means a child age five through 12 years old.

~~[44]~~^[34] "Services" means the supervision and response to the needs of five or more qualifying children:

(a) in the absence of the children's parents;

(b) in a place other than the provider's home or the child's home;

(c) for less than 24 hours a day; and

(d) for direct or indirect compensation.

~~[42]~~^[35] "Sexually explicit material" means any depiction of actual or simulated sexual conduct.

~~[43]~~^[36] "Staff-to-child ratio" means the number of staff responsible for a specific number of children.

~~[44]~~^[37] "Stationary play equipment" means equipment, including a climber, slide, swing, merry-go-round, or spring rocker, that is meant to stay in one location when a child uses it. Stationary play equipment does not include a:

(a) playhouse that sits on the ground or floor and does not have an attached slide, swing, or climber;

(b) sandbox;

(c) sensory table; or

(d) stationary circular tricycle.

~~[45]~~^[38] "Strangulation hazard" means something on which a child's clothes or drawstrings could become caught or in which a child could become entangled, including:

(a) a protruding bolt end that extends more than two threads beyond the face of the nut;

(b) a rope, cord, or chain that is attached to a structure and is long enough to encircle a child's neck; or

(c) hardware that forms a hook or leaves a gap or space between components including a protruding open S-hook.

~~[46]~~^[39] "Unsupervised contact" means being with, caring for, communicating with, or touching a child in the absence of a staff member who is at least 18 years old and is considered eligible by OBP.

~~[47]~~^[40] "Use zone" means the area beneath and surrounding a play structure or piece of equipment that is designated for unrestricted movement around the equipment, and onto which a child falling from or exiting the equipment could be expected to land.

~~[48]~~^[41] "Working day" means any day of the week the department is open for business.

R381-70-3. License Required.

(1) A person shall obtain a license for an out-of-school-time program from OL if the person provides services:

(a) for direct or indirect compensation;

(b) for each individual child for less than 24 hours a day;

(c) for five or more qualifying children;

(d) in a place other than the provider's home or the child's home;

(e) in the absence of a child's parent;

(f) on an ongoing basis, on three or more days a week and for 30 or more days in a calendar year; and

(g) to children who are at least five years of age.

(2) A person who does not meet licensing requirements may voluntarily become licensed, except for care that is for related children only or on a sporadic basis.

(3) OL may license a provider to provide child care in a facility that is also licensed by OL if the part of the facility requesting a CCL license is physically separate from the other facility services.

(4) An out-of-school-time child care program licensee shall comply with Rule R380-600.

R381-70-4. Fire and Other Health Inspections.

(1) If the local fire authority states in writing that an applicant for a new license or a renewal does not require a fire inspection, OL shall verify the applicant's compliance with the following:

- (a) address numbers and letters are readable from the street;
- (b) boiler, mechanical, and electrical panel rooms are not used for storage;
- (c) exit doors are unlocked from the inside during business hours;
- (d) exit doors operate properly and are well maintained;
- (e) exits are clearly identified;
- (f) there are no obstructions in exits, aisles, corridors, and stairways;
- (g) there are working smoke detectors that are properly installed on each level of the building; and
- (h) there is at least one unobstructed fire extinguisher on each level of the building that is charged and serviced and mounted not more than five feet above the floor.

(2) If an applicant for a new license or a renewal serves food and the local health department states in writing that a kitchen inspection is not required, OL shall verify the applicant's compliance by ensuring:

- (a) any chemical is stored away from food and food service items;
- (b) any cook has a current food handler's permit that is available on-site for review;
- (c) any cook uses hair restraints and wears clean clothing;
- (d) any reusable food holder, utensil, and food preparation surface is washed, rinsed, and sanitized before each use;
- (e) food is properly stored, kept to the proper temperature, and in good condition;
- (f) only necessary staff are present in the kitchen;
- (g) the refrigerator is clean, in good repair, and working at or below 41 degrees Fahrenheit;
- (h) there is a working handwashing sink in the kitchen, and handwashing instructions posted by the sink;
- (i) there is a working stem thermometer available to check cooking and hot-hold temperatures; and
- (j) there is a working thermometer in the refrigerator.

R381-70-5. Immediate Closure.

(1) In accordance with Rule R380-600, OL may order the immediate closure of a facility if conditions at the facility create a clear and present danger to any child in care.

(2) Upon receipt of an immediate closure notice, the provider shall give OL the names and mailing addresses of each enrolled child's parent so OL may notify the parents of the immediate closure.

(3) If there is a severe injury or death of a child while in the program, OL may order a provider to suspend services and prohibit new enrollments, pending a review by the Utah Child Fatality Review Committee or a determination of the probable cause of the injury or death by a medical professional.

R381-70-6. Administration and Children's Records.

(1) The provider shall:

- (a) be at least 21 years old;
- (b) be considered eligible by an OBP background check before becoming involved with child care; and
- (c) complete the new provider training offered by OL.

(2) If the owner is not a sole proprietor, the business entity shall submit to OL the name and contact information of each individual who shall legally represent the business entity and who shall comply with Subsection R381-70-6(1).

(3) The provider shall protect children from conduct that endangers any child in the program or is contrary to the health, welfare, and safety of the public.

(4) The provider shall know and comply with applicable federal, state, and local law, ordinance, and rule, and shall be responsible for the operation and management of a child care program.

(5) The provider shall comply with licensing rules any time a child is present.

(6) The provider shall post their unaltered license on the facility premises in a place readily visible and accessible to the public.

(7) The provider shall post a current copy of OL's Parent Guide at the facility for parent review during business hours, or give a current copy to each parent.

(8) The provider shall inform each parent and OL of any changes to the program's telephone number and other contact information within 48 hours of the change.

(9) The provider shall:

- (a) have liability insurance; or
- (b) inform parents in writing that the provider does not have liability insurance.

(10) The provider shall ensure that a parent completes an admission and health assessment form for their child before the child is admitted into the program.

(11) The provider shall ensure that each child's admission and health assessment form includes:

- (a) the child's name;
- (b) the child's date of birth;
- (c) each parent's name, address, and phone number, including a daytime phone number;
- (d) the names of individuals authorized by the parent to sign the child out from the facility;

- (e) the name, address, and phone number of an individual to be contacted if an emergency happens and the provider cannot contact the parent;
- (f) if available, the name, address, and phone number of an out-of-area emergency contact individual for the child;
- (g) the parent's permission for emergency transportation and emergency medical treatment;
- (h) any known allergy of the child;
- (i) any known food sensitivity of the child;
- (j) any chronic medical condition that the child may have;
- (k) any instructions for special or nonroutine daily health care of the child;
- (l) any current ongoing medication that the child may be taking; and
- (m) any other special health instructions for the caregiver.
- (12) The provider shall ensure that the admission and health assessment form is:
- (a) reviewed, updated, and signed or initialed by the parent at least annually; and
- (b) kept on-site for review by OL.
- (13)~~(a)~~ ~~[If a child's immunization documentation is not maintained by a school or another organization,]~~ Before admitting any child into the program, the provider shall [ensure there is documentation of current immunizations for each child in care available for review by OL staff.] obtain the following documentation from the child's parent:
- (a) a record of current immunizations;
- (b) a medical schedule to receive required immunizations;
- (c) a legal exemption to current immunization requirements; or
- (d) a 90-day exemption for any foster child or child who is experiencing homelessness. ~~(b) the provider may have a 90 day exemption from the immunization documentation requirement if the children being served are experiencing homelessness or are in foster care.]~~
- (14) For each child in the program, including the provider's or employee's own child, the provider shall keep the child's current immunization records on-site for review by OL.
- (1~~4~~5) The provider shall ensure that each child's information is confidential and not released without written parental permission except to OL.

R381-70-7. Personnel and Training Requirements.

- (1) The provider shall ensure that each employee and volunteer is supervised, qualified, and trained to:
- (a) meet the needs of the children as required by rule; and
- (b) comply with this rule.
- (2) The provider shall ensure that the center has a qualified director.
- (3) The provider shall ensure that the director:
- (a) completes at least ten hours of child-related training each year based on the facility's license date, or at least 45 minutes of child-related training each month they work, if hired partway through the facility's licensing year.
- (b) completes the new director training offered by OL within 60 working days of assuming director duties;
- (c) if hired after January 1, 2023, has completed the 2-1/2 hour preservice training offered by OL;
- (d) is at least 21 years old;
- (e) is considered eligible by an OBP background check before becoming involved with child care; and
- (f) knows and follows any applicable laws and requirements under Rules R381-70 and R380-600.
- (4) The provider shall ensure that each new director has at least one of the following educational credentials:
- (a) a currently valid national certification, including:
- (i) a Certified Childcare Professional issued by the National Child Care Association;
- (ii) a Child Development Associate issued by the Council for Early Childhood Professional Recognition; or
- (iii) other equivalent credential as approved by OL;
- (b) a National Administrator Credential with at least 60 hours of equivalent training as approved by OL;
- (c) any bachelor's or higher education degree with at least 60 hours of coursework in child development, social and emotional development and the child care environment, or 60 hours of equivalent training as approved by OL;
- (d) at least 12 college credit hours of child development courses; or
- (e) at least an associate degree in early childhood development or related field.
- (5) The provider shall ensure that the director is on duty at the facility at least half of time the facility is open and has sufficient freedom from other responsibilities to manage the center and respond to emergencies.
- (6) The provider shall ensure that there is a director designee with authority to act on behalf of the director in the director's absence.
- (7) The provider shall ensure that the director designee:
- (a) completes at least ten hours of child-related training each year based on the facility's license date, or at least 45 minutes of child-related training each month they work if hired partway through the facility's licensing year;
- (b) completes the director designee training offered by OL;
- (c) has current first aid and cardio pulmonary resuscitation (CPR) certification in accordance with Subsections R381-70-7(20) and (21);
- (d) if hired after January 1, 2023, has completed the 2-1/2 hour preservice training offered by OL before becoming involved with child care;
- (e) is at least 18 years old;

NOTICES OF PROPOSED RULES

- (f) is considered eligible by a CCL background check before becoming involved with child care; and
- (g) knows and follows any applicable law and this rule.
- (8) The provider shall ensure that the director or the director designee is present at the facility during business hours.
- (9) The provider shall ensure that each staff member working with a child:
 - (a) completes at least ten hours of child care training each year, based on the facility's license date, or at least 45 minutes of child care training each month they work if hired partway through the facility's licensing year;
 - (b) completes the 2-1/2 hour preservice training offered by OL before becoming involved with child care;
 - (c) is at least 16 years old;
 - (d) is considered eligible by an OBP background check before becoming involved with child care;
 - (e) is introduced to other program staff and to the staff member's assigned group;
 - (f) knows and follows any applicable law and this rule; and
 - (g) reviews the information in each child's health assessment in the staff member's assigned group, including allergies, food sensitivities, and other individual needs.
- (10) The provider shall ensure that any other staff, including any driver, cook, and clerk:
 - (a) completes the 2-1/2 hour preservice training offered by OL before becoming involved with child care;
 - (b) knows and follows any applicable law and this rule; and
 - (c) is considered eligible by an OBP background check before becoming involved with child care.
- (11) The provider shall ensure that each volunteer is considered eligible by an OBP background check before becoming involved with child care.
- (12) The provider shall ensure that each guest or student intern who is registered and participating in a high school or college child care course wears a guest nametag.
- (13) The provider shall ensure that each household member who is:
 - (a) 12 to 17 years old is considered eligible by an OBP background check; and
 - (b) 18 years old or older is considered eligible by an OBP background check that includes fingerprints.
- (14) The provider shall ensure that an individual who provides an Individualized Educational Plan or Individualized Family Service plan services including any physical, occupational, or speech therapist:
 - (a) provides identification before having access to the facility or to a child at the facility; and
 - (b) has received the child's parent's permission for services to take place at the facility.
- (15) The provider shall ensure that any individual from law enforcement, Child Protective Services, the department, and any similar entity provides identification before having access to the facility or to a child at the facility.
- (16) The provider shall ensure that each covered individual required to complete preservice training receives the 2-1/2 hour preservice training offered by OL that includes at least the following topics:
 - (a) administration of medication;
 - (b) applicable laws and requirements under Rule R381-70;
 - (c) building and physical premises safety;
 - (d) child and brain development, including the social, emotional, physical, cognitive, and language principles of child growth;
 - (e) children whose special needs may include a disability;
 - (f) emergency preparedness, response, and recovery plan;
 - (g) pediatric first aid and CPR;
 - (h) precautions in transporting children;
 - (i) prevention and control of infectious diseases including immunizations;
 - (j) prevention of and response to emergencies due to food and allergy reactions;
 - (k) prevention of shaken baby syndrome, abusive head trauma, child maltreatment, and coping with crying babies;
 - (l) prevention of sudden infant death syndrome and the use of safe sleeping practices;
 - (m) prevention, signs, and symptoms of child abuse and neglect, including child sexual abuse, and legal reporting requirements;
 - (n) recognizing the signs of an individual experiencing homelessness and available assistance; and
 - (o) safe handling and disposal of hazardous materials and bio contaminants.
- (17) The provider shall ensure that annual child care training includes at least each topic listed in:
 - (a) Sections R381-70-7 through R381-70-22; and
 - (b) Subsections R381-70-7(16)(a) through (o).
- (18) The provider shall ensure that documentation of each individual's annual child care training is on-site for review by the OL and includes the:
 - (a) date of the training;
 - (b) name of the individual or organization that presented the training;
 - (c) total hours or minutes of the training; and
 - (d) training topic.
- (19) The provider shall ensure that at least one staff member with a current Red Cross, American Heart Association, or equivalent pediatric first aid and CPR certification is present when a child is in care:
 - (a) at each offsite activity;
 - (b) at the facility; and
 - (c) in each vehicle transporting a child.
- (20) The provider shall ensure that CPR certification includes hands-on testing.

- (21) The provider shall ensure that the following records for each covered individual are on-site for review by OL:
- (a) the date of initial employment or association with the program;
 - (b) a current pediatric first aid and CPR certification, if required in this rule; and
 - (c) a six-week record of the times worked each day.

R381-70-8. Background Checks.

(1) Before a new covered individual becomes involved with child care, the provider shall use the licensing provider portal search to verify that the individual is eligible and:

- (a) associate that individual with the provider's facility; or
- (b) not associate the individual if the individual is associated with another CCL facility and the new individual will be at the facility for no more than one business day.

(2) Before a new covered individual who does not appear in the licensing provider portal search becomes involved with child care in the program, the provider must require the individual to submit an online background check application and fingerprints for any individual age 16 years old and older, except for individuals 12-17 years old who are only listed as household members, and;

- (a) authorize the individual's background check through the licensing provider portal;
- (b) pay any required fees; and
- (c) only allow the individual to be involved with child care if they have an eligible OBP background check determination.

(3) To keep a covered individual's background check eligibility current, the provider shall require a covered individual to submit a new background check application, fingerprints, and fees if the covered individual has:

- (a) not been associated with an active, CCL approved child care facility within the past 180 days;
- (b) resided outside of Utah since their last background check was completed; or
- (c) turned 18 years old and has not previously submitted fingerprints for an OBP background check, except when the 18-year-old has previously submitted fingerprints for an OBP background check, then only a new background check application will be required.

(4) Within ten working days from when a child who resides in the facility turns 12 years old, the provider shall ensure that an online background check application is submitted, and;

- (a) authorize the child's background check through the licensing provider portal; and
- (b) pay any required fee.

(5) The provider shall ensure that fingerprints are prepared by a local law enforcement agency or an agency approved by local law enforcement.

(6) If a covered individual submits fingerprints electronically through live scan, the provider shall ensure that the agency taking the fingerprints is one that follows the OBP's fingerprinting requirements.

(7) OBP may consider a covered individual not eligible for any of the following reasons:

- (a) a pending charge for a felony offense;
- (b) any felony conviction;
- (c) any of the reasons listed under Subsection (8);
- (d) LIS supported findings that occurred no more than 15 years from the date the application was submitted;
- (e) the covered individual knowingly making a false statement related to their background check;
- (f) the covered individual refusing to consent to the criminal background check; or
- (g) the covered individual's name appearing on the Utah or national sex offender registry.

(8) OBP may also consider a covered individual not eligible if the individual has been convicted, has pled no[-]contest, or is currently subject to a plea and abeyance or diversion agreement for any of the following pending charges or convictions, regardless of severity:

- (a) child pornography;
- (b) driving under the influence while a child is present in the vehicle;
- (c) lewdness involving a child;
- (d) pornographic material or performance;
- (e) providing dangerous weapons or firearms to a minor;
- (f) sexual battery;
- (g) sexual enticing of a minor;
- (h) sexual exploitation;
- (i) voyeurism; or
- (j) any crime against an individual.

(9) OBP shall consider a covered individual eligible if the only background finding is a conviction or plea of no contest to a nonviolent drug offense that occurred ten or more years before OBP conducted the background check.

(10) If the provider is not eligible by OBP, OL may suspend or deny their license until the reason for the background check finding is resolved.

(11) If a covered individual is considered not eligible by OBP, including if the individual has been convicted, has pleaded no contest, or is currently subject to a plea in abeyance or diversion agreement for a felony or misdemeanor, the provider shall prohibit that individual from being employed by the child care program or residing at the facility until the reason for the background check finding is resolved.

(12) If OBP denies a covered individual a license or employment by the provider based upon the criminal background check and the covered individual disagrees with the information provided by the Department of Public Safety (DPS), the covered individual may appeal the information to DPS.

NOTICES OF PROPOSED RULES

(13) The provider and the covered individual shall notify OBP within 48 hours of becoming aware of a covered individual's arrest warrant, felony or misdemeanor arrest, charge, conviction, or LIS supported finding. Failure to notify OBP within 48 hours may result in disciplinary action, including license revocation.

(14) The OBP director or designee may consider any additional relevant background information in making the decision to grant, deny, or continue an eligible determination on a background check, including:

- (a) intervening circumstances regarding an offense or finding;
- (b) steps taken to correct or improve since any offense or finding;
- (c) surrounding circumstances of an offense or finding;
- (d) the length of time since an offense or finding; and
- (e) the type and number of offenses or findings.

(15)(a) OBP shall rely on relevant information from Subsections (7) and (8) as conclusive evidence and may deny a covered individual based on that information.

(b) When a covered individual is no longer associated with the program, the provider shall separate that employee from the program's roster in the online system within five days of the covered individual's separation from the program.

(c) A covered individual may resubmit a denied application to OBP no sooner than two years from the date of separation or upon substantial change to the covered individual's circumstances.

(16) If OBP determines evidence exists that a covered individual has been arrested or charged with an offense that may be denied under Subsections (7) and (8), the ~~D~~division ~~[of Licensing and Background Checks]~~ may act to protect the health and safety of a child.

(17) The provider may only allow a covered individual with a pending arrest or criminal charge to access a child when:

- (a) OBP has authorized conditional access; and
- (b) the provider can demonstrate to OBP that the work arrangement does not pose a threat to the health or safety of any child.

(18) A covered individual may request a hearing, in accordance with Section R497-100-5, within 15 calendar days of being informed in writing of any OBP decision.

R381-70-9. Facility.

(1) The provider shall ensure that there is at least 35 square feet of indoor space for each child in the program, including the provider's or employee's own child.

(2) The provider may include floor space used for furniture, fixtures, or equipment as indoor space per child if the furniture, fixture, or equipment is used:

- (a) by children;
 - (b) for the use of children; or
 - (c) to store materials for children.
- (3) When measuring indoor space for children's use, the provider may not include any:

- (a) bathroom;
- (b) closet and staff locker;
- (c) hallway;
- (d) kitchen;
- (e) lobby and entryway; and
- (f) staff office.

(4) The provider shall ensure that the number of children in care at any given time does not exceed the capacity identified on the license.

(5)(a) The provider shall ensure that any building or play structure on the premises constructed before 1978 that has peeling, flaking, chalking, or failing paint undergoes a test for lead.

(b) If there is lead-based paint at the facility, the provider shall contact their local health department within five working days and follow required procedures for remediation of the lead hazard.

(6) The provider shall ensure that each room and indoor area that children use is ventilated by mechanical ventilation or by windows that open and have screens.

(7) The provider shall ensure that windows and glass doors within 36 inches from the floor or ground are made of safety or tempered glass, or have a protective guard.

(8) The provider shall ensure that rooms and areas have adequate light intensity for the safety of the children and the type of activity the provider is conducting.

(9) The provider shall maintain the indoor temperature between 65 and 82 degrees Fahrenheit.

(10) The provider shall ensure that there is a working telephone:

- (a) at the facility;
- (b) during any offsite activity; and
- (c) in each vehicle while transporting a child.

(11) The provider shall ensure that there are at least two working toilets and two working handwashing sinks accessible to children in the center.

(12) The provider shall ensure that there is at least one additional working toilet and one additional handwashing sink for each additional group of one to 25 children.

(13) The provider shall ensure that there is a bathroom that provides privacy available for use by any child.

(14) The provider shall ensure that any child outdoors is in an enclosed area, except during offsite activities.

(15) The provider shall ensure that the outdoor area:

- (a) has a fence, wall or solid natural barrier that is at least four feet high encloses the outdoor area;
- (b) has at least 40 square feet of space for each child using the area at one time;
- (c) has no gaps five by five inches or greater in or under any fence or barrier;
- (d) has shade available to protect any child from excessive sun and heat when in the outdoor area;
- (e) is safely accessible to any child; and
- (f) the total square footage of the outdoor area accommodates at least one-third of the approved capacity at one time, or is at least 1,600 square feet.

(16) If there is a swimming pool on the premises that the provider does not empty after each use, the provider shall:

- (a) maintain the pool in a safe manner;
- (b) meet applicable state and local laws and ordinances related to the operation of a swimming pool; and
- (c) when not in use:
 - (i) cover the pool with a commercially made safety enclosure that is installed according to the manufacturer's instructions or
 - (ii) enclose the pool within at least a four-foot-high fence or solid barrier that is kept locked and that separates the pool from any other areas on the premises.

(17) The provider shall maintain any building and outdoor area in good repair and safe condition, including any:

- (a) ceiling, wall, and floor covering;
- (b) drape, blind, and other window covering;
- (c) entrance, exit, step, and walkway, including keeping them free of ice, snow, and other hazards;
- (d) furniture, toy, and material accessible to a child;
- (e) indoor and outdoor equipment; and
- (f) lighting, bathroom, and other fixture.

(18) The provider shall ensure that a protective barrier of at least three feet or higher exists for:

- (a) any accessible raised deck or balcony that is five feet or higher; and
- (b) any open stairwell that is five feet or deeper.

(19) If the facility is subdivided, any part of the building is rented out, or any area of the facility is shared including the outdoor area, OL may inspect the entire facility and the provider shall ensure that covered individuals in the facility comply with this rule, except when:

- (a) there is a separate entrance for the program;
- (b) there are no connecting interior doorways that can be used by unauthorized individuals; and
- (c) there is no shared access to the outdoor area used for the program.

R381-70-10. Ratios and Group Size.

- (1) The provider shall maintain the staff-to-child ratio of at least one staff member for every 20 children.
- (2) The provider may not exceed the maximum group size of 40 children per group.
- (3) The provider shall ensure that there are at least two staff members present when there are more than eight children on the premises.
- (4) The provider shall include any child of the provider or an employee:
 - (a) in the group size when the parent of the child is working at the facility; and
 - (b) in the group size and the staff-to-child ratio when the parent of the child is not working at the facility.
- (5) The provider may include the following in the staff-to-child ratio any:
 - (a) caregiver;
 - (b) student intern who is registered in a high school or college child care course; and
 - (c) volunteer who is 16 or 17 years old.
- (6) The provider shall ensure that any guest does not count in caregiver-to-child ratios.

R381-70-11. Child Supervision and Security.

(1) The provider shall ensure that each staff member provides and maintains active supervision of each child, including:

- (a) being able hear the children;
- (b) being aware of the entire group even when interacting with a smaller group or an individual child;
- (c) being close enough to intervene;
- (d) focusing attention on the children and not on the staff's personal interests;
- (e) knowing the number of children in their assigned group at any time; and
- (f) positioning themselves so each child in their assigned group is actively supervised.

(2) The provider shall ensure a 16 or 17 year old staff or household member may only have unsupervised contact with a child in care, including during offsite activities and transportation, if:

- (a) the director or the director designee is physically present and available as needed;
- (b) the staff or household member is left unsupervised for no more than two consecutive hours per group; and
- (c) the staff or household member is not a volunteer.

(3) The provider may not assign a staff member, volunteer, and household member who is younger than 16 years old to care for or supervise any child in care.

(4) The provider shall ensure that any guest or student intern who is registered and participating in a high school or college child care course does not have unsupervised contact with any child in care, including during any offsite activity and transportation.

NOTICES OF PROPOSED RULES

- (5) The provider shall ensure that any parent of a child in care does not have unsupervised contact with any child in care, except with their own child.
- (6) The provider shall ensure that a parent has access to their child and the areas used to care for their child when their child is in care.
- (7) To maintain security and supervision of children, the provider shall ensure that:
 - (a) any individual signing a child in and out uses an identifier, including a signature, initials, or electronic code;
 - (b) each child is signed in and out in accordance with this section;
 - (c) only a child's parent or an individual with written authorization from the parent may sign-out a child;
 - (d) photo identification is required if the individual signing the child out is unknown to the provider;
 - (e) the sign-in and sign-out records include the date and time each child arrives and leaves; and
 - (f) there is written permission from the child's parent if children sign themselves in or out.
- (8) In an emergency, the provider shall accept the parent's verbal authorization to release a child if the provider can confirm the identity of:
 - (a) the person giving verbal authorization; and
 - (b) the person picking up the child.
- (9) The provider shall ensure that a six-week record of each child's daily attendance, including sign-in and sign-out records, is kept on-site for review by the OL.

R381-70-12. Child Guidance and Interaction.

- (1) The provider shall ensure that no child is subjected to physical, emotional, or sexual abuse while in the program.
- (2) The provider shall inform each child, each parent, and anyone who interacts with any child in care of the center's behavioral expectations and how any misbehavior will be handled.
- (3) The provider shall ensure that any individual who interacts with a child guides the child's behavior by using positive reinforcement, redirection, and by setting clear limits that promote the child's ability to become self-disciplined.
- (4) The provider shall ensure that each staff uses gentle, passive restraint with a child only when it is needed to protect a child from injuring themselves or others, or to stop a child from destroying property.
- (5) The provider shall ensure that each interaction with the child does not include:
 - (a) any action that produces physical pain or discomfort, including hitting, spanking, shaking, biting, or pinching;
 - (b) any form of corporal punishment;
 - (c) any form of emotional mistreatment;
 - (d) confining a child in a closet, locked room, or other enclosure including a box, cupboard, or cage;
 - (e) forcing or withholding food, rest, or toileting;
 - (f) restraining a child's movement by binding, tying, or any other form of restraint that exceeds gentle, passive restraint; or
 - (g) shouting at children.
- (6) Any individual who witnesses or suspects that a child has been subjected to abuse, neglect, or exploitation shall immediately notify Child Protective Services or law enforcement as required in Section 80-2-602.

R381-70-13. Child Safety and Injury Prevention.

- (1) The provider shall ensure that any child and staff use each building, outdoor area, toy, and any equipment safely and as intended by the manufacturer to prevent injury to children.
- (2) The provider shall ensure that any poisonous or harmful plant is inaccessible to children.
- (3) The provider shall ensure that any razor and any other similar blade is inaccessible to children.
- (4) The provider shall ensure that any strangulation hazard, including any rope, cord, chain, and wire attached to a structure and long enough to encircle a child's neck is inaccessible to children.
- (5) The provider shall ensure that any tripping hazard including unsecured flooring, any rug with a curled edge, or cord in a walkway is inaccessible to children.
- (6) The provider shall ensure that exits are free of any blocking objects.
- (7) The provider shall ensure that standing water that measures two inches or deeper and five by five inches or greater in diameter is inaccessible to children.
- (8) The provider shall ensure that any toxic or hazardous chemical, including any cleaner, insecticide, lawn product, and flammable, corrosive, and reactive material is:
 - (a) disposed of properly;
 - (b) inaccessible to any child;
 - (c) stored in a container labeled with the contents of the container; and
 - (d) used according to manufacturer instructions.
- (9) The provider shall ensure that the following items are inaccessible to children:
 - (a) cigarette lighters;
 - (b) hot wax or other hot substances;
 - (c) matches;
 - (d) open flames; and
 - (e) when in use, portable space heaters, wood burning stoves, and fireplaces.
- (10) The provider shall ensure that any live electrical wire is inaccessible to children.

(11) Unless used and stored as allowed by any state or federal law, the provider shall ensure that any firearm, including a gun, muzzleloader, rifle, shotgun, handgun, pistol, and automatic gun, is:

- (a) locked in a cabinet or area using a key, combination lock, or fingerprint lock; and
- (b) stored unloaded and separate from ammunition.

(12) The provider shall ensure that any weapon, including a paintball gun, BB gun, airsoft gun, sling shot, arrow, and mace, is inaccessible to children.

(13) The provider shall ensure that any alcohol, illegal substance, or sexually explicit material is inaccessible and not used on the premises, during any offsite activity, or in any center vehicle any time a child is present.

(14) The provider shall ensure that an outdoor source of drinking water, including individually labeled water bottles, a pitcher of water and individual cups, or a working water fountain, is available to each child when the outside temperature is 75 degrees Fahrenheit or higher.

(15) The provider shall ensure that each area accessible to a child is free of any heavy or unstable object that a child could pull down on themselves, including any furniture, unsecured television, and standing ladder.

(16) The provider shall ensure that hot water accessible to a child does not exceed 120 degrees Fahrenheit.

(17) The provider shall ensure that any tobacco, e-cigarette, e-juice, e-liquid, or similar product is inaccessible and, in compliance with ~~Title 26, Chapter 38,~~ the Utah Indoor Clean Air Act described in Section 26B-7-503 and Rule R392-510, is not used:

- (a) in a facility or any other building when a child is in care;
- (b) in any vehicle that is being used to transport a child in care;
- (c) in any outdoor area or within 25 feet of any outdoor area occupied by a child in care;
- (d) within 25 feet of any entrance to a facility or other building occupied by a child in care.

R381-70-14. Emergency Preparedness, Response, and Recovery.

(1) The provider shall develop and follow a written emergency preparedness, response, and recovery plan that:

- (a) includes a procedure for:
 - (i) accommodating a child with a chronic medical condition;
 - (ii) accommodating a child with a disability;
 - (iii) communication with and reunification of families;
 - (iv) continuity of operations;
 - (v) evacuation;
 - (vi) lockdown;
 - (vii) relocation; and
 - (viii) shelter in place.

(b) includes instructions to follow if there is an allergy, serious reaction to food, or any other trigger that may affect a child's health;

(c) is available for review by any parent, staff member, and OL during business hours; and

(d) is followed if an emergency happens, unless otherwise instructed by emergency personnel.

(2) The provider shall post the center's street address and any emergency numbers, including at least fire, police, and poison control, near each telephone in the center or in an area clearly visible to anyone needing the information.

(3) The provider shall keep first aid supplies in the center, including at least antiseptic, bandages, and tweezers.

(4) The provider shall conduct a fire evacuation drill monthly and make sure each drill includes a complete exit of each child, staff, and volunteer, from the building.

(5) The provider shall document each fire drill, including:

- (a) any problems encountered and remediation;
- (b) the date and time of the drill;
- (c) the name of the individual supervising the drill;
- (d) the number of children participating; and
- (e) the total time to complete the evacuation.

(6) The provider shall conduct a drill for disasters, other than fires, at least once every six months.

(7) The provider shall document each disaster drill, including:

- (a) any problems encountered and remediation;
- (b) the date and time of the drill;
- (c) the name of the individual supervising the drill;
- (d) the number of children participating; and
- (e) the type of disaster, including earthquake, flood, prolonged power or water outage, or tornado;

(8) The provider shall vary the days and times when fire and other disaster drills are held.

(9) The provider shall keep documentation of the previous 12 months of fire and disaster drills on-site for review by OL.

(10) The provider shall:

(a) give each parent a written report on the day of occurrence of each incident, accident, or injury involving their child;

(b) ensure the report has the signatures of the staff members involved, the center director or director designee, and the individual picking up the child; and

(c) if a school-age child signs themselves out of the center, send a copy of the report to the parent on the day following the occurrence.

(11) If a child is injured and the injury appears serious but not life-threatening, the provider shall submit a critical incident report to OL within one business day and contact the child's parent immediately.

NOTICES OF PROPOSED RULES

- (12) If a life-threatening injury to a child, or an injury that poses a threat of the loss of vision, hearing, or a limb happens, the provider shall submit a critical incident report to OL within one business day and:
- (a) call emergency personnel immediately;
 - (b) contact the parent after emergency personnel are called; and
 - (c) if the parent cannot be reached, try to contact the child's emergency contact individual.
- (13) If a child is injured while in care and receives medical attention, or for a child fatality, the provider shall submit a critical incident report to OL within one business day.
- (14) The provider shall keep a six-week record of each incident, accident, and injury report on-site for review by OL.
- (15) The provider shall ensure compliance with critical incident reporting in accordance with Subsection R380-600-7(16).

R381-70-15. Health and Infection Control.

- (1) The provider shall maintain the building, furnishings, equipment, and outdoor area including keeping:
 - (a) any frequently touched surface, including each doorknob and light switch, clean and sanitized;
 - (b) each area and any equipment used for the storage, preparation, and service of food clean and sanitized;
 - (c) each surface free of rotting food or a build-up of food;
 - (d) each wall and floor clean and free of spills, dirt, and grime;
 - (e) the building and grounds free of a build-up of litter and garbage; and
 - (f) the building and grounds free of animal feces.
- (2) The provider shall take safe and effective measures to prevent and eliminate the presence of insects, rodents, and other pests.
- (3) The provider shall clean and sanitize any toy and material used by a child:
 - (a) at least once a week or more often if needed; and
 - (b) after being contaminated by a body fluid.
- (4) The provider shall ensure that any fabric toy and item including any stuffed animal, cloth doll, pillow cover, and dress-up clothing is machine washable and if used, washed at least each week or as needed.
- (5) The provider shall clean and sanitize each water play table or tub daily, if used by a child.
- (6) The provider shall clean and sanitize each bathroom surface including each toilet, sink, faucet, toilet and sink handle, and counter each business day.
 - (7) The provider shall ensure that toilet paper is accessible and kept in a dispenser that is accessible to each child.
 - (8) The provider shall post handwashing procedures that are readily visible from each handwashing sink and shall ensure that each staff follow the procedures.
 - (9) The provider shall ensure that each staff member and volunteer washes their hands thoroughly with liquid soap and running water:
 - (a) after cleaning up or taking out garbage.
 - (b) after contact with a body fluid;
 - (c) after using the toilet or helping a child use the toilet;
 - (d) before and after eating meals and snacks or feeding a child;
 - (e) before handling or preparing food;
 - (f) upon arrival;
 - (g) when coming in from outdoors; and
 - (10) The provider shall ensure that each staff member teaches each child how to wash their hands thoroughly and oversee handwashing when possible.
 - (11) The provider shall ensure that each child washes their hands thoroughly with liquid soap and running water:
 - (a) after contact with a body fluid;
 - (b) after using the toilet;
 - (c) before and after eating meals and snacks;
 - (d) before using a water play table or tub;
 - (e) upon arrival; and
 - (f) when coming in from outdoors.
 - (12) The provider shall ensure that only single-use towels from a covered dispenser or an electric hand dryer are used to dry hands.
 - (13) The provider shall ensure that any personal hygiene items, including a toothbrush, comb, and hair accessory, are not shared and are stored so they do not touch each other or they are sanitized between each use.
 - (14) The provider shall ensure the prompt change of a child's clothing if the child has a toileting accident.
 - (15) The provider shall ensure that a child's clothing that is wet or soiled from a body fluid is:
 - (a) not rinsed or washed at the center;
 - (b) placed in a leakproof container that is labeled with the child's name; and
 - (c) returned to the parent or thrown away with parental consent.
 - (16) The provider shall ensure that staff take precautions when cleaning any floor, furniture, or other surface contaminated by blood, urine, feces, or vomit, and ensure that, except for diaper changes and toileting accidents, staff cleaning these bodily fluids shall:
 - (a) clean the surface using a detergent solution;
 - (b) rinse the surface with clean water;
 - (c) sanitize the surface;
 - (d) throw away, in a leakproof plastic bag, any disposable material, including paper towels, that were used to clean up the body fluid;

- (e) wash and sanitize any non-disposable material used to clean up the body fluid, including any cleaning cloth, mop, or reusable rubber glove, before reusing it;
 - (f) wear waterproof gloves; and
 - (g) wash their hands after cleaning up the body fluid.
- (17) The provider may not care for a child who is ill with an infectious disease at the center except when the child shows signs of illness after arriving at the center.
- (18) If a child becomes ill while in care:
- (a) the provider shall contact the child's parent or, if the parent cannot be reached, an individual listed as the emergency contact, to immediately pick up the child; and
 - (b) if the child is ill with an infectious disease, the provider shall make the child comfortable in a safe, supervised area that is separated from any other child until the parent arrives.
- (19) If any child or employee has an infectious disease, an unusual or serious illness, or a sudden onset of an illness, the provider shall notify the local health department on the day the provider discovers the illness.
- (20) If any staff member or child has an infectious disease or parasite, the provider shall post a notice at the center that:
- (a) does not disclose any personal identifiable information;
 - (b) is posted and dated on the same day that the disease or parasite is discovered;
 - (c) is posted in a conspicuous place where it can be seen by parents; and
 - (d) remains posted for at least five business days.
- (21) To prevent contamination of food, the spread of foodborne illnesses, and other diseases, the provider shall ensure that:
- (a) an individual who cares for any diapered child only prepares food for the children in their care, and they do not:
 - (i) prepare food outside of the room used by any diapered child; or
 - (ii) prepare food for any other child and adult in the facility;
 - (b) an individual who prepares food in the kitchen does not help in toileting any child; and
 - (c) an individual with an infectious disease, or showing symptoms including diarrhea, fever, coughing, or vomiting, does not prepare or serve foods.

R381-70-16. Food and Nutrition.

- (1) The provider shall ensure that each child is offered a meal or snack at least once every three hours when services are provided for three or more hours.
- (2) If the provider supplies food for a child's meals or snacks, the provider shall ensure that:
 - (a) the meal service meets local health department food service rules;
 - (b) the foods that are served meet the nutritional requirements of the USDA Child and Adult Care Food Program (CACFP) whether or not the provider participates in the CACFP;
 - (c) the provider uses the CACFP meal pattern requirements, the standard OL-approved menus, or menus approved by a registered dietitian, and that dietitian approval is noted and dated on the menus, and current within the past five years;
 - (d) the current week's menu is posted for review by parents and OL; and
 - (e) if not participating or in good standing with the CACFP, keep a six-week record of foods served at each meal and snack.
- (3) The provider shall ensure that the individual who serves food to a child:
 - (a) is aware of each child in their assigned group who has any food allergy or sensitivity; and
 - (b) ensures that a child is not served the food that the child is allergic or sensitive to.
- (4) The provider may not place a child's food on a bare table, and shall serve a child's food on a dish, napkin, or sanitary highchair tray, except an individual finger food, including a cracker, that may be placed directly in a child's hand.
- (5) If a parent brings food and drink for their child's use, the provider shall ensure that the food and drink is:
 - (a) consumed only by that child;
 - (b) labeled with the child's name; and
 - (c) refrigerated if needed.

R381-70-17. Medications.

- (1) The provider shall lock any nonrefrigerated medication or store it at least 48 inches above the floor.
- (2) The provider shall lock any refrigerated medication or store it at least 36 inches above the floor and, if liquid, store it in a separate leakproof container.
- (3) If a parent supplies any over-the-counter or prescription medication, the provider shall ensure that medication:
 - (a) is labeled with the child's full name;
 - (b) is stored in the original or pharmacy container; and
 - (c) has the original label.
- (4) The provider shall obtain a written medication permission form completed and signed by the parent before administering any medication supplied by the parent for their child.
- (5) The provider shall ensure that the medication permission form includes at least:
 - (a) a parent signature and the date signed;
 - (b) any written instructions for administration;
 - (c) the name of the child; and
 - (d) the name of the medication..

NOTICES OF PROPOSED RULES

- (6) The provider shall ensure that instructions for administering the medication include at least:
 - (a) how the medication will be given;
 - (b) the disease or condition being treated;
 - (c) the dosage; and
 - (d) the times and dates to administer the medication.
- (7) If the provider supplies an over-the-counter medication for a child's use, the provider shall ensure that no staff administer the medication to any child without previous parental consent for each instance it is given. The provider shall ensure that the consent is:
 - (a) written; or
 - (b) verbal, if the date and time of the consent is documented and signed by the parent upon picking up their child.
- (8) The provider shall ensure that the staff administering the medication:
 - (a) checks the medication label to confirm the child's name if the parent supplied the medication;
 - (b) checks the medication label or the package to ensure that a child is not given a dosage larger than that recommended by the health care professional or manufacturer;
 - (c) washes their hands; and
 - (d) administers the medication.
- (9) The provider shall ensure that immediately after administering a medication, the staff giving the medication records:
 - (a) any error in administering the medication or adverse reactions;
 - (b) the date, time, and dosage of the medication given; and
 - (c) their signature or initials.
- (10) The provider shall report to the parent a child's adverse reaction to a medication or error in administration of the medication immediately upon recognizing the reaction or error, or after notifying emergency personnel if the reaction is life-threatening.
- (11) The provider shall notify the parent before the scheduled medication dosage to a child if the provider chooses not to administer medication as instructed by the parent.
- (12) The provider shall keep a six-week record of medication permission and administration forms on-site for review by OL.

R381-70-18. Activities.

- (1) The provider shall offer daily activities that support each child's healthy physical, social, emotional, cognitive, and language development.
- (2) The provider shall ensure that daily activities include outdoor play as weather and air quality allow.
- (3) The provider shall ensure that physical development activities include light, moderate, and vigorous physical activity for a daily total of at least 15 minutes for every two hours that children spend in the program.
- (4) The provider shall post a daily schedule that includes:
 - (a) activities that support a child's healthy development; and
 - (b) the times activities occur including at least meal, snack, and outdoor play times.
- (5) The provider shall ensure that any toy, material, and equipment needed to support a child's healthy development is available to each child.
- (6) Except for occasional special events, the provider shall ensure that each child's primary screen time activity on media, including any television, cell phone, tablet, and computer, is planned to address the needs of each child.
- (7) If the provider offers swimming activities or if a wading pool is used, the provider shall ensure that:
 - (a) a staff member stays at the pool supervising when a child is in the pool or has access to the pool, and when an accessible pool has water in it;
 - (b) each lifeguard and pool personnel does not count toward the staff-to-child ratio;
 - (c) if the pool is deeper than four feet, there is a lifeguard on duty who is certified by the Red Cross or another approved certification program any time a child has access to the pool; and
 - (d) the parent gives permission before their child uses the pool;
- (8) If the provider offers offsite activities, the provider shall ensure that:
 - (a) a child's name is not used on a nametag, t-shirt, or in any other visible way;
 - (b) each child wears or carries with them the name and phone number of the center;
 - (c) first aid supplies, including at least antiseptic, bandages, and tweezers are available;
 - (d) the child's parent gives written consent before each activity;
 - (e) the required staff-to-child ratio and supervision are maintained during the entire activity; and
 - (f) there is a way for each child and staff member to wash their hands with soap and water, or, if there is no source of running water, with a wet wipe or hand sanitizer.
- (9) The provider shall ensure that a staff member with the children takes the written emergency information and releases for each child in the group on each offsite activity, and that the information includes at least:
 - (a) the child's name;
 - (b) the parent's name and phone number;
 - (c) the name and phone number of a person to notify if an emergency happens and the parent cannot be contacted;
 - (d) the names of people authorized by the parents to pick up the child; and
 - (e) current emergency medical treatment and emergency medical transportation releases.

R381-70-19. Play Equipment.

- (1) The provider shall ensure that each child using play equipment uses it safely and as intended by the manufacturer.
- (2) The provider shall ensure that:
 - (a) stationary play equipment has a surrounding use zone that extends from the outermost edge of the equipment; and
 - (b) with the exception of a swing, stationary play equipment has at least a six-foot use zone if any designated play surface is higher than 30 inches.
- (3) The provider shall ensure that the use zone in the front and rear of a single-axis swing extends at least twice the distance of the swing pivot point to the ground.
- (4) The provider shall ensure that the use zone for a multi-axis swing, including a tire swing, extends at least the measurement of the suspending rope or chain plus six feet.
- (5) The provider shall ensure that the use zone for a merry-go-round extends at least six feet in any direction from its outermost edge.
- (6) The provider shall ensure that the use zone for a spring rocker extends:
 - (a) at least three feet from the outermost edge of the rocker when at rest; or
 - (b) at least six feet from the outermost edge of the rocker when at rest if the seat is higher than 20 inches.
- (7) The provider shall ensure that each use zone does not overlap with the use zone of any other piece of play equipment when the use zone is:
 - (a) in front of a slide;
 - (b) in the front and rear of any single-axis swing, including a single-axis enclosed swing;
 - (c) that of a multi-axis swing; and
 - (d) that of a merry-go-round, if the platform diameter measures 20 inches or more.
- (8) Unless prohibited in Subsection R381-70-19(7), the provider shall ensure that the use zones of play equipment only overlap when:
 - (a) there is at least six feet between each piece of equipment if the designated play surface is 30 inches or lower; or
 - (b) there is at least nine feet between each piece of equipment if the designated play surface is higher than 30 inches.
- (9) The provider shall ensure that, when in use, stationary play equipment is not placed on a hard surface, including concrete, asphalt, dirt, and the bare floor.
- (10) The provider shall ensure that protective cushioning covers the entire surface of each required use zone and that its depth or thickness is determined by the highest designated play surface of the equipment.
- (11) If the provider uses sand, gravel, or shredded tires as protective cushioning, the provider shall ensure that:
 - (a) the cushioning is periodically checked for compaction and if compacted, loosened to the depth listed in Table 1;
 - (b) if the material cannot be loosened to the depth listed in Table 1 due to extreme weather conditions, a child may not play on the equipment until the material can be loosened to the required depth; and
 - (c) the depth of the material meets the guidelines in Table 1.

Highest Designated Play Surface, Climbing Bar, or Swing Pivot Point	Fine Sand	Coarse Sand	Fine Gravel	Medium Gravel	Shredded Tires and Rubber Products
Up to 5' high	6"	6"	6"	6"	6"
Over 5' up to 6'	6"	9"	6"	9"	6"
Over 6' up to 9'	9"	Not allowed	9"	Not allowed	6"
Over 9' up to 10'	Not allowed	Not allowed	9"	Not allowed	6"
Over 10' up to 12'	Not allowed	Not allowed	Not allowed	Not allowed	6"

- (12) If the provider uses shredded wood products as protective cushioning, the provider shall:
 - (a) ensure the depth of the shredded wood meets the guidelines in Table 2;
 - (b) ensure there is adequate drainage under the material; and
 - (c) keep on-site for review by OL documentation from the manufacturer that the wood product is protective cushioning.

Highest Designated Play Surface, Climbing Bar, or Swing Pivot Point	Engineered Wood Fibers	Wood Chips	Double Shredded Bark Mulch
Up to 6' high	6"	6"	6"
Over 6' up to 7'	9"	6"	9"
Over 7' up to 11'	9"	9"	9"
Over 11'	9"	Not allowed	Not allowed

NOTICES OF PROPOSED RULES

(13) If the provider uses a unitary cushioning, the provider shall keep on-site for review by OL documentation from the manufacturer specifying that the material is playground cushioning.

(14) If the provider uses a unitary cushioning, the provider shall ensure that the cushioning material is securely installed, so that it cannot be:

- (a) displaced when a child jumps, runs, walks, lands, or moves on it; or
- (b) moved or picked up by a child.

(15) The provider shall ensure that a play equipment platform more than 48 inches above the floor or ground has a protective barrier that is at least 38 inches high.

(16) The provider shall ensure that there is no gap greater than 3-1/2 inches in or under a required protective barrier on a play equipment platform.

(17) The provider shall ensure that stationary play equipment is stable or securely anchored.

(18) The provider shall ensure that there is no trampoline on the premises that is accessible to any child in care.

(19) The provider shall ensure that there is no entrapment hazard on or within the use zone of any piece of stationary play equipment.

(20) The provider shall ensure that there is no strangulation hazard on or within the use zone of any piece of stationary play equipment.

(21) The provider shall ensure that there is no crush, shearing, or sharp edge hazard on or within the use zone of any piece of stationary play equipment.

(22) The provider shall ensure that there is no tripping hazard including any concrete footing, tree stump, tree root, or rock within the use zone of any piece of stationary play equipment.

R381-70-20. Transportation.

(1) For each child that the provider transports, the provider shall obtain a transportation permission form that is:

- (a) signed by a parent; and
- (b) on-site for review by OL.

(2) The provider shall ensure that each vehicle used for transporting children:

- (a) is enclosed with a roof or top;
- (b) is equipped with safety restraints;
- (c) has a current vehicle registration;
- (d) is maintained in a safe and clean condition; and
- (e) contains first aid supplies, including at least antiseptic, bandages, and tweezers.

(3) The provider shall ensure that the safety restraints in each vehicle that transports children are:

- (a) appropriate for the age and size of each child who is transported, as required by law;
- (b) properly installed; and
- (c) in safe condition and working order.

(4) The provider shall ensure that the driver of each vehicle who is transporting children:

- (a) is at least 18 years old;
- (b) has and carries with them a current, valid driver's license for the type of vehicle being driven;
- (c) has with them the emergency contact information outlined in Subsection R381-70-18(9) for each child being transported;
- (d) ensures that each child being transported is in an individual safety restraint as required by law;
- (e) ensures that the inside vehicle temperature is between 60 and 85 degrees Fahrenheit;
- (f) ensures that each child stay seated while the vehicle is moving;
- (g) ensures that the vehicle is locked during transport;
- (h) never leaves a child in the vehicle unattended by an adult; and
- (i) never leaves the keys in the ignition when not in the driver's seat.

(5) If the provider walks or uses public transportation to transport a child to or from a facility, the provider shall ensure that:

- (a) each child being transported has a completed transportation permission form signed by their parent;
- (b) a staff member goes with and actively supervises each child;
- (c) a staff member transporting a child has emergency contact information outlined in Subsection R381-70-18(9) and a release for

each child being transported; and

(d) the staff-to-child ratio is maintained.

(6) The provider shall:

- (a) have transport liability insurance; or
 - (b) inform parents in writing that the provider does not have transport liability insurance.
- (7) Section R381-70-20 only applies to providers who offer transportation services.

R381-70-21. Animals.

(1) The provider shall inform each parent of the kinds of animals allowed at the facility.

(2) The provider shall ensure that there is no animal on the premises that:

- (a) has a history of biting even one individual;
- (b) has a history of dangerous, attacking, or aggressive behavior; or
- (c) is naturally aggressive.

(3) The provider shall ensure that any animal at the facility is clean and free of any obvious disease or health problem that could adversely affect a child.

- (4) The provider shall ensure that there is no animal or animal equipment in food preparation or eating areas.
- (5) If children help in the cleaning of animals or animal equipment, the provider shall ensure that the children wash their hands immediately after cleaning the animal or equipment.
- (6) The provider shall ensure that each child and staff wash their hands immediately after playing with or touching any reptile or amphibian.
- (7) The provider shall ensure that any dog, cat, or ferret that the facility houses have current rabies vaccinations.
- (8) The provider shall keep current animal vaccination records on-site for review by OL.

R381-70-22. Compliance.

Any person who violates this rule may be subject to the penalties in Rule R380-600 and Title 26B, Chapter 2, Part 7, Penalties and Investigations.

KEY: child care facilities, child care, child care centers, out of school time child care programs

Date of Last Change: ~~May 8, 2025~~2026

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Agency Information

1. Title catchline:	Health and Human Services, Residential Child Care Licensing	
Building:	Multi-Agency State Office Building	
Street address:	195 N 1950 W	
City, state:	Salt Lake City, UT	
Mailing address:	PO Box 142003	
City, state and zip:	Salt Lake City, UT 84114-2003	
Contact persons:		
Name:	Phone:	Email:
Kamille Sheikh	385-227-1290	kamillesheikh@utah.gov
Jada Stelmach	801-230-4296	jstelmach3@utah.gov
Mariah Noble	385-214-1150	mariahnoble@utah.gov
Please address questions regarding information on this notice to the persons listed above.		

General Information

2. Rule or section catchline:
R430-50. Residential Certificate Child Care
4. Purpose of the new rule or reason for the change:
The Office of Licensing (OL), within the Division of Licensing and Background Checks, acts as the lead regulatory authority, in partnership with the Utah Office of Child Care (OCC), to ensure oversight of health and safety requirements for any child care provider receiving a license, certification, or license-exempt status through OL.
In October 2024, the Utah OCC received conditional approval from the federal OCC for the federal fiscal year (FFY) 2025-2027 Child Care and Development Fund (CCDF) state plan. This conditional approval requires the lead regulatory partner (OL) to update the existing immunization standard to be age-appropriate for school-age children attending any child care program receiving a license, certification, or license-exempt status through OL, including in this rule.
Therefore, OL determined it is necessary to update this rule to comply with the CCDF requirement, as part of the Utah OCC state plan, for an immunization standard for school-age children attending any child care program regulated by OL.

5. Summary of the new rule or change:

This filing updates the immunization record language in Subsections R430-50-6(12) through R430-50-6(13) to comply with the CCDF requirement.

This filing also removes individual definitions for terms already defined in Rule R380-600 and updates an outdated citation.

Additionally, the filing makes style and formatting changes to align with the Rulewriting Manual for Utah and other rules under the Department of Health and Human Services (department).

Fiscal Information

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

A. State budget:

There is no anticipated cost or savings to the state budget as a result of this filing, as the provisions in this rule are part of OL's existing process of issuing a license, certification, or license-exempt status to child care providers.

The filing clarifies language in this rule regarding documentation for immunization records for any child in the care of a provider to be in compliance with federal child care funding requirements for immunization record standards.

This filing does not add to or remove any existing licensing processes.

The department does not anticipate any fiscal impact on the state budget as a result of the style and formatting changes included in this rule amendment.

B. Local governments:

There is no anticipated fiscal impact to local governments as a result of this filing, as this filing will not add to, modify, or remove requirements for local business licensing or any other process with which local government is involved.

Currently, there are no residential certificate child care programs operated by a local government.

This filing does not add to or remove any existing licensing processes for local government compliance, including for providers operated by a local government.

The department does not anticipate any fiscal impact on local governments as a result of the style and formatting changes included in this rule amendment.

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

There is no anticipated cost or savings to small businesses as a result of this filing, as child care providers have already been complying with this rule's requirements as part of OL's existing process.

This filing clarifies language in this rule regarding documentation for immunization records for any child in the care of a provider to be in compliance with federal child care funding requirements for immunization record standards.

This filing does not add to or remove any existing licensing processes for small business compliance.

The department does not anticipate any fiscal impact on small businesses as a result of the style and formatting changes included in this rule amendment.

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

There is no anticipated cost or savings to non-small businesses as a result of this filing, as child care providers have already been complying with this rule's requirements as part of OL's existing process.

This filing clarifies language in this rule regarding documentation for immunization records for any child in the care of a provider to be in compliance with federal child care funding requirements for immunization record standards.

This filing does not add to or remove any existing licensing processes for non-small business compliance.

The department does not anticipate any fiscal impact on non-small businesses as a result of the style and formatting changes included in this rule amendment.

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 to other persons as a result of this rule filing, as child care providers have already been complying with this rule's requirements as part of OL's existing process.

The filing clarifies language in this rule regarding documentation for immunization records for any child in the care of a provider to be in compliance with federal child care funding requirements for immunization record standards.

This filing does not add to or remove any existing licensing processes for compliance for other persons.

The department does not anticipate any fiscal impact to persons other than small businesses, state, or local government small businesses as a result of the style and formatting changes included in this rule amendment.

F. Compliance costs for affected persons:

There are no anticipated compliance costs for affected persons, identified as child care providers and the department, as a result of this rule filing, as child care providers have already been complying with this rule's requirements as part of OL's existing process.

This filing does not add to or remove any existing licensing processes for compliance for child care providers and the department.

The filing clarifies language in this rule regarding documentation for immunization records for any child in the care of a provider to be in compliance with federal child care funding requirements for immunization record standards.

The department does not anticipate any compliance costs as a result of the style and formatting changes included in this filing.

G. Regulatory Impact Summary Table (This table includes only fiscal impacts the agency was able to measure. If the agency could not estimate an impact, it is excluded from this table but described in boxes A through F.)

Regulatory Impact Summary Table					
Fiscal Cost	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
Total Fiscal Cost	\$0	\$0	\$0	\$0	\$0
Fiscal Benefits	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
Total Fiscal Benefits	\$0	\$0	\$0	\$0	\$0
Net Fiscal Benefits	\$0	\$0	\$0	\$0	\$0

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 S. Gruber, has reviewed and approved this regulatory impact analysis.

Citation Information

7. 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-2-402		

Public Notice Information

9. The public may submit written or oral comments to the agency identified in box 1.	
A. Comments will be accepted until:	05/15/2026
10. This rule change MAY become effective on:	05/22/2026
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

Agency head or designee and title:	Tracy S. Gruber, Executive Director	Date:	03/25/2026
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R430. Health and Human Services, Residential Child Care Licensing.

R430-50. Residential Certificate Child Care.

R430-50-1. Authority and Purpose.

- (1) Section 26B-2-402 authorizes this rule.
- (2) This rule establishes the foundational standards necessary to protect the health and safety of children in residential child care facilities and defines the general procedures and requirements to get and maintain a residential certificate to provide child care.

R430-50-2. Definitions.

- ~~(1)~~ Terms used in this rule are defined in Rule R380-600. Additionally:
- ~~(2)~~¹ "Background finding" means information in a background check ~~that~~ the Office of Background Processing (OBP) uses to determine if a covered individual is or is not eligible to be involved with child care.
- ~~(3)~~² "Barrier" means an enclosing structure including a fence, wall, bars, railing, or solid panel to prevent accidental or deliberate movement through or access to something.
- ~~(4)~~³ "Body fluid" means blood, urine, feces, vomit, mucus, or saliva.
- ~~(5)~~⁴ "Business day" means a day of the week the facility is open for business.
- ~~(6)~~⁵ "Business hours" means the hours the facility is open for business.
- ~~(7)~~⁶ "CCL" means Child Care Licensing in the Office of Licensing (OL), within the Division of Licensing and Background Checks (division), under the Department of Health and Human Services (department), ~~that~~ and is delegated with the responsibility to enforce ~~the rules under~~ Titles R381 and R430 and Rule R380-600.
- ~~(8)~~⁷ "Capacity" means the maximum number of children the provider is allowed to care for at any given time.
- ~~(9)~~⁸ "Caregiver" means a covered individual who protects the health and safety of children. A covered individual is a caregiver when they:
 - (a) count in the caregiver-to-child ratio;
 - (b) meet the physical or emotional needs of the children, including diapering, toileting, feeding, or protecting them from harm; or
 - (c) supervise children.
- ~~(10)~~⁹ "Caregiver-to-child ratio" means the number of caregivers responsible for a specific number of children.
- ~~(11)~~¹⁰ "Child care" means continuous care and supervision of at least one qualifying child that:
 - (a) is in place of care ordinarily provided by a parent in the parent's home;
 - (b) occurs for less than 24 hours a day; and
 - (c) is provided for direct or indirect compensation.
- ~~(12)~~¹¹ "Child care program" means a person or business that offers child care.
- ~~(13)~~¹² "Choking hazard" means an object or a removable part on an object with a diameter of less than 1-1/4 inches and a length of less than 2-1/4 inches that could be caught in a child's throat blocking the airway and making it difficult or impossible to breathe.
- ~~(14) "Covered individual" means the same as defined in Rule R380-600.~~
- ~~(15)~~¹³ "Crib" means an infant's bed with sides to protect them from falling including a bassinet, porta-crib, or play pen.
- ~~(16)~~¹⁴ "Cushioning" means a shock-absorbing surface under and around play equipment that reduces the severity of injuries from falls.
- ~~(17) "Department" means the Utah Department of Health and Human Services.~~
- ~~(18)~~¹⁵ "Designated play surface" means any:
 - (a) accessible elevated surface for standing, walking, crawling, sitting or climbing; or
 - (b) accessible flat surface that is at least two by two inches in size and has an angle less than 30 degrees from horizontal.
- ~~(19) "Eligible" means the same as defined in Rule R380-600.~~

-] (~~20~~16) "Entrapment hazard" means an opening greater than 3-1/2 by 6-1/4 inches and less than nine inches in diameter where a child's body could fit through but the child's head could not fit through, potentially causing entrapment and strangulation.
- (~~24~~17) "Experiencing homelessness" means anyone who lacks a fixed, regular, and adequate nighttime residence.
- (~~22~~18) "Facility" means a program or premises approved by OL to be used for child care.
- (~~23~~19) "Group" means the children who the provider assigns to one or more caregivers for their care and supervision.
- (~~24~~20) "Group size" means the total number of children in a group per room or area.
- (~~25~~21) "Guest" means an individual who is not a covered individual and is at the child care facility for a short time with the provider's permission.
- (~~26~~22) "Health care provider" means a licensed health professional, including a physician, dentist, nurse practitioner, or physician's assistant.
- (~~27~~23) "Inaccessible" means out of reach for children by being:
- behind a properly secured child safety gate;
 - if in a bathroom, at least 36 inches above any surface from where a child could stand or climb;
 - located at least 36 inches above the floor;
 - locked, including in a locked room, cupboard, or drawer; or
 - secured with a child safety device, including a child safety cupboard lock or doorknob device.
- (~~28~~24) "Infant" means a child who is younger than 12 months old.
- (~~29~~25) "Infectious disease" means an illness that is capable of being spread from one individual to another.
- (~~30~~26) "Involved with child care" means to do any of the following at or for a child care program:
- care for or supervise children;
 - count in the caregiver-to-child ratio;
 - have unsupervised contact with a child in care;
 - own, operate, direct;
 - reside; or
 - volunteer.
- (~~34~~27) "LIS supported finding" means a supported finding of child abuse or neglect in the Licensing Information System (LIS) database for child abuse and neglect, maintained by the department.
- ~~_____~~(~~32~~) "~~OBP~~" means the same as defined in Rule R380-600.
- ~~_____~~(~~33~~) "~~OL~~" means the same as defined in Rule R380-600.
-] (~~34~~28) "Over-the-counter medication" means medication that an individual can purchase without a written prescription, including any herbal remedy, vitamin, and mineral supplement.
- (~~35~~29) "Parent" means the parent or legal guardian of a child in care.
- (~~36~~30) "Play equipment platform" means a flat surface on a piece of stationary play equipment intended for more than one child to stand on and upon which a child can move freely.
- (~~37~~31) "Preschooler" means a child age two through four years old.
- (~~38~~32) "Qualifying child" means a child:
- child who is younger than 13 years old and is the child of an individual other than the child care provider or caregiver;
 - child who is younger than four years old and is the child of the provider or a caregiver; or
 - child with a disability who is younger than 18 years old and is the child of an individual other than the provider or caregiver.
- (~~39~~33) "Related child" means a child for whom a provider is the parent, stepparent, grandparent, step-grandparent, great-grandparent, sibling, step-sibling, aunt, step-aunt, great-aunt, uncle, step-uncle, or great-uncle.
- (~~40~~34) "Residential child care" means care that takes place in a child care provider's home.
- (~~44~~35) "Sanitize" means to use a product or process to reduce contaminants and bacteria to a safe level.
- (~~42~~36) "School-age child" means a child age five through 12 years old.
- (~~43~~37) "Sexually explicit material" means any depiction of actual or simulated sexual conduct.
- (~~44~~38) "Sleeping equipment" means a cot, mat, crib, bassinet, porta-crib, playpen, or bed.
- (~~45~~39) "Stationary play equipment" means equipment, including a climber, slide, swing, merry-go-round, or spring rocker, that is meant to stay in one location when a child uses it. Stationary play equipment does not include a:
- playhouse that sits on the ground or floor and does not have an attached slide, swing, or climber;
 - sandbox;
 - sensory table; or
 - stationary circular tricycle.
- (~~46~~40) "Strangulation hazard" means something on which a child's clothes or drawstrings could become caught or something in which a child could become entangled, including:
- a protruding bolt end that extends more than two threads beyond the face of the nut;
 - a rope, cord, or chain that is attached to a structure and is long enough to encircle a child's neck; or
 - hardware that forms a hook or leaves a gap or space between components including a protruding open S-hook.
- (~~47~~41) "Toddler" means a child ~~[age]~~who is 12 months through 23 months old.
- (~~48~~42) "Unsupervised contact" means being with, caring for, communicating with, or touching a child in the absence of a caregiver or other employee who is at least 18 years old and is considered eligible by OBP.
- (~~49~~43) "Use zone" means the area beneath and surrounding a play structure or piece of equipment that is designated for unrestricted movement around the equipment and onto which a child falling from or exiting the equipment could be expected to land.

NOTICES OF PROPOSED RULES

(~~50~~44) "Working day" means any day of the week the department is open for business.

R430-50-3. Residential Certificate.

(1) In accordance with Section 26B-2-404, an individual may become certified as a residential child care provider if they provide care:

- (a) for direct or indirect compensation;
- (b) for each child for less than 24 hours a day;
- (c) for eight or fewer qualifying children or up to ten children including the provider's own children in accordance with Subsection

26B-2-405(1)(b)(i);

- (d) for four or more hours a day;
- (e) in the absence of the child's parent;
- (f) in the provider's home; and
- (g) on a regularly scheduled, ongoing basis.

(2) An individual shall become licensed by OL as a child care provider in accordance with Rule R430-90 when the number of unrelated children in care is nine or more.

(3)(a) A person who is not required to become certified may voluntarily become certified, except for care that is for related children only or on a sporadic basis.

(b) A person who is not required to become certified as a residential child care provider, but provides child care services listed in Subsection R430-50-3(1) shall:

- (i) care for no more than two children under the age of three; and
- (ii) register with OL to facilitate a background check in accordance with Sections R430-50-8 and 26B-2-405.

R430-50-4. Fire and Other Health Inspections.

(1) If the local fire authority states in writing that an applicant for a new residential certificate or a renewal does not require a fire inspection, OL shall verify the applicant's compliance with the following:

- (a) address numbers and letters are readable from the street;
- (b) boiler, mechanical, and electrical panel rooms are not used for storage;
- (c) exit doors operate properly and are well maintained;
- (d) there are no obstructions in exits, aisles, corridors, and stairways;
- (e) there are working smoke detectors that are properly installed on each level of the building; and
- (f) there is at least one unobstructed fire extinguisher that is currently charged, serviced, and mounted not more than five feet above the floor.

(2) If an applicant for a new residential certificate serves food and the local health department states in writing that a kitchen inspection is not required, OL shall verify the applicant's compliance by ensuring:

- (a) any chemical is stored away from food and food service items;
- (b) any reusable food holder, utensil, and food preparation surface is washed, rinsed, and sanitized before each use;
- (c) food is properly stored, kept to the proper temperature, and in good condition;
- (d) the refrigerator is clean, in good repair, and working at or below 41 degrees Fahrenheit;
- (e) there is a working handwashing sink in the kitchen;
- (f) there is a working stem thermometer available to check cooking and hot hold temperatures; and
- (g) there is a working thermometer in the refrigerator.

R430-50-5. Immediate Closure.

(1) In accordance with Rule R380-600, OL may order the immediate closure of a facility if conditions at the facility create a clear and present danger to any child in care and may require immediate action to protect the children's health or safety.

(2) Upon receipt of an immediate closure notice, the provider shall give OL the names and mailing addresses of each enrolled child's parent so OL may notify the parents of the immediate closure.

(3) If there is a severe injury or death of a child in care, OL may order a child care provider to suspend services and prohibit new enrollments, pending a review by the Utah Child Fatality Review Committee or a determination of the probable cause of the injury or death by a medical professional.

R430-50-6. Administration and Children's Records.

(1) The provider shall:

- (a) be at least 18 years old;
- (b) be considered eligible by an OBP background check before becoming involved with child care;
- (d) complete at least 10 hours of child care training each year, based on the facility's residential certificate date; and
- (c) complete the new provider training offered by OL.

(2) The provider shall protect children from conduct that endangers any child in care or is contrary to the health, welfare, and safety of the public.

(3) The provider shall know and comply with applicable federal, state, and local law, ordinance, and rule, and shall be responsible for the operation and management of a child care program.

(4) The provider shall comply with licensing rules any time a child in care is present.

(5) The provider shall post their unaltered child care residential certificate on the facility premises in a place readily visible and accessible to the public during business hours.

(6) The provider shall post a current copy of OL's Parent Guide at the facility for parent review during business hours or give a current copy to each parent.

(7) The provider shall inform each parent and OL of any changes to the program's telephone number and other contact information within 48 hours of the change.

(8) The provider shall:

(a) have liability insurance; or

(b) inform parents in writing that the provider does not have liability insurance.

(9) The provider shall ensure that a parent completes an admission and health assessment form for their child before the child is admitted into the child care program.

(10) The provider shall ensure that each child's admission and health assessment form includes:

(a) the child's name;

(b) the child's date of birth;

(c) each parent's name, address, and phone number, including a daytime phone number;

(d) the names of individuals authorized by the parent to sign the child out from the facility;

(e) the name, address, and phone number of an individual to be contacted if an emergency happens and the provider cannot contact the parent;

(f) if available, the name, address, and phone number of an out-of-area emergency contact individual for the child;

(g) the parent's permission for emergency transportation and emergency medical treatment;

(h) any known allergy of the child;

(i) any known food sensitivity of the child;

(j) any chronic medical condition that the child may have;

(k) any instructions for special or nonroutine daily health care of the child;

(l) any current ongoing medication that the child may be taking; and

(m) any other special health instructions for the caregiver.

(11) The provider shall ensure that the admission and health assessment form is:

(a) reviewed, updated, and signed or initialed by the parent at least annually; and

(b) kept on-site for review by OL.

(12) Before admitting any child[~~younger than five years old~~] into the program, including the provider's or an employee's own child, the provider shall obtain the following documentation from the child's parent:

(a) a record of current immunizations;

(b) a medical schedule to receive required immunizations;

(c) a legal exemption to current immunization requirements; or

(d) a 90-day exemption for any foster child or child who is experiencing homelessness.

(13) For each child in the program[~~younger than five years old~~], including the provider's or employee's own child, the provider shall keep the child's current immunization records on-site for review by OL.

(14) The provider shall submit the annual immunization report to the Utah Statewide Immunization Information System by the date specified by the department.

(15) The provider shall ensure that each child's information is confidential and not released without written parental permission except to OL.

R430-50-7. Personnel and Training Requirements.

(1) The provider shall remain present at the home at least 50% of the time each week the program is open for business.

(2) If the provider is not present, the provider shall ensure that there is at least one covered individual who is 18 years old or older present at the facility when there is a child in care.

(3) The provider shall ensure that any covered individual caring for the children is supervised, qualified, and trained to:

(a) meet the needs of each child; and

(b) comply with this rule.

(4) The provider shall ensure that each caregiver working with a child:

(a) completes at least ten hours of child care training each year, based on the facility's residential certificate date, or at least 45 minutes of child care training each month they work if hired partway through the facility's licensing year;

(b) completes the 2-1/2 hour preservice training offered by OL before becoming involved with child care;

(c) is at least 16 years old;

(d) is considered eligible by an OBP background check before becoming involved with child care; and

(e) knows and follows any applicable law and this rule.

(5) The provider shall ensure that any other staff, including any driver, cook, and clerk:

(a) completes the 2-1/2 hour preservice training offered by OL before becoming involved with child care;

(b) is considered eligible by an OBP background check before becoming involved with child care;

(c) is introduced to other staff and to the caregiver's assigned group;

(d) knows and follows any applicable law and this rule; and

NOTICES OF PROPOSED RULES

- (e) reviews the information in each child's health assessment in the caregiver's assigned group, including allergies, food sensitivities, and other individual needs.
- (6) The provider shall ensure that each volunteer is considered eligible by an OBP background check before becoming involved with child care.
- (7) The provider shall submit a background check as required in Section R430-50-8 for each guest who is 12 years old and older and stays in the home for more than two weeks.
- (8) The provider shall ensure that each household member who is:
 - (a) 12 to 17 years old is considered eligible by an OBP background check; and
 - (b) 18 years old or older is considered eligible by an OBP background check that includes fingerprints.
- (9) The provider shall ensure that an individual who provides an Individualized Educational Plan or Individualized Family Service plan services including any physical, occupational, or speech therapist:
 - (a) provides identification before having access to the facility or to a child at the facility; and
 - (b) has received the child's parent's permission for services to take place at the facility.
- (10) The provider shall ensure that any individual from law enforcement, Child Protective Services, the department, and any similar entity provides identification before having access to the facility or to a child at the facility.
- (11) The provider shall ensure that each covered individual required to complete preservice training receives the 2-1/2 hour preservice training offered by OL that includes at least the following topics:
 - (a) administration of medication;
 - (b) applicable laws and requirements under Rule R430-50;
 - (c) building and physical premises safety;
 - (d) child and brain development, including the social, emotional, physical, cognitive, and language principles of child growth;
 - (e) children whose special needs may include a disability;
 - (f) emergency preparedness, response, and recovery plan;
 - (g) pediatric first aid and CPR;
 - (h) precautions in transporting children;
 - (i) prevention and control of infectious diseases including immunizations;
 - (j) prevention of and response to emergencies due to food and allergy reactions;
 - (k) prevention of shaken baby syndrome, abusive head trauma, child maltreatment, and coping with crying babies;
 - (l) prevention of sudden infant death syndrome and the use of safe sleeping practices;
 - (m) prevention, signs, and symptoms of child abuse and neglect, including child sexual abuse, and legal reporting requirements;
 - (n) recognizing the signs of an individual experiencing homelessness and available assistance; and
 - (o) safe handling and disposal of hazardous materials and bio contaminants.
- (12) The provider shall ensure that annual child care training includes at least each topic listed in:
 - (a) Sections R430-50-7 through R430-50-24; and
 - (b) Subsections R430-50-7(11)(a) through (o).
- (13) The provider shall ensure that at least half of the required annual training is interactive.
- (14) The provider shall ensure that at least one covered individual with a current Red Cross, American Heart Association, or equivalent pediatric first aid and CPR certification is present when a child is in care:
 - (a) at each offsite activity;
 - (b) at the facility; and
 - (c) in each vehicle transporting a child.
- (15) The provider shall ensure that CPR certification includes hands-on testing.
- (16) The provider shall ensure that current pediatric first aid and CPR certification records for each covered individual required by this rule to have them are on-site for review by OL.

R430-50-8. Background Checks.

- (1) Before a new covered individual becomes involved with child care, the provider shall use the licensing provider portal search to verify that the individual is eligible and:
 - (a) associate that individual with the provider's facility; or
 - (b) not associate the individual if the individual is associated with another CCL facility and the new individual will be at the facility for no more than one business day.
- (2) Before a new covered individual who does not appear in the licensing provider portal search becomes involved with child care in the program, the provider must require the individual to submit an online background check form and fingerprints for any individual age 16 years old and older, except for any individual 12-17 years old who is only listed as a household member; and
 - (a) authorize the individual's background check through the licensing provider portal;
 - (b) pay any required fee; and
 - (c) only allow the individual to be involved with child care if they have an eligible OBP background check determination.
- (3) To keep a covered individual's background check eligibility current, the provider shall require the covered individual to submit a new background check application, fingerprints, and any fee if the covered individual has:
 - (a) not been associated with an active, CCL approved child care facility within the past 180 days;
 - (b) resided outside of Utah since their last background check was completed; or

(c) turned 18 years old and has not previously submitted fingerprints for an OBP background check, except when the 18-year-old has previously submitted fingerprints for an OBP background check, then only a new background check application is required.

(4) Within ten working days from when a child who resides in the facility turns 12 years old, the provider shall ensure that an online background check application is submitted, and:

- (a) authorize the child's background check through the licensing portal; and
- (b) pay any required fee.

(5) The provider shall ensure that fingerprints are prepared by a local law enforcement agency or an agency approved by local law enforcement.

(6) If a covered individual submits fingerprints electronically through live scan, the provider shall ensure that the agency taking the fingerprints is one that follows OBP's fingerprinting requirements.

(7) OBP may consider a covered individual not eligible for any of the following reasons:

- (a) a pending charge for a felony offense;
- (b) any felony conviction;
- (c) any of the reasons listed under Subsection (8);
- (d) LIS supported findings that occurred no more than 15 years from the date the application was submitted;
- (e) the covered individual knowingly making a false statement related to their background check;
- (f) the covered individual refusing to consent to the criminal background check; or
- (g) the covered individual's name appearing on the Utah or national sex offender registry.

(8) OBP may also consider a covered individual not eligible if the individual has been convicted, has pled no-contest, or is currently subject to a plea and abeyance or diversion agreement for any of the following pending charges or convictions, regardless of severity:

- (a) child pornography;
- (b) driving under the influence while a child is present in the vehicle;
- (c) lewdness involving a child;
- (d) pornographic material or performance;
- (e) providing dangerous weapons or firearms to a minor;
- (f) sexual battery;
- (g) sexual enticing of a minor;
- (h) sexual exploitation;
- (i) voyeurism; or
- (j) any crime against an individual.

(9) OBP shall consider a covered individual eligible if the only background finding is a conviction or plea of no contest to a nonviolent drug offense that occurred ten or more years before OBP conducted the background check.

(10) If the provider is not eligible by OBP, OL may suspend or deny their license until the reason for the background check finding is resolved.

(11) If a covered individual is considered not eligible by OBP, including if the individual has been convicted, has pleaded no contest, or is currently subject to a plea in abeyance or diversion agreement for a felony or misdemeanor, the provider shall prohibit that individual from being employed by the child care program or residing at the facility until the reason for the background check finding is resolved.

(12) If OBP denies a covered individual a license or employment by the provider based upon the criminal background check and the covered individual disagrees with the information provided by the Department of Public Safety (DPS), the covered individual may appeal the information to DPS.

(13) The provider and the covered individual shall notify OBP within 48 hours of becoming aware of a covered individual's arrest warrant, felony or misdemeanor arrest, charge, conviction, or LIS supported finding. Failure to notify OBP within 48 hours may result in disciplinary action, including license revocation.

(14) The OBP director or designee may consider any additional relevant background information in making the decision to grant, deny, or continue an eligible determination on a background check, including:

- (a) intervening circumstances regarding an offense or finding;
- (b) steps taken to correct or improve since any offense or finding;
- (c) surrounding circumstances of an offense or finding;
- (d) the length of time since an offense or finding; and
- (e) the type and number of offenses or findings.

(15)(a) OBP shall rely on relevant information from Subsections (7) and (8) as conclusive evidence and may deny a covered individual based on that information.

(b) When a covered individual no longer works for the program, the provider shall separate that employee in the program's roster in the online system within five days of the employee's separation from the program.

(c) A covered individual may resubmit a denied application to OBP no sooner than two years from the date of separation or upon substantial change to the covered individual's circumstances.

(16) If OBP determines evidence exists that a covered individual has been arrested or charged with an offense that may be denied under Subsections (7) and (8), the ~~[D]~~division ~~[of Licensing and Background Checks]~~ may act to protect the health and safety of a child.

(17) The provider may only allow a covered individual with a pending arrest or criminal charge to access a child when:

- (a) OBP has authorized conditional access; and
- (b) the provider can demonstrate to OBP that the work arrangement does not pose a threat to the health or safety of any child.

NOTICES OF PROPOSED RULES

(18) A covered individual may request a hearing, in accordance with Section R497-100-5, within 15 calendar days of being informed in writing of any OBP decision.

R430-50-9. Facility.

(1) The provider shall ensure that there is at least 35 square feet of indoor space for each child in care, including the provider's or employee's own child.

(2) The provider may include floor space used for furniture, fixtures, or equipment as indoor space per child if the furniture, fixture, or equipment is used:

- (a) by children;
- (b) for the care of children; or
- (c) to store materials for children.

(3) When measuring indoor space for children's use, the provider may not include any:

- (a) bathroom;
- (b) closet;
- (c) entryway;
- (d) hallway; and
- (e) lobby.

(4) The provider shall ensure that the number of children in care at any given time does not exceed the capacity identified on the residential certificate, except when providing after school child care for up to two additional school-age children.

(5)(a) The provider shall ensure that any building or play structure on the premises constructed before 1978 that has peeling, flaking, chalking, or failing paint undergoes a test for lead.

(b) If there is lead-based paint at the facility, the provider shall contact their local health department within five working days and follow required procedures for remediation of the lead hazard.

(6) The provider shall ensure that each room and indoor area that children use is ventilated by mechanical ventilation or by windows that open and have screens.

(7) The provider shall ensure that rooms and areas have adequate light intensity for the safety of the children and the type of activity the provider is conducting.

(8) The provider shall maintain the indoor temperature between 65 and 82 degrees Fahrenheit.

(9) The provider shall ensure that there is a working telephone:

- (a) at the facility;
- (b) during any offsite activity; and
- (c) in each vehicle while transporting a child.

(10) The provider shall ensure that there is at least one working toilet and one working handwashing sink accessible to each nondiapered child in care.

(11) The provider shall ensure that there is a bathroom that provides privacy available for use by any school-age child.

(12) If there is a swimming pool on the premises that the provider does not empty after each use, the provider shall:

- (a) maintain the pool in a safe manner;
- (b) meet applicable state and local laws and ordinances related to the operation of a swimming pool; and
- (c) when not in use:

(i) cover the pool with a commercially made safety enclosure that is installed according to the manufacturer's instructions or

(ii) enclose the pool within at least a four-foot-high fence or solid barrier that is kept locked and that separates the pool from any other areas on the premises.

(13) If there is a hot tub with water in it on the premises, the provider shall make the hot tub inaccessible to children by:

(a) keeping the hot tub locked with a properly working cover; or

(b) enclosing the hot tub within at least a four-foot-high fence or solid barrier that is locked and that separates the hot tub from any other areas on the premises.

(14) The provider shall maintain any building and outdoor area in good repair and safe condition, including any:

- (a) ceiling, wall, and floor covering;
- (b) drape, blind, and other window covering;
- (c) entrance, exit, step, and walkway, including keeping them free of ice, snow, and other hazards;
- (d) furniture, toy, and material accessible to a child;
- (e) indoor and outdoor equipment; and
- (f) lighting, bathroom, and other fixture.

(15) The provider shall ensure that a protective barrier of at least three feet or higher exists for:

- (a) any accessible raised deck or balcony that is five feet or higher; and
- (b) any open stairwell that is five feet or deeper.

(16) If the house is subdivided, any part of the building is rented out, or any area of the facility is shared including the outdoor area, OL may inspect the entire facility and the provider shall ensure that covered individuals in the facility comply with this rule, except when:

- (a) there are no connecting interior doorways that can be used by an unauthorized individual;
- (b) there is a separate entrance for the child care program;
- (c) there is a separate mailing address for the rented area;
- (d) there is a signed rental or lease agreement for the rented area; and

(e) there is no shared access to the outdoor area, unless a qualified caregiver is with the children each time children in care are using the outdoor area.

(17) If there is an outdoor area used by children in care, the provider shall comply with Subsections R430-50-9(18) through R430-50-9(23).

(18) The provider shall ensure that the outdoor area is safely accessible to any child.

(19) The provider shall ensure that the outdoor area has at least 40 square feet of space for each child using the area at one time.

(20) The provider shall ensure that the outdoor area is enclosed within a fence, wall, or solid natural barrier that is at least four feet high if the facility is on a street or within a half mile of a street that:

(a) has a speed of 25 miles per hour or higher; or

(b) has more than two lanes of traffic.

(21) The provider shall ensure that the following hazards are separated from the children's outdoor area with a fence, wall, or solid natural barrier that is at least four feet high:

(a) a drop-off of more than five feet on or within 50 yards of the property line;

(b) a water hazard, including:

(i) a creek;

(ii) a ditch;

(iii) a lake;

(iv) a pond;

(v) a pool;

(vi) a reservoir;

(vii) a river;

(viii) a swimming pool; or

(ix) an animal watering trough, on or within 100 yards of the property line;

(c) any barbed wire that is within 30 feet of the children's play area;

(d) any dangerous machinery, including farm equipment, on or within 50 yards of the property line; and

(e) any livestock on or within 50 yards of the property line.

(22) The provider shall ensure that there is no gap five by five inches or greater in or under the fence or barrier.

(23) The provider shall ensure that there is shade available to protect any child from excessive sun and heat when in the outdoor area.

R430-50-10. Ratios and Group Size.

(1) The provider shall maintain at least one caregiver for up to eight children in care.

(2) When caring for children younger than two years old, the provider shall ensure that:

(a) there is at least one caregiver for every three children younger than two years old;

(b) each caregiver cares for no more than two children younger than 18 months old; and

(c) there are at least two caregivers if more than three children younger than two years old are present and there are more than six children in care.

(3) The provider shall include the provider's and employee's own child age four years old or older in care:

(a) in the group size when the parent of the child is working at the facility; and

(b) in the group size and the caregiver-to-child ratio when the parent of the child is not working at the facility.

R430-50-11. Child Supervision and Security.

(1) The provider shall ensure that each caregiver provides and maintains active supervision of each child, including:

(a) focusing attention on the children and not on caregivers' personal interests;

(b) interacting in-person with the children at least every 15 minutes;

(c) knowing the number of children in their care at any time;

(d) remaining in the outdoor area when a child younger than five years old is in the outdoor area; and

(e) remaining inside the home when a child in care is inside the home.

(2) The provider shall ensure a 16 or 17 year old staff or household member may only have unsupervised contact with a child in care, including during offsite activities and transportation, if:

(a) the director or the director designee is physically present and available as needed; and

(b) the staff or household member is not a volunteer.

(3) The provider may not assign a staff member, volunteer, or household member who is younger than 16 years old to care for or supervise any child in care.

(4) The provider shall ensure that any guest does not have unsupervised contact with any child in care, including during any offsite activity and transportation.

(5) The provider shall ensure that any parent of a child in care does not have unsupervised contact with any child in care, except with their own child.

(6) The provider may allow school-age children to go outdoors while caregivers are indoors if:

(a) a caregiver can hear the children when children are outdoors; and

(b) the children are in an area completely enclosed within a fence, wall, or solid natural barrier that is at least four feet high.

(7) The provider shall ensure that a caregiver monitors each sleeping infant by:

(a) personally observing each sleeping infant at least once every 15 minutes; or

NOTICES OF PROPOSED RULES

- (b) placing each infant to sleep within the sight and hearing of a caregiver.
- (8) The provider may allow a child to participate in supervised offsite activities without a caregiver if:
 - (a) the provider has clearly assigned the responsibility for the child's whereabouts and supervision to a responsible adult who accepts that responsibility throughout the period of the offsite activity; and
 - (b) the provider has prior written permission from the child's parent for the child's participation.
- (9) The provider shall ensure that parents have access to their child and the areas used to care for their child when their child is in care.
- (10) To maintain security and supervision of children, the provider shall ensure that:
 - (a) any individual signing a child in and out uses an identifier, including a signature, initials, or electronic code;
 - (b) each child is signed in and out in accordance with this section;
 - (c) only a child's parent or an individual with written authorization from the parent may sign-out a child;
 - (d) photo identification is required if the individual signing the child out is unknown to the provider;
 - (e) the sign-in and sign-out records include the date and time each child arrives and leaves; and
 - (f) there is written permission from the child's parent if children sign themselves in or out.
- (11) In an emergency, the provider shall accept the parent's verbal authorization to release a child if the provider can confirm the identity of:
 - (a) the person giving verbal authorization; and
 - (b) the person picking up the child.

R430-50-12. Child Guidance and Interaction.

- (1) The provider shall ensure that no child is subjected to physical, emotional, or sexual abuse while in care.
- (2) The provider shall inform each child, each parent, and anyone who interacts with any child in care of the facility's behavioral expectations and how any misbehavior will be handled.
- (3) The provider shall ensure that any individual who interacts with a child guides the child's behavior by using positive reinforcement, redirection, and by setting clear limits that promote the child's ability to become self-disciplined.
- (4) The provider shall ensure that each caregiver uses use gentle, passive restraint with a child only when it is needed to protect a child from injuring themselves or others, or to stop a child from destroying property.
- (5) The provider shall ensure that each interaction with a child does not include:
 - (a) any action that produces physical pain or discomfort, including hitting, spanking, shaking, biting, or pinching;
 - (b) any form of corporal punishment;
 - (c) any form of emotional mistreatment;
 - (d) confining a child in a closet, locked room, or other enclosure including a box, cupboard, or cage;
 - (e) forcing or withholding food, rest, or toileting;
 - (f) restraining a child's movement by binding, tying, or any other form of restraint that exceeds gentle, passive restraint; or
 - (g) shouting at children.
- (6) Any individual who witnesses or suspects that a child has been subjected to abuse, neglect, or exploitation shall immediately notify Child Protective Services or law enforcement as required in Section 80-2-602.

R430-50-13. Child Safety and Injury Prevention.

- (1) The provider shall ensure that any child and staff use each building, outdoor area, toy, and any equipment safely and as intended by the manufacturer to prevent injury to children.
- (2) The provider shall ensure that any poisonous or harmful plant is inaccessible to children.
- (3) The provider shall ensure that any sharp object, edge, corner, or point that could cut or puncture skin is inaccessible to children.
- (4) The provider shall ensure that any choking hazard is inaccessible to any child younger than three years old.
- (5) The provider shall ensure that any strangulation hazard, including any rope, cord, chain, and wire attached to a structure and long enough to encircle a child's neck is inaccessible to children.
- (6) The provider shall ensure that any tripping hazard including unsecured flooring, any rug with a curled edge, or cord in a walkway is inaccessible to children.
- (7) The provider shall ensure that any empty plastic bag large enough for a child's head to fit inside, any latex glove, or balloon is inaccessible to any child younger than five years old.
- (8) The provider shall ensure that standing water that measures two inches or deeper and five by five inches or greater in diameter is inaccessible to children.
- (9) The provider shall ensure that any toxic or hazardous chemical, including any cleaner, insecticide, lawn product, and flammable, corrosive, and reactive material is:
 - (a) disposed of properly;
 - (b) inaccessible to any child;
 - (c) stored in a container labeled with the contents of the container; and
 - (d) used according to manufacturer instructions.
- (10) The provider shall ensure that the following items are inaccessible to children:
 - (a) cigarette lighters;
 - (b) hot wax or other hot substances;
 - (c) matches;

- (d) open flames; and
- (e) when in use, portable space heaters, wood burning stoves, and fireplaces.
- (11) The provider shall ensure that the following items are inaccessible to a child:
 - (a) any live electrical wire; and
 - (b) for a child younger than five years old, any electrical outlet and surge protector without a protective cap or safety device when not in use.
- (12) Unless used and stored as allowed by any state or federal law, the provider shall ensure that any firearm, including a gun, muzzleloader, rifle, shotgun, handgun, pistol, and automatic gun, is:
 - (a) locked in a cabinet or area using a key, combination lock, or fingerprint lock; and
 - (b) stored unloaded and separate from ammunition.
- (13) The provider shall ensure that any weapon, including a paintball gun, BB gun, airsoft gun, sling shot, arrow, and mace, is inaccessible to children.
- (14) The provider shall ensure that any alcohol, illegal substance, or sexually explicit material is inaccessible and not used on the premises, during any offsite activity, or in any facility vehicle any time a child is in care.
- (15) The provider shall ensure that an outdoor source of drinking water, including individually labeled water bottles, a pitcher of water and individual cups, or a working water fountain is available to each child when the outside temperature is 75 degrees Fahrenheit or higher.
- (16) The provider shall ensure that each area accessible to a child is free of any heavy or unstable object that a child could pull down on themselves, including any furniture, unsecured television, and standing ladder.
- (17) The provider shall ensure that hot water accessible to a child does not exceed 120 degrees Fahrenheit.
- (18) The provider shall ensure that highchairs that are used by children have T-shaped safety straps or safety devices that are used when a child is in the chair.
- (19) The provider shall ensure that infant walkers with wheels are inaccessible to children.
- (20) The provider shall ensure that any tobacco, e-cigarette, e-juice, e-liquid, or similar product is inaccessible and, in compliance with Title 26, Chapter 38, the Utah Indoor Clean Air Act described in Section 26B-7-503 and Rule R392-510, is not used:
 - (a) in a facility or any other building when a child is in care;
 - (b) in any vehicle that is being used to transport a child in care;
 - (d) in any outdoor area or within 25 feet of any outdoor area occupied by a child in care;
 - (c) within 25 feet of any entrance to a facility or other building occupied by a child in care.

R430-50-14. Emergency Preparedness, Response, and Recovery.

- (1) The provider shall develop and follow a written emergency preparedness, response, and recovery plan that:
 - (a) includes a procedure for:
 - (i) accommodating a child with a disability;
 - (ii) accommodating a child with a chronic medical condition;
 - (iii) accommodating any infant and toddler;
 - (iv) communication with and reunification of families;
 - (v) continuity of operations;
 - (vi) evacuation;
 - (vii) lockdown;
 - (viii) relocation; and
 - (ix) shelter in place.
 - (b) includes instructions to follow if there is an allergy, serious reaction to food, or any other trigger that may affect a child's health;
- and
- (c) is followed if an emergency happens, unless otherwise instructed by emergency personnel.
- (2) The provider shall post the home's street address and any emergency numbers, including at least fire, police, and poison control, near each telephone or in an area clearly visible to anyone needing the information.
 - (3) The provider shall keep first aid supplies in the facility, including at least antiseptic, bandages, and tweezers.
 - (4) The provider shall conduct a fire evacuation drill every six months and make sure each drill includes a complete exit of each child, staff member, and volunteer from the building.
 - (5) The provider shall conduct a drill for disasters, other than fires, at least once every 12 months.
 - (6) The provider shall vary the days and times when fire and other disaster drills are held.
 - (7) The provider shall:
 - (a) give each parent a written report on the day of occurrence of each incident, accident, or injury involving their child;
 - (b) ensure the report has the signatures of the caregivers involved, the provider, and the individual picking up the child; and
 - (c) if a school-age child signs themselves out of the facility, send a copy of the report to the parent on the day following the occurrence.
 - (8) If a child is injured and the injury appears serious but not life-threatening, the provider shall contact the child's parent immediately.
 - (9) If a life-threatening injury to a child, or an injury that poses a threat of the loss of vision, hearing, or a limb happens, the provider shall:
 - (a) call emergency personnel immediately; and
 - (b)(i) contact the parent after emergency personnel are called; or
 - (ii) if the parent cannot be reached, try to contact the child's emergency contact individual.

NOTICES OF PROPOSED RULES

(10) If a child is injured while in care and receives medical attention, or for a child fatality, the provider shall submit a critical incident report to OL within the next business day of the incident.

(11) If the provider must leave the children due to an emergency and a background checked covered individual who is at least 18 years old or older is not available to stay with the children, the provider may leave the children in the care of an emergency substitute who:

- (a) is at least 18 years old;
- (b) substitutes the caregiver for the minimum time possible and for less than one business day; and
- (c) signs a written background statement before being left alone with the children.

(12) Before leaving for the emergency, the provider must obtain a signed, written background statement from the emergency substitute stating that the emergency substitute:

- (a) has not been convicted of a felony;
- (b) has not been convicted of a crime against a person;
- (c) is not listed on the state or national sex offender registry; and
- (d) is not being investigated for abuse or neglect by any federal, state, or local government agency.

(13) Within five working days after the occurrence, the provider shall submit emergency substitute's written background statements to OBP for review.

(14) The provider shall ensure compliance with incident reporting in accordance with Subsection R380-600-7(16).

R430-50-15. Health and Infection Control.

(1) The provider shall maintain the building, furnishings, equipment, and outdoor area including keeping:

- (a) any frequently touched surface, including each doorknob and light switch, clean and sanitized;
- (b) each area and any equipment used for the storage, preparation, and service of food clean and sanitized;
- (c) each surface free of rotting food or a build-up of food;
- (d) each wall and floor clean and free of spills, dirt, and grime;
- (e) the building and grounds free of a build-up of litter and garbage; and
- (f) the building and grounds free of animal feces.

(2) The provider shall take safe and effective measures to prevent and eliminate the presence of insects, rodents, and other pests.

(3) The provider shall clean and sanitize any toy and material used by a child:

- (a) at least once a week or more often if needed;
- (b) after being put in a child's mouth and before another child plays with the toy; and
- (c) after being contaminated by a body fluid.

(4) The provider shall ensure that any fabric toy and item including any stuffed animal, cloth doll, pillow cover, and dress-up clothing is machine washable and if used, washed at least each week or as needed.

(5) The provider shall clean and sanitize each highchair tray before each use.

(6) The provider shall clean and sanitize each water play table or tub daily, if used by a child.

(7) The provider shall clean and sanitize each bathroom surface including each toilet, sink, faucet, toilet and sink handle, and counter each business day.

(8) The provider shall clean and sanitize each potty chair after each use.

(9) The provider shall ensure that toilet paper is accessible and kept in a dispenser that is accessible to each child.

(10) The provider shall ensure that each staff member and volunteer washes their hands thoroughly with liquid soap and running water:

- (a) after cleaning up or taking out garbage;
- (b) after contact with a body fluid;
- (c) after using the toilet or helping a child use the toilet;
- (d) before and after eating meals and snacks or feeding a child;
- (e) before handling or preparing food or bottles;
- (f) upon arrival; and
- (g) when coming in from outdoors.

(11) The provider shall ensure that each caregiver teaches each child how to wash the child's hands thoroughly and that the caregiver oversees handwashing when possible.

(12) The provider shall ensure that each child washes their hands thoroughly with liquid soap and running water:

- (a) after contact with a body fluid;
- (b) after using the toilet;
- (c) before and after eating meals and snacks;
- (d) before using a water play table or tub;
- (e) upon arrival; and
- (f) when coming in from outdoors.

(13) The provider shall ensure that only single-use towels, an electric hand dryer, or individually labeled cloth towels are used to dry hands.

(14) The provider shall ensure that if cloth towels are used, cloth towels are:

- (a) not shared; and
- (b) washed daily.

- (15) The provider shall ensure that any personal hygiene items, including a toothbrush, comb, and hair accessory, are not shared and are stored so they do not touch each other or they are sanitized between each use.
- (16) The provider shall ensure that any pacifier, bottle, and nondisposable drinking cup is:
- labeled with each child's name or individually identified; and
 - not shared, or washed and sanitized before being used by another child.
- (17) The provider shall ensure the prompt change of a child's clothing if the child has a toileting accident.
- (18) The provider shall ensure that a child's clothing that is wet or soiled from a body fluid is:
- not rinsed or washed at the center;
 - placed in a leakproof container that is labeled with the child's name; and
 - returned to the parent.
- (19) The provider shall ensure that staff take precautions when cleaning any floor, furniture, or other surface contaminated by blood, urine, feces, or vomit, and ensure that, except for diaper changes and toileting accidents, staff cleaning these bodily fluids shall:
- clean the surface using a detergent solution;
 - rinse the surface with clean water;
 - sanitize the surface;
 - throw away, in a leakproof plastic bag, any disposable material, including paper towels, that were used to clean up the body fluid;
 - wash and sanitize any non-disposable material used to clean up the body fluid, including any cleaning cloth, mop, or reusable rubber glove, before reusing it;
 - wear waterproof gloves; and
 - wash their hands after cleaning up the body fluid.
- (20) If a child becomes ill while in care, the provider shall:
- as soon as the illness is observed or suspected, contact the child's parent or, if the parent cannot be reached, an individual listed as the emergency contact; and
 - if the child is ill with an infectious disease, make the child comfortable in a safe, supervised area that is separated from any other child until the parent arrives.
- (21) The provider shall notify the parents of each child in care if any child, employee, or person in the home has an infectious disease or parasite on the day the illness is discovered.
- (22) If any child or employee has an infectious disease, an unusual or serious illness, or a sudden onset of an illness, the provider shall notify the local health department on the day the illness is discovered.
- (23) To prevent contamination of food, the spread of foodborne illnesses, and other diseases, the provider shall ensure that an individual with an infectious disease, or showing symptoms including diarrhea, fever, coughing, or vomiting, does not prepare or serve foods.

R430-50-16. Food and Nutrition.

- The provider shall ensure that each child two years old and older is offered a meal or snack at least once every three hours.
- If the provider supplies food for children's meals or snacks, the provider shall ensure that:
 - the meal service meets local health department food service rules;
 - the foods that are served meet the nutritional requirements of the USDA Child and Adult Care Food Program (CACFP) whether or not the provider participates in the CACFP;
 - the provider uses the CACFP meal pattern requirements, the standard OL-approved menus, or menus approved by a registered dietitian, and that dietitian approval is noted and dated on the menus, and current within the past five years;
 - the current week's menu is posted for review by parents and OL; and
 - if not participating or in good standing with the CACFP, keep a six-week record of foods served at each meal and snack.
- The provider shall ensure that the individual who serves food to a child:
 - is aware of each child in their assigned group who has any food allergy or sensitivity; and
 - ensures that a child is not served the food that the child is allergic or sensitive to.
- The provider may not place a child's food on a bare table, and shall serve a child's food on a dish, napkin, or sanitary highchair tray, except an individual finger food, including a cracker, that may be placed directly in a child's hand.
- If a parent brings food and drink for their child's use, the provider shall ensure that the food and drink is:
 - consumed only by that child;
 - labeled with the child's name; and
 - refrigerated if needed.

R430-50-17. Medications.

- The provider shall make medications inaccessible to children in care.
- The provider shall lock any refrigerated medication or store it at least 36 inches above the floor and, if liquid, store it in a separate leakproof container.
- If a parent supplies any over-the-counter or prescription medication, the provider shall ensure that medication:
 - is labeled with the child's full name;
 - is stored in the original or pharmacy container; and
 - has the original label.
- The provider shall obtain a written medication permission form completed and signed by the parent before administering any medication supplied by the parent for their child.

NOTICES OF PROPOSED RULES

- (5) The provider shall ensure that the medication permission form includes at least:
 - (a) a parent signature and the date signed;
 - (b) any written instructions for administration;
 - (c) the name of the child; and
 - (d) the name of the medication.
- (6) The provider shall ensure that instructions for administering the medication include at least:
 - (a) how the medication will be given;
 - (b) the disease or condition being treated;
 - (c) the dosage; and
 - (d) the times and dates to administer the medication.
- (7) If the provider supplies an over-the-counter medication for a child's use, the provider shall ensure that no staff administer the medication to any child without previous parental consent for each instance it is given. The provider shall ensure that the consent is:
 - (a) written; or
 - (b) verbal, if the date and time of the consent is documented and signed by the parent upon picking up their child.
- (8) The provider shall ensure that the staff administering the medication:
 - (a) administers the medication;
 - (b) checks the medication label or the package to ensure that a child is not given a dosage larger than that recommended by the health care professional or manufacturer;
 - (c) checks the medication label to confirm the child's name if the parent supplied the medication; and
 - (d) washes their hands.
- (9) The provider shall ensure that immediately after administering a medication, the staff giving the medication records:
 - (a) any error in administering the medication or adverse reactions;
 - (b) the date, time, and dosage of the medication given; and
 - (c) their signature or initials.
- (10) The provider shall report to the parent a child's adverse reaction to a medication or error in administration of the medication immediately upon recognizing the reaction or error, or after notifying emergency personnel if the reaction is life-threatening.
- (11) The provider shall notify the parent before the scheduled medication dosage to a child if the provider chooses not to administer medication as instructed by the parent.
- (12) The provider shall keep a six-week record of medication permission and administration forms on-site for review by OL.

R430-50-18. Activities.

- (1) The provider shall offer daily activities that support each child's healthy physical, social, emotional, cognitive, and language development.
- (2) The provider shall ensure that physical development activities include light, moderate, and vigorous physical activity for a daily total of at least 15 minutes for every two hours that children spend in the program.
- (3) The provider shall ensure that any toy, material, and equipment needed to support a child's healthy development is available to each child.
- (4) Except for occasional special events, the provider shall ensure that each child's primary screen time activity on media, including any television, cell phone, tablet, and computer, is:
 - (a) not allowed for a child zero to 17 months old;
 - (b) limited for a child 18 months to four years old to one hour a day, or five hours a week with a maximum screen time of two hours per activity; and
 - (c) planned to address the needs of a child five to 12 years old.
- (5) If the provider offers swimming activities, or if a wading pool is used, the provider shall ensure that:
 - (a) a caregiver stays at the pool supervising when a child is in the pool or has access to the pool, and when an accessible pool has water in it;
 - (b) any diapered child wears a swim diaper when the child is in the pool;
 - (c) each lifeguard and pool personnel does not count toward the caregiver-to-child ratio;
 - (d) each wading pool is emptied and sanitized after use by each group of children;
 - (e) if the pool is deeper than four feet, there is a lifeguard on duty who is certified by the Red Cross or another approved certification program any time a child has access to the pool; and
 - (f) the parent gives permission before their child uses the pool.
- (6) If the provider offers offsite activities, the provider shall ensure that:
 - (a) a child's name is not used on a nametag, t-shirt, or in any other visible way;
 - (b) first aid supplies, including at least antiseptic, bandages, and tweezers are available;
 - (c) the child's parent gives written consent before each activity;
 - (d) the required caregiver-to-child ratio and supervision are maintained during the entire activity; and
 - (e) there is a way for each child and caregiver to wash their hands with soap and water, or, if there is no source of running water, with a wet wipe or hand sanitizer.
- (7) The provider shall ensure that a caregiver with the children takes the emergency information and releases for each child in the group on each offsite activity, and that the information includes at least:
 - (a) the child's name;

- (b) the parent's name and phone number;
- (c) the name and phone number of a person to notify if there is an emergency and the parent cannot be contacted;
- (d) the name of any person authorized by the parent to pick up the child; and
- (e) current emergency medical treatment and emergency medical transportation releases.

R430-50-19. Play Equipment.

- (1) The provider shall ensure that children using play equipment use it safely and as intended by the manufacturer.
- (2) The provider shall ensure that, when in use, stationary play equipment is not placed on a hard surface including concrete, asphalt, dirt, or the bare floor.
- (3) Except for trampolines, the provider shall ensure that stationary play equipment with a designated play surface that is 18 inches high or higher:
 - (a) has a surrounding three-foot use zone, free of hard objects or surfaces, that extends from the outermost edge of the equipment;
 - (b) has cushioning that covers the entire required use zone; and
 - (c) is stable or securely anchored.
- (4) OL may consider a trampoline on the premises is inaccessible to children in care if the trampoline:
 - (a) is enclosed behind a locked fence or safety net that is at least three feet high;
 - (b) has no jumping mat; or
 - (c) is placed upside down.
- (5) The provider shall ensure that each accessible trampoline without a safety net enclosure has at least a six-foot use zone that is measured from the outermost edge of the trampoline frame, and that is free from any structure or object including play equipment, trees, and fences.
- (6) The provider shall ensure that each accessible trampoline with a properly installed, used as specified by the manufacturer, and in good repair safety net enclosure has at least a three-foot use zone that is measured from the outermost edge of the trampoline frame, and that is free from any structure or object including play equipment, trees, and fences.
- (7) The provider shall ensure that each accessible trampoline with or without a safety net enclosure is placed over:
 - (a) grass;
 - (b) a six-inch deep cushioning; or
 - (c) other commercial cushioning.
- (8) The provider shall ensure that cushioning for each accessible trampoline covers the entire required use zone.
- (9) The provider shall ensure that each accessible trampoline has:
 - (a) no ladders or other objects within the use zone a child could use to climb on the trampoline; and
 - (b) shock-absorbing pads that completely cover the trampoline springs, hooks, and frame.
- (10) The provider must obtain written permission from a child's parent or legal guardian before that child uses the trampoline.
- (11) The provider shall ensure that if a child uses an accessible trampoline:
 - (a) a caregiver is at the trampoline supervising;
 - (b) only one person at a time uses the trampoline;
 - (c) no child in care is allowed to do somersaults or flips on the trampoline;
 - (d) no one is permitted under the trampoline while the trampoline is in use; and
 - (e) only school-age children in care are allowed to use a trampoline.
- (12) The provider shall ensure that there are no entrapment hazards on or within the use zone of any piece of stationary play equipment.
- (13) The provider shall ensure that there is no strangulation hazard on or within the use zone of any piece of stationary play equipment.
- (14) The provider shall ensure that there is no crush, shearing, or sharp edge hazard on or within the use zone of any piece of stationary play equipment.
- (15) The provider shall ensure that there is no tripping hazard including any concrete footing, tree stump, tree root, or rock within the use zone of any piece of stationary play equipment.

R430-50-20. Transportation.

- (1) For each child that the provider transports, the provider shall obtain a transportation permission form that is:
 - (a) signed by a parent; and
 - (b) on-site for review by OL.
- (2) The provider shall ensure that each vehicle used for transporting children:
 - (a) is enclosed with a roof or top;
 - (b) is equipped with safety restraints;
 - (c) has a current vehicle registration;
 - (d) is maintained in a safe and clean condition; and
 - (e) contains first aid supplies, including at least antiseptic, bandages, and tweezers.
- (3) The provider shall ensure that the safety restraints in each vehicle that transports children are:
 - (a) appropriate for the age and size of each child who is transported, as required by law;
 - (b) properly installed; and
 - (c) in safe condition and working order.
- (4) The provider shall ensure that the driver of each vehicle who is transporting children:

NOTICES OF PROPOSED RULES

- (a) is at least 18 years old;
 - (b) has and carries with them a current, valid driver's license for the type of vehicle being driven;
 - (c) has with them the emergency contact information outlined in Subsection R381-50-18(7) for each child being transported;
 - (d) ensures that each child being transported is in an individual safety restraint as required by law;
 - (e) ensures that the inside vehicle temperature is between 60 and 85 degrees Fahrenheit;
 - (f) ensures that each child stay seated while the vehicle is moving;
 - (g) ensures that the vehicle is locked during transport;
 - (h) never leaves a child in the vehicle unattended by an adult; and
 - (i) never leaves the keys in the ignition when not in the driver's seat.
- (5) If the provider walks or uses public transportation to transport a child to or from a facility, the provider shall ensure that:
- (a) each child being transported has a completed transportation permission form signed by their parent;
 - (b) a caregiver goes with and actively supervises each child;
 - (c) a caregiver transporting a child has emergency contact information outlined in Subsection R381-50-18(7) and a release for each child being transported; and
 - (d) the caregiver-to-child ratio is maintained.
- (6) The provider shall:
- (a) have transport liability insurance; or
 - (b) inform parents in writing that the provider does not have transport liability insurance.

R430-50-21. Animals.

- (1) The provider shall inform each parent of the kinds of animals allowed at the facility.
- (2) The provider shall ensure that there is no animal on the premises that:
 - (a) has a history of biting even one individual;
 - (b) has a history of dangerous, attacking, or aggressive behavior; or
 - (c) is naturally aggressive.
- (3) The provider shall ensure that any animal at the facility is clean and free of any obvious disease or health problem that could adversely affect a child.
- (4) The provider shall ensure that there is no animal or animal equipment in food preparation or eating areas.
- (5) The provider shall ensure that no child younger than five years old assists with the cleaning of any animal or animal cage, pen, or equipment.
- (6) If a school-age child helps in the cleaning of animals or animal equipment, the provider shall ensure that the child washes their hands immediately after cleaning the animal or equipment.
- (7) The provider shall ensure that each child and staff wash their hands immediately after playing with or touching any reptile or amphibian.
- (8) The provider shall ensure that any dog, cat, or ferret that the facility houses have current rabies vaccinations.
- (9) The provider shall keep current animal vaccination records on-site for review by OL.

R430-50-22. Rest and Sleep.

- (1) The provider shall offer a child in care a daily opportunity for rest or sleep in an environment with:
 - (a) a low noise level;
 - (b) freedom from distractions; and
 - (c) subdued lighting.
- (2) The provider shall ensure that each crib:
 - (a) does not have strings, cords, ropes, or other entanglement hazards on the crib or within reach of the child;
 - (b) has a tight-fitting mattress;
 - (c) has at least 20 inches from the top of the mattress to the top of the crib rail, or at least 12 inches from the top of the mattress to the top of the crib rail if the child using the crib cannot sit up without assistance;
 - (d) has documentation from the manufacturer or retailer stating that the crib was built after June 28, 2011, or that the crib is certified if the crib was manufactured before that date; and
 - (e) has slats spaced no more than 2-3/8 inches apart.
- (3) The provider shall ensure that sleeping equipment does not block any exit
- (4) The provider shall ensure that sleeping equipment and bedding items are:
 - (a) clearly assigned to one child; and
 - (b) laundered as needed, but at least once a week, and before use by another child.
- (5) The provider shall clean and sanitize sleeping equipment, that is not clearly assigned to and used by an individual child, before each use.

R430-50-23. Diapering.

- (1) If the provider accepts children who wear diapers, the provider shall ensure that each child's diaper is:
 - (a) checked as soon as a sleeping child awakens;
 - (b) checked at least once every two hours; and
 - (c) promptly changed when wet or soiled.

- (2) The provider shall ensure that caregivers do not change children's diapers directly on the floor, in a food preparation or eating area, or on any surface used for another purpose.
- (3) The provider shall ensure that the diapering surface is smooth, waterproof, and in good repair.
- (4) The provider shall ensure that a caregiver cleans and sanitizes the diapering surface after each diaper change or uses a disposable, waterproof diapering surface that is thrown away after each diaper change.
- (5) The provider shall ensure that a caregiver washes their hands after each diaper change.
- (6) The provider shall ensure that a caregiver places any wet and soiled disposable diaper:
 - (a) in a container that has a disposable plastic lining and a tight-fitting lid;
 - (b) directly in an outdoor garbage container that has a tight-fitting lid; or
 - (c) in a container that is inaccessible to children.
- (7) The provider shall ensure that each indoor container where any wet and soiled diaper is placed is cleaned and sanitized each day.
- (8) If cloth diapers are used, the provider shall:
 - (a) not rinse cloth diapers at the facility; and
 - (b)(i) place cloth diapers directly into a leakproof container that is inaccessible to any child and labeled with the child's name; or
 - (ii) place the cloth diapers in a leakproof diapering service container.

R430-50-24. Infant and Toddler Care.

- (1) The provider shall ensure that each awake infant and toddler receives positive physical and verbal interaction with a caregiver at least once every 15 minutes.
- (2) To stimulate their healthy development, the provider shall ensure that infants receive daily interactions with adults, including on the ground interaction and closely supervised time spent in the prone position for infants less than six months old.
- (3) The provider shall ensure that a caregiver responds promptly to an infant and toddler who is in emotional distress due to any conditions including:
 - (a) a wet or soiled diaper;
 - (b) fatigue;
 - (c) fear;
 - (d) hunger;
 - (e) illness; or
 - (f) teething.
- (4) To stimulate healthy development, the provider shall make safe toys available and accessible for each infant and toddler to engage in play.
- (5) The provider shall ensure that any mobile infant and toddler has freedom of movement in a safe area.
- (6) The provider may not confine an awake infant or toddler in any piece of equipment, including a swing, high chair, crib, playpen, or other similar piece of equipment for more than 30 minutes.
- (7) The provider shall ensure that only one infant or toddler occupies any one piece of equipment at a time, unless the equipment has individual seats for more than one child.
- (8) The provider shall make any object made of styrofoam inaccessible to any infant and toddler.
- (9) The provider shall allow each infant and toddler to eat and sleep on their own schedule.
- (10) The provider shall ensure that baby food, formula, or breast milk that is brought from home for an individual infant and toddlers use is:
 - (a) labeled with the child's name;
 - (b) labeled with the date and time of preparation or opening of the container, including a jar of baby food;
 - (c) kept refrigerated if needed; and
 - (d) discarded within 24 hours of preparation or opening, except for unprepared powdered formula or dry food.
- (11) If an infant cannot sit upright and hold their own bottle, the provider shall ensure that a caregiver is within arm's reach of each infant during bottle feeding and that a bottle is not propped.
- (12) The provider shall ensure that the caregiver swirls and tests warm bottles for temperature before feeding to a child.
- (13) The provider shall discard formula and milk, including breast milk, after feeding or within two hours of starting a feeding.
- (14) The provider shall ensure that a caregiver cuts solid food for:
 - (a) an infant into pieces no larger than 1/4 inch in diameter; and
 - (b) a toddler into pieces no larger than 1/2 inch in diameter.
- (15) The provider shall ensure that each infant sleeps in equipment designed for sleep including a crib, bassinet, porta-crib or playpen, and that an infant is not placed to sleep on a mat, cot, pillow, bouncer, swing, car seat, or other similar piece of equipment.
- (16) The provider shall place an infant on their back for sleeping unless there is documentation from a health care provider requiring a different sleep position.
- (17) The provider may not place any soft toy, loose blanket, or other object in sleep equipment while in use by a sleeping infant.

R430-50-25. Compliance.

Any person who violates this rule may be subject to the penalties in Rule R380-600 and Title 26B, Chapter 2, Part 7, Penalties and Investigations.

KEY: child care facilities, residential certification
Date of Last Change: ~~May 8, 2025~~ 2026
Notice of Continuation: June 17, 2025
Authorizing, and Implemented or Interpreted Law: 26B-2-402

NOTICE OF SUBSTANTIVE CHANGE		
TYPE OF FILING: Amendment		
Rule or section number:	R430-90	Filing ID: 57871

Agency Information

1. Title catchline:	Health and Human Services, Residential Child Care Licensing	
Building:	Multi-Agency State Office Building	
Street address:	195 N 1950 W	
City, state:	Salt Lake City, UT	
Mailing address:	PO Box 142003	
City, state and zip:	Salt Lake City, UT 84114-2003	
Contact persons:		
Name:	Phone:	Email:
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Please address questions regarding information on this notice to the persons listed above.		

General Information

2. Rule or section catchline:
R430-90. Licensed Family Child Care
4. Purpose of the new rule or reason for the change:
The Office of Licensing (OL), within the Division of Licensing and Background Checks, acts as the lead regulatory authority, in partnership with the Utah Office of Child Care (OCC), to ensure oversight of health and safety requirements for any child care provider receiving a license, certification, or license-exempt status through OL.
In October 2024, the Utah OCC received conditional approval from the federal OCC for the federal fiscal year (FFY) 2025-2027 Child Care and Development Fund (CCDF) state plan. This conditional approval requires the lead regulatory partner (OL) to update the existing immunization standard to be age-appropriate for school-age children attending any child care program receiving a license, certification, or license-exempt status through OL, including in this rule.
Therefore, OL determined it is necessary to update this rule to comply with the CCDF requirement, as part of the Utah OCC state plan, for an immunization standard for school-age children attending any child care program regulated by OL.
5. Summary of the new rule or change:
This filing updates the immunization record language in Subsections R430-90-6(12) through R430-90-6(13) to comply with the CCDF requirement.
This filing also removes individual definitions for terms already defined in Rule R380-600 and updates an outdated citation.
Additionally, the filing makes style and formatting changes to align with the Rulewriting Manual for Utah and other rules under the Department of Health and Human Services (department).

Fiscal Information**6. Provide an estimate and written explanation of the aggregate anticipated cost or savings to:****A. State budget:**

There is no anticipated cost or savings to the state budget as a result of this filing, as the provisions in this rule are part of OL's existing process of issuing a license, certification, or license-exempt status to child care providers.

The filing clarifies language in this rule regarding documentation for immunization records for any child in the care of a provider to be in compliance with federal child care funding requirements for immunization record standards.

This filing does not add to or remove any existing licensing processes.

The department does not anticipate any fiscal impact on the state budget as a result of the style and formatting changes included in this rule amendment.

B. Local governments:

There is no anticipated fiscal impact to local governments as a result of this filing, as this filing will not add to, modify, or remove requirements for local business licensing or any other process with which local government is involved.

Currently, there are no licensed family child care program providers operated by a local government.

This filing does not add to or remove any existing licensing processes for local government compliance, including for providers operated by a local government.

The department does not anticipate any fiscal impact on local governments as a result of the style and formatting changes included in this rule amendment.

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

There is no anticipated cost or savings to small businesses as a result of this filing, as child care providers have already been complying with this rule's requirements as part of OL's existing process.

This filing clarifies language in this rule regarding documentation for immunization records for any child in the care of a provider to be in compliance with federal child care funding requirements for immunization record standards.

This filing does not add to or remove any existing licensing processes for small business compliance.

The department does not anticipate any fiscal impact on small businesses as a result of the style and formatting changes included in this rule amendment.

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

There is no anticipated cost or savings to non-small businesses as a result of this filing, as child care providers have already been complying with this rule's requirements as part of OL's existing process.

This filing clarifies language in this rule regarding documentation for immunization records for any child in the care of a provider to be in compliance with federal child care funding requirements for immunization record standards.

This filing does not add to or remove any existing licensing processes for non-small business compliance.

The department does not anticipate any fiscal impact on non-small businesses as a result of the style and formatting changes included in this rule amendment.

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 to other persons as a result of this rule filing, as child care providers have already been complying with this rule's requirements as part of OL's existing process.

The filing clarifies language in this rule regarding documentation for immunization records for any child in the care of a provider to be in compliance with federal child care funding requirements for immunization record standards.

This filing does not add to or remove any existing licensing processes for compliance for other persons.

The department does not anticipate any fiscal impact to persons other than small businesses, state, or local government small businesses as a result of the style and formatting changes included in this rule amendment.

F. Compliance costs for affected persons:

There are no anticipated compliance costs for affected persons, identified as child care providers and the department, as a result of this rule filing, as child care providers have already been complying with this rule's requirements as part of OL's existing process.

This filing does not add to or remove any existing licensing processes for compliance for child care providers and the department.

The filing clarifies language in this rule regarding documentation for immunization records for any child in the care of a provider to be in compliance with federal child care funding requirements for immunization record standards.

The department does not anticipate any compliance costs as a result of the style and formatting changes included in this filing.

G. Regulatory Impact Summary Table (This table includes only fiscal impacts the agency was able to measure. If the agency could not estimate an impact, it is excluded from this table but described in boxes A through F.)

Regulatory Impact Summary Table					
Fiscal Cost	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
Total Fiscal Cost	\$0	\$0	\$0	\$0	\$0
Fiscal Benefits	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
Total Fiscal Benefits	\$0	\$0	\$0	\$0	\$0
Net Fiscal Benefits	\$0	\$0	\$0	\$0	\$0

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 S. Gruber, has reviewed and approved this regulatory impact analysis.

Citation Information

7. 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-2-402

Public Notice Information

9. The public may submit written or oral comments to the agency identified in box 1.

A. Comments will be accepted until: 05/15/2026

10. This rule change MAY become effective on:	05/22/2026
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

Agency head or designee and title:	Tracy S. Gruber, Executive Director	Date:	03/25/2026
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R430. Health and Human Services, Residential Child Care Licensing.

R430-90. Licensed Family Child Care.

R430-90-1. Authority and Purpose.

- (1) Section 26B-2-402 authorizes this rule.
- (2) This rule establishes the foundational standards necessary to protect the health and safety of children in residential child care facilities and defines the general procedures and requirements to get and maintain a license to provide child care.

R430-90-2. Definitions.

- (1) Terms used in this rule are defined in Rule R380-600. Additionally:
- (2) "Background finding" means information in a background check [that] the Office of Background Processing (OBP) uses to determine if a covered individual is or is not eligible to be involved with child care.
- (3) "Barrier" means an enclosing structure including a fence, wall, bars, railing, or solid panel to prevent accidental or deliberate movement through or access to something.
- (4) "Body fluid" means blood, urine, feces, vomit, mucus, or saliva.
- (5) "Business day" means a day of the week the facility is open for business.
- (6) "Business hours" means the hours the facility is open for business.
- (7) "CCL" means Child Care Licensing in the Office of Licensing (OL), within the Division of Licensing and Background Checks (division), under the Department of Health and Human Services (department), [that] and is delegated with the responsibility to enforce [the rules under] Titles R381 and R430 and Rule R380-600.
- (8) "Capacity" means the maximum number of children the provider is allowed to care for at any given time.
- (9) "Caregiver" means a covered individual who protects the health and safety of children. A covered individual is a caregiver when they:
- (a) count in the caregiver-to-child ratio;
 - (b) meet the physical or emotional needs of the children, including diapering, toileting, feeding, or protecting them from harm; or
 - (c) supervise children.
- (10) "Caregiver-to-child ratio" means the number of caregivers responsible for a specific number of children.
- (11) "Child care" means continuous care and supervision of at least one qualifying child that:
- (a) is in place of care ordinarily provided by a parent in the parent's home;
 - (b) occurs for less than 24 hours a day; and
 - (c) is provided for direct or indirect compensation.
- (12) "Child care program" means a person or business that offers child care.
- (13) "Choking hazard" means an object or a removable part on an object with a diameter of less than 1-1/4 inches and a length of less than 2-1/4 inches that could be caught in a child's throat blocking the airway and making it difficult or impossible to breathe.
- (14) "~~Covered individual" means the same as defined in Rule R380-600.~~"
- (15) "Crib" means an infant's bed with sides to protect them from falling including a bassinet, porta-crib, or play pen.
- (16) "Cushioning" means a shock-absorbing surface under and around play equipment that reduces the severity of injuries from falls.
- (17) "~~Department" means the Utah Department of Health and Human Services.~~"
- (18) "Designated play surface" means any:
- (a) accessible elevated surface for standing, walking, crawling, sitting or climbing; or
 - (b) accessible flat surface that is at least two by two inches in size and has an angle less than 30 degrees from horizontal.
- (19) "Director" means an individual who meets the director qualifications in this rule^[5] and [who] assumes the child care program's day-to-day responsibilities for compliance with CCL rules.
- (20) "~~Eligible" means the same as defined in Rule R380-600.~~"
- (21) "Entrapment hazard" means an opening greater than 3-1/2 by 6-1/4 inches and less than nine inches in diameter where a child's body could fit through but the child's head could not fit through, potentially causing entrapment and strangulation.
- (22) "Experiencing homelessness" means anyone who lacks a fixed, regular, and adequate nighttime residence.
- (23) "Facility" means a program or premises approved by OL to be used for child care.
- (24) "Group" means the children who the provider assigns to one or more caregivers for their care and supervision.
- (25) "Group size" means the total number of children in a group per room or area.
- (26) "Guest" means an individual who is not a covered individual and is at the child care facility for a short time with the provider's permission.
- (27) "Health care provider" means a licensed health professional, including a physician, dentist, nurse practitioner, or physician's assistant.

NOTICES OF PROPOSED RULES

(~~28~~24) "Inaccessible" means out of reach for children by being:

- (a) behind a properly secured child safety gate;
- (b) if in a bathroom, at least 36 inches above any surface from where a child could stand or climb;
- (c) located at least 36 inches above the floor;
- (d) locked, including in a locked room, cupboard, or drawer; or
- (e) secured with a child safety device, including a child safety cupboard lock or doorknob device.

(~~29~~25) "Infant" means a child who is younger than 12 months old.

(~~30~~26) "Infectious disease" means an illness that is capable of being spread from one individual to another.

(~~31~~27) "Involved with child care" means to do any of the following at or for a child care program:

- (a) care for or supervise children;
- (b) count in the caregiver-to-child ratio;
- (c) have unsupervised contact with a child in care;
- (d) own, operate, direct;
- (e) reside; or
- (f) volunteer.

(~~32~~28) "License" means a license issued by OL to provide child care services.

(~~33~~29) "Licensee" means the legally responsible person or business that holds a valid license from OL.

(~~34~~30) "LIS supported finding" means a supported finding of child abuse or neglect in the Licensing Information System (LIS) database for child abuse and neglect, maintained by the department.

~~(35) "OBP" means the same as defined in Rule R380-600.~~

~~(36) "OL" means the same as defined in Rule R380-600.]~~

(~~37~~31) "Older toddler" means a child ~~[age]~~who is 18 months through 23 months old.

(~~38~~32) "Over-the-counter medication" means medication that an individual can purchase without a written prescription, including any herbal remedy, vitamin, and mineral supplement.

(~~39~~33) "Parent" means the parent or legal guardian of a child in care.

(~~40~~34) "Play equipment platform" means a flat surface on a piece of stationary play equipment intended for more than one child to stand on and upon which a child can move freely.

(~~41~~35) "Preschooler" means a child age two through four years old.

(~~42~~36) "Provider ~~[D]~~designee" means the adult delegated by the provider to take the provider's responsibility in the provider's absence.

(~~43~~37) "Qualifying child" means a child:

- (a) child who is younger than 13 years old and is the child of an individual other than the child care provider or caregiver;
- (~~e~~)b) child who is younger than four years old and is the child of the provider or a caregiver; or
- (~~b~~)c) child with a disability who is younger than 18 years old and is the child of an individual other than the provider or caregiver.

(~~44~~38) "Related child" means a child for whom a provider is the parent, stepparent, grandparent, step-grandparent, great-grandparent, sibling, step-sibling, aunt, step-aunt, great-aunt, uncle, step-uncle, or great-uncle.

(~~45~~39) "Residential child care" means care that takes place in a child care provider's home.

(~~46~~40) "Sanitize" means to use a product or process to reduce contaminants and bacteria to a safe level.

(~~47~~41) "School-age child" means a child age five through 12 years old.

(~~48~~42) "Sexually explicit material" means any depiction of actual or simulated sexual conduct.

(~~49~~43) "Sleeping equipment" means a cot, mat, crib, bassinet, porta-crib, playpen, or bed.

(~~50~~44) "Stationary play equipment" means equipment, including a climber, slide, swing, merry-go-round, or spring rocker, that is meant to stay in one location when a child uses it. Stationary play equipment does not include a:

- (a) playhouse that sits on the ground or floor and does not have an attached slide, swing, or climber;
- (b) sandbox;
- (c) sensory table; or
- (d) stationary circular tricycle.

(~~51~~45) "Strangulation hazard" means something on which a child's clothes or drawstrings could become caught or something in which a child could become entangled, including:

- (a) a protruding bolt end that extends more than two threads beyond the face of the nut;
- (b) a rope, cord, or chain that is attached to a structure and is long enough to encircle a child's neck; or
- (c) hardware that forms a hook or leaves a gap or space between components including a protruding open S-hook.

(~~52~~46) "Unsupervised contact" means being with, caring for, communicating with, or touching a child in the absence of a caregiver or other employee who is at least 18 years old and is considered eligible by CCL.

(~~53~~47) "Use zone" means the area beneath and surrounding a play structure or piece of equipment that is designated for unrestricted movement around the equipment and onto which a child falling from or exiting the equipment could be expected to land.

(~~54~~48) "Working day" means any day of the week the department is open for business.

(~~55~~49) "Younger toddler" means a child ~~[age]~~who is 12 months through 17 months old.

R430-90-3. License Required.

- (1) A person shall obtain a license for a licensed family child care from OL if the person provides care:
 - (a) for direct or indirect compensation;

- (b) for each individual child for less than 24 hours a day;
- (c) for four or more hours a day;
- (d) for nine or more unrelated children;
- (e) in the absence of the child's parent;
- (f) in the provider's home; and
- (g) on a regularly scheduled, ongoing basis.

(2) OL will not issue a license if care is only for related children or on a sporadic basis.

(3) OL may license a provider to provide child care in a facility that is also licensed by OL if the part of the facility requesting a CCL license is physically separate from the other facility services.

(4) A licensed family child care provider may not be licensed for more than two facilities at the same time.

(5) An individual shall be licensed by OL as a child care provider if they provide child care in the person's home for more than ten children in total under the age of 13, or under the age of 18 if a child has a disability, regardless of whether a child is related to the person providing child care.

(6) A child care center licensee shall comply with Rule R380-600.

R430-90-4. Fire and Other Health Inspections.

(1) If the local fire authority states in writing that an applicant for a new license or a renewal does not require a fire inspection, OL shall verify the applicant's compliance by ensuring:

- (a) address numbers and letters are readable from the street;
- (b) boiler, mechanical, and electrical panel rooms are not used for storage;
- (c) exit doors operate properly and are well maintained;
- (d) there are no obstructions in exits, aisles, corridors, and stairways;
- (e) there are working smoke detectors that are properly installed on each level of the building; and
- (f) there is at least one unobstructed fire extinguisher on each level of the building, currently charged and serviced, and mounted not more than five feet above the floor.

(2) If an applicant for a new license or a renewal serves food and the local health department states in writing that a kitchen inspection is not required, OL shall verify the applicant's compliance by ensuring:

- (a) any chemical is stored away from food and food service items;
- (b) food is properly stored, kept to the proper temperature, and in good condition;
- (c) any reusable food holder, utensil, and food preparation surface is washed, rinsed, and sanitized before each use;
- (d) the refrigerator is clean, in good repair, and working at or below 41 degrees Fahrenheit;
- (e) there is a working handwashing sink in the kitchen;
- (f) there is a working stem thermometer available to check cooking and hot-hold temperatures; and
- (g) there is a working thermometer in the refrigerator.

R430-90-5. Immediate Closure.

(1) In accordance with Rule R380-600, OL may order the immediate closure of a facility if conditions at the facility create a clear and present danger to any child in care.

(2) Upon receipt of an immediate closure notice, the provider shall give OL the names and mailing addresses of each enrolled child's parent so OL may notify the parents of the immediate closure.

(3) If there is a severe injury or death of a child in care, OL may order a child care provider to suspend services and prohibit new enrollments, pending a review by the Utah Child Fatality Review Committee or a determination of the probable cause of the injury or death by a medical professional.

R430-90-6. Administration and Children's Records.

(1) The provider shall:

- (a) be at least 18 years old;
- (b) be considered eligible by an OBP background check before becoming involved with child care;
- (c) complete the new provider training offered by OL; and
- (d) complete at least 20 hours of child care training each year, based on the facility's license date.

(2) The provider shall protect children from conduct that endangers any child in care, or is contrary to the health, welfare, and safety of the public.

(3) The provider shall know and comply with applicable federal, state, and local law, ordinance, and rule, and shall be responsible for the operation and management of a child care program.

(4) The provider shall comply with licensing rules any time a child in care is present.

(5) The provider shall post their unaltered child care license on the facility premises in a place readily visible and accessible to the public.

(6) The provider shall post a current copy of OL's Parent Guide at the facility for parent review during business hours or give a current copy to each parent.

(7) The provider shall inform each parent and OL of any changes to the program's telephone number and other contact information within 48 hours of the change.

NOTICES OF PROPOSED RULES

- (8) The provider shall:
 - (a) have liability insurance; or
 - (b) inform parents in writing that the provider does not have liability insurance.
- (9) The provider shall ensure that a parent completes an admission and health assessment form for their child before the child is admitted into the child care program.
- (10) The provider shall ensure that each child's admission and health assessment form includes:
 - (a) the child's name;
 - (b) the child's date of birth;
 - (c) each parent's name, address, and phone number, including a daytime phone number;
 - (d) the names of individuals authorized by the parent to sign the child out from the facility;
 - (e) the name, address, and phone number of an individual to be contacted if an emergency happens and the provider cannot contact the parent;
 - (f) if available, the name, address, and phone number of an out-of-area emergency contact individual for the child;
 - (g) the parent's permission for emergency transportation and emergency medical treatment;
 - (h) any known allergy of the child;
 - (i) any known food sensitivity of the child;
 - (j) any chronic medical condition that the child may have;
 - (k) any instructions for special or nonroutine daily health care of the child;
 - (l) any current ongoing medication that the child may be taking; and
 - (m) any other special health instructions for the caregiver.
- (11) The provider shall ensure that the admission and health assessment form is:
 - (a) reviewed, updated, and signed or initialed by the parent at least annually; and
 - (b) kept on-site for review by OL.
- (12) Before admitting any child [~~younger than five years old~~] into the program, including the provider's or an employee's[?] own child, the provider shall obtain the following documentation from the child's parent:
 - (a) a record of current immunizations;
 - (b) a medical schedule to receive required immunizations;
 - (c) a legal exemption to current immunization requirements; or
 - (d) a 90-day exemption for any foster child [~~and~~] or child who is experiencing homelessness.
- (13) For each child in the program [~~younger than five years old~~], including the provider's or employee's[?] own child, the provider shall keep the child's current immunization records on-site for review by OL.
- (14) The provider shall submit the annual immunization report to the Utah Statewide Immunization Information System by the date specified by the department.
- (15) The provider shall ensure that each child's information is confidential and not released without written parental permission except to OL.

R430-90-7. Personnel and Training Requirements.

- (1) The provider or the provider designee shall be present at the home when a child is in care.
- (2) The provider must ensure that, before being left alone with a child, the provider designee:
 - (a) completes OL's new provider training; and
 - (b) has current first aid and pediatric CPR certifications.
- (3) The provider shall ensure that any covered individual caring for a child is supervised, qualified, and trained to:
 - (a) comply with licensing requirements under this rule; and
 - (b) meet the needs of any child as required by this rule.
- (4) The provider shall ensure that a caregiver:
 - (a) completes at least 20 hours of child care training each year, based on the facility's license date, or at least 1-1/2 hours of child care training each month they work if hired partway through the facility's licensing year;
 - (b) completes the 2-1/2 hour preservice training offered by OL before becoming involved with child care;
 - (c) is at least 16 years old;
 - (d) is considered eligible by an OBP background check before becoming involved with child care;
 - (e) is introduced to other staff and to the caregiver's assigned group of children;
 - (f) knows and follows any applicable laws and requirements under this rule; and
 - (g) reviews the information in each child's health assessment in the caregiver's assigned group, including any allergy, food sensitivity, and other individual needs.
- (5) The provider shall ensure that any other staff, including any driver, cook, and clerk:
 - (a) completes the 2-1/2 hour preservice training offered by OL before becoming involved with child care;
 - (b) knows and follows any applicable law and this rule; and
 - (c) is considered eligible by an OBP background check before becoming involved with child care.
- (6) The provider shall ensure that each volunteer is considered eligible by an OBP background check before becoming involved with child care.
- (7) The provider shall submit a background check as required in Section R430-90-8 for each guest who is 12 years old and older and stays in the home for more than two weeks.

- (8) The provider shall ensure that each household member who is:
- (a) 12 to 17 years old is considered eligible by an OBP background check; and
 - (b) 18 years old or older is considered eligible by an OBP background check that includes fingerprints.
- (9) The provider shall ensure that an individual who provides an Individualized Educational Plan or Individualized Family Service plan services including any physical, occupational, or speech therapist:
- (a) provides identification before having access to the facility or to a child at the facility; and
 - (b) has received the child's parent's permission for services to take place at the facility.
- (10) The provider shall ensure that any individual from law enforcement, Child Protective Services, the department, and any similar entity provides identification before having access to the facility or to a child at the facility.
- (11) The provider shall ensure that each covered individual required to complete preservice training receives the 2-1/2 hour preservice training offered by OL that includes at least the following topics:
- (a) administration of medication;
 - (b) applicable laws and requirements under Rule R381-70;
 - (c) building and physical premises safety;
 - (d) child and brain development, including the social, emotional, physical, cognitive, and language principles of child growth;
 - (e) children whose special needs may include a disability;
 - (f) emergency preparedness, response, and recovery plan;
 - (g) pediatric first aid and CPR;
 - (h) precautions in transporting children;
 - (i) prevention and control of infectious diseases including immunizations;
 - (j) prevention of and response to emergencies due to food and allergy reactions;
 - (k) prevention of shaken baby syndrome, abusive head trauma, child maltreatment, and coping with crying babies;
 - (l) prevention of sudden infant death syndrome and the use of safe sleeping practices;
 - (m) prevention, signs, and symptoms of child abuse and neglect, including child sexual abuse, and legal reporting requirements;
 - (n) recognizing the signs of an individual experiencing homelessness and available assistance; and
 - (o) safe handling and disposal of hazardous materials and bio contaminants.
- (12) The provider shall ensure that annual child care training includes at least each topic listed in:
- (a) administration of medication;
 - (b) building and physical premises safety;
 - (c) child and brain development, including the social, emotional, physical, cognitive, and language principles of child growth;
 - (d) children with special needs;
 - (e) emergency preparedness, response, and recovery plan;
 - (f) pediatric first aid and CPR;
 - (g) prevention and control of infectious diseases including immunizations;
 - (h) precautions in transporting children;
 - (i) prevention of and response to emergencies due to food and allergy reactions;
 - (j) prevention of shaken baby syndrome, abusive head trauma, child maltreatment, and coping with crying babies;
 - (k) prevention of sudden infant death syndrome and the use of safe sleeping practices;
 - (l) prevention, signs, and symptoms of child abuse and neglect, including child sexual abuse, and legal reporting requirements;
 - (m) recognizing the signs of an individual experiencing homelessness and available assistance;
 - (n) safe handling and disposal of hazardous materials and bio contaminants; and
 - (o) Sections R430-90-7 through R430-90-24.
- (13) The provider shall ensure that at least half of the required annual training is interactive.
- (14) The provider shall ensure that documentation of each individual's annual child care training is on-site for review by OL and includes the:
- (a) date of the training;
 - (b) name of the individual or organization that presented the training;
 - (c) total hours or minutes of the training;
 - (d) training topic; and
 - (e) whether the training was interactive or not.
- (15) The provider shall ensure that at least one covered individual with a current Red Cross, American Heart Association, or equivalent pediatric first aid and CPR certification is present when a child is in care:
- (a) at each offsite activity;
 - (b) at the facility; and
 - (c) in each vehicle transporting a child.
- (16) The provider shall ensure that CPR certification includes hands-on testing.
- (17) The provider shall ensure that the following records for each caregiver and volunteer are on-site for review by OL:
- (a) the date of initial employment or association with the program;
 - (b) a current pediatric first aid and CPR certification, if required in this rule; and
 - (c) a six-week record of the times worked each day.

R430-90-8. Background Checks.

(1) Before a new covered individual becomes involved with child care, the provider shall use the licensing provider portal search to verify that the individual is eligible and:

(a) associate that individual with the provider's facility; or

(b) not associate the individual if the individual is associated with another CCL facility and the new individual will be at the facility for no more than one business day.

(2) Before a new covered individual who does not appear in the licensing provider portal search becomes involved with child care in the program, the provider must require the individual to submit an online background check application and fingerprints for any individual age 16 years old and older, except for any individual 12-17 years old who is only listed as a household member and:

(a) authorize the individual's background check through the licensing provider portal;

(b) pay any required fee; and

(c) only allow the individual to be involved with child care if they have an eligible OBP background check determination.

(3) To keep a covered individual's background check eligibility current, the provider shall require the covered individual to submit a new background check application, fingerprints, and any fee if the covered individual has:

(a) not been associated with an active, CCL approved child care facility within the past 180 days;

(b) resided outside of Utah since their last background check was completed; or

(c) turned 18 years old and has not previously submitted fingerprints for an OBP background check, except when the 18-year-old has previously submitted fingerprints for an OBP background check, then only a new background check application is required.

(4) Within ten working days from when a child who resides in the facility turns 12 years old, the provider shall ensure that an online background check application is submitted, and:

(a) authorize the child's background check through the licensing portal; and

(b) pay any required fee.

(5) The provider shall ensure that fingerprints are prepared by a local law enforcement agency or an agency approved by local law enforcement.

(6) If a covered individual submits fingerprints electronically through live scan, the provider shall ensure that the agency taking the fingerprints is one that follows OBP's fingerprinting requirements.

(7) OBP may consider a covered individual not eligible for any of the following reasons:

(a) a pending charge for a felony offense;

(b) any felony conviction;

(c) any of the reasons listed under Subsection (8);

(d) LIS supported findings that occurred no more than 15 years from the date the application was submitted;

(e) the covered individual knowingly making a false statement related to their background check;

(f) the covered individual refusing to consent to the criminal background check; or

(g) the covered individual's name appearing on the Utah or national sex offender registry.

(8) OBP may also consider a covered individual not eligible if the individual has been convicted, has pled no[-]contest, or is currently subject to a plea and abeyance or diversion agreement for any of the following pending charges or convictions, regardless of severity:

(a) child pornography;

(b) driving under the influence while a child is present in the vehicle;

(c) lewdness involving a child;

(d) pornographic material or performance;

(e) providing dangerous weapons or firearms to a minor;

(f) sexual battery;

(g) sexual enticing of a minor;

(h) sexual exploitation;

(i) voyeurism; or

(j) any crime against an individual.

(9) OBP shall consider a covered individual eligible if the only background finding is a conviction or plea of no contest to a nonviolent drug offense that occurred ten or more years before OBP conducted the background check.

(10) If the provider is not eligible by OBP, OL may suspend or deny their license until the reason for the background check finding is resolved.

(11) If a covered individual is considered not eligible by OBP, including if the individual has been convicted, has pleaded no contest, or is currently subject to a plea in abeyance or diversion agreement for a felony or misdemeanor, the provider shall prohibit that individual from being employed by the child care program or residing at the facility until the reason for the background check finding is resolved.

(12) If OBP denies a covered individual a license or employment by the provider based upon the criminal background check and the covered individual disagrees with the information provided by the Department of Public Safety (DPS), the covered individual may appeal the information to DPS.

(13) The provider and the covered individual shall notify OBP within 48 hours of becoming aware of a covered individual's arrest warrant, felony or misdemeanor arrest, charge, conviction, or LIS supported finding. Failure to notify OBP within 48 hours may result in disciplinary action, including license revocation.

(14) The OBP director or designee may consider any additional relevant background information in making the decision to grant, deny, or continue an eligible determination on a background check, including:

(a) intervening circumstances regarding an offense or finding;

- (b) steps taken to correct or improve since any offense or finding;
- (c) surrounding circumstances of an offense or finding;
- (d) the length of time since an offense or finding; and
- (e) the type and number of offenses or findings.

(15)(a) OBP shall rely on relevant information from Subsections (7) and (8) as conclusive evidence and may deny a covered individual based on that information.

(b) When a covered individual no longer works for the program, the provider shall separate that employee in the program's roster in the online system within five days of the employee's separation from the program.

(c) A covered individual may resubmit a denied application to OBP no sooner than two years from the date of separation or upon substantial change to the covered individual's circumstances.

(16) If OBP determines evidence exists that a covered individual has been arrested or charged with an offense that may be denied under Subsections (7) and (8), the ~~D~~division ~~[of Licensing and Background Checks]~~ may act to protect the health and safety of a child.

(17) The provider may only allow a covered individual with a pending arrest or criminal charge to access a child when:

- (a) OBP has authorized conditional access; and
- (b) the provider demonstrates to OBP that the work arrangement does not pose a threat to the health or safety of any child.

(18) A covered individual may request a hearing, in accordance with Section R497-100-5, within 15 calendar days of being informed in writing of any OBP decision.

R430-90-9. Facility.

(1) The provider shall ensure that there is at least 35 square feet of indoor space for each child in care, including the provider's or employee's own child.

(2) The provider may include floor space used for furniture, fixtures, or equipment as indoor space per child if the furniture, fixture, or equipment is used:

- (a) by children;
- (b) for the care of children; or
- (c) to store materials for children.

(3) When measuring indoor space for children's use, the provider may not include any:

- (a) bathroom;
- (b) closet;
- (c) entryway;
- (d) hallway; and
- (e) lobby.

(4) The provider shall ensure that the number of children in care at any given time does not exceed the capacity identified on the license, except when providing after school child care for up to three additional school-age children.

(5)(a) The provider shall ensure that any building or play structure on the premises constructed before 1978 that has peeling, flaking, chalking, or failing paint undergoes a test for lead.

(b) If there is lead-based paint at the facility, the provider shall contact their local health department within five working days and follow required procedures for remediation of the lead hazard.

(6) The provider shall ensure that each room and indoor area that children use is ventilated by mechanical ventilation or by windows that open and have screens.

(7) The provider shall ensure that rooms and areas have adequate light intensity for the safety of the children and the type of activity the provider is conducting.

(8) The provider shall maintain the indoor temperature between 65 and 82 degrees Fahrenheit.

(9) The provider shall ensure that there is a working telephone:

- (a) at the facility;
- (b) during any offsite activity; and
- (c) in each vehicle while transporting a child.

(10) The provider shall ensure that there is at least one working toilet and one working handwashing sink accessible to each nondiapered child in care.

(11) The provider shall ensure that there is a bathroom that provides privacy available for use by any school-age child.

(12) If there is a swimming pool on the premises that the provider does not empty after each use, the provider shall:

- (a) maintain the pool in a safe manner;
- (b) meet applicable state and local laws and ordinances related to the operation of a swimming pool; and
- (c) when not in use:

(i) cover the pool with a commercially made safety enclosure that is installed according to the manufacturer's instructions or

(ii) enclose the pool within at least a four-foot-high fence or solid barrier that is kept locked and that separates the pool from any other areas on the premises.

(13) If there is a hot tub with water in it on the premises, the provider shall make the hot tub inaccessible to children by:

- (a) keeping the hot tub locked with a properly working cover; or
- (b) enclosing the hot tub within at least a four-foot-high fence or solid barrier that is locked and that separates the hot tub from any other areas on the premises.

NOTICES OF PROPOSED RULES

- (14) The provider shall maintain any building and outdoor area in good repair and safe condition, including any:
- (a) ceiling, wall, and floor covering;
 - (b) drape, blind, and other window covering;
 - (c) entrance, exit, step, and walkway, including keeping them free of ice, snow, and other hazards;
 - (d) furniture, toy, and material accessible to a child;
 - (e) indoor and outdoor equipment; and
 - (f) lighting, bathroom, and other fixture.
- (15) The provider shall ensure that a protective barrier of at least three feet or higher exists for:
- (a) any accessible raised deck or balcony that is five feet or higher; and
 - (b) any open stairwell that is five feet or deeper.
- (16) If the house is subdivided, any part of the building is rented out, or any area of the facility is shared including the outdoor area, OL may inspect the entire facility and the provider shall ensure that covered individuals in the facility comply with this rule, except when:
- (a) there are no connecting interior doorways that can be used by an unauthorized individual;
 - (b) there is a separate entrance for the child care program;
 - (c) there is a separate mailing address for the rented area;
 - (d) there is a signed rental or lease agreement for the rented area; and
 - (e) there is no shared access to the outdoor area, unless a qualified caregiver is with the children each time children in care are using the outdoor area.
- (17) The provider shall ensure that there is an outdoor area that is safely accessible to any child.
- (18) The provider shall ensure that the outdoor area has at least 40 square feet of space for each child using the area at one time.
- (19) The provider shall ensure that the outdoor area is enclosed within a fence, wall, or solid natural barrier that is at least four feet high if the facility is on a street or within a half mile of a street that:
- (a) has a speed of 25 miles per hour or higher; or
 - (b) has more than two lanes of traffic.
- (20) The provider shall ensure that the following hazards are separated from the children's outdoor area with a fence, wall, or solid natural barrier that is at least four feet high:
- (a) a drop-off of more than five feet on or within 50 yards of the property line;
 - (b) a water hazard, including:
 - (i) a creek;
 - (ii) a ditch;
 - (iii) a lake;
 - (iv) a pond;
 - (v) a pool;
 - (vi) a reservoir;
 - (vii) a river;
 - (viii) a swimming pool; or
 - (c) an animal watering trough, on or within 100 yards of the property line;
 - (d) any barbed wire that is within 30 feet of the children's play area;
 - (e) any dangerous machinery, including farm equipment, on or within 50 yards of the property line; and
 - (f) any livestock on or within 50 yards of the property line.
- (21) The provider shall ensure that there is no gap five by five inches or greater in or under the outdoor area fence or barrier.
- (22) The provider shall ensure that there is shade available to protect any child from excessive sun and heat when in the outdoor area.

R430-90-10. Ratios and Group Size.

- (1) The provider shall maintain at least:
- (a) one caregiver for up to eight children in care; and
 - (b) two caregivers for nine to 16 children in care.
- (2) The provider shall include the provider's and employee's own child age four years old or older in care:
- (a) in the group size when the parent of the child is working at the facility; and
 - (b) in the group size and the caregiver-to-child ratio when the parent of the child is not working at the facility.
- (3) When caring for children younger than two years old, the provider shall ensure that:
- (a) there is at least one caregiver for every three children younger than two years old;
 - (b) each caregiver cares for no more than two children younger than 18 months old; and
 - (c) there are at least two caregivers if more than three children younger than two years old are present and there are more than six children in care.
- (4) The provider may not exceed the group sizes found in Table 1 and Table 2.

TABLE 1 Maximum Group Size With One Caregiver		
Number of provider's and caregiver's own children ages 4-12 years present during child care hours	Maximum allowed number of children in care, including the provider's and caregivers' own children younger than 4 years old	Total number of children present in the home during child care hours
0-4 children	8 children	12 children
5 children	7 children	12 children
6 children	6 children	12 children
7 children	5 children	12 children
8 children	4 children	12 children
9 children	3 children	12 children
10 children	2 children	12 children
11 children	1 child	12 children

TABLE 2 Maximum Group Size With Two Caregivers		
Number of provider's and caregiver's own children ages 4-12 years present during child care hours	Maximum allowed number of children in care, including the provider's and caregivers' own children younger than 4 years old	Total number of children present in the home during child care hours
0-8 children	16 children	24 children
9 children	15 children	24 children
10 children	14 children	24 children
11 children	13 children	24 children
12 children	12 children	24 children
13 children	11 children	24 children
14 children	10 children	24 children
15 children	9 children	24 children
16 children	8 children	24 children
17 children	7 children	24 children
18 children	6 children	24 children
19 children	5 children	24 children
20 children	4 children	24 children
21 children	3 children	24 children
22 children	2 children	24 children
23 children	1 child	24 children

- (5) The provider may include caregivers and volunteers who are 16 or 17 years old in the caregiver-to-child ratio.
- (6) The provider shall ensure that guests do not count in caregiver-to-child ratio.

R430-90-11. Child Supervision and Security.

- (1) The provider shall ensure that each caregiver provides and maintains active supervision of each child, including:
 - (a) being in the outdoor area when a child younger than five years old is in the outdoor area;
 - (b) being inside the home when a child in care is inside the home;
 - (c) each child receives in-person interaction with a caregiver at least every 15 minutes;
 - (d) focusing attention on the children and not on caregivers' personal interests; and
 - (e) knowing the number of children in their care at any time.
- (2) The provider shall ensure a 16 or 17 year old staff or household member may only have unsupervised contact with a child in care, including during offsite activities and transportation, if:
 - (a) the director or the director designee is physically present and available as needed; and
 - (b) the staff or household member is not a volunteer.
- (3) The provider may not assign a staff member, volunteer, or household member who is younger than 16 years old to care for or supervise any child in care.
- (4) The provider shall ensure that any guest does not have unsupervised contact with any child in care, including during any offsite activity and transportation.
- (5) The provider shall ensure that any parent of a child in care does not have unsupervised contact with any child in care, except with their own child.
- (6) The provider may allow school-age children to go outdoors while caregivers are indoors if:
 - (a) a caregiver can hear the children when children are outdoors; and

NOTICES OF PROPOSED RULES

- (b) the children are in an area completely enclosed within a fence, wall, or solid natural barrier that is at least four feet high.
- (7) The provider shall ensure that a caregiver monitors each sleeping infant by:
 - (a) personally observing each sleeping infant at least once every 15 minutes; or
 - (b) placing each infant to sleep within the sight and hearing of a caregiver.
- (8) The provider may allow a child to participate in supervised offsite activities without a caregiver if:
 - (a) the provider has prior written permission from the child's parent for the child's participation; and
 - (b) the provider has clearly assigned the responsibility for the child's whereabouts and supervision to a responsible adult who accepts that responsibility throughout the period of the offsite activity.
- (9) The provider shall ensure that parents have access to their child and the areas used to care for their child when their child is in care.
- (10) To maintain security and supervision of children, the provider shall ensure that:
 - (a) any individual signing a child in and out uses an identifier, including a signature, initials, or electronic code;
 - (b) each child is signed in and out in accordance with this section;
 - (c) only a child's parent or an individual with written authorization from the parent may sign-out a child;
 - (d) photo identification is required if the individual signing the child out is unknown to the provider;
 - (e) the sign-in and sign-out records include the date and time each child arrives and leaves; and
 - (f) there is written permission from the child's parent if children sign themselves in or out.
- (11) In an emergency, the provider shall accept the parent's verbal authorization to release a child if the provider can confirm the identity of:
 - (a) the person giving verbal authorization; and
 - (b) the person picking up the child.
- (12) The provider shall ensure that a six-week record of each child's daily attendance, including sign-in and sign-out records, is on-site for review by OL.

R430-90-12. Child Guidance and Interaction.

- (1) The provider shall ensure that no child is subjected to physical, emotional, or sexual abuse while in care.
- (2) The provider shall inform each child, each parent, and anyone who interacts with any child in care of the facility's behavioral expectations and how any misbehavior will be handled.
- (3) The provider shall ensure that any individual who interacts with a child guides the child's behavior by using positive reinforcement, redirection, and by setting clear limits that promote the child's ability to become self-disciplined.
- (4) The provider shall ensure that each caregiver uses gentle, passive restraint with a child only when it is needed to protect a child from injuring themselves or others, or to stop a child from destroying property.
- (5) The provider shall ensure that each interaction with a child does not include:
 - (a) any action that produces physical pain or discomfort, including hitting, spanking, shaking, biting, or pinching;
 - (b) any form of corporal punishment;
 - (c) any form of emotional mistreatment;
 - (d) confining a child in a closet, locked room, or other enclosure including a box, cupboard, or cage;
 - (e) forcing or withholding food, rest, or toileting;
 - (f) restraining a child's movement by binding, tying, or any other form of restraint that exceeds gentle, passive restraint; or
 - (g) shouting at children.
- (6) Any individual who witnesses or suspects that a child has been subjected to abuse, neglect, or exploitation shall immediately notify Child Protective Services or law enforcement as required in state law.

R430-90-13. Child Safety and Injury Prevention.

- (1) The provider shall ensure that any child and staff use each building, outdoor area, toy, and any equipment safely and as intended by the manufacturer to prevent injury to children.
- (2) The provider shall ensure that any poisonous or harmful plant is inaccessible to children.
- (3) The provider shall ensure that any sharp object, edge, corner, or point that could cut or puncture skin is inaccessible to children.
- (4) The provider shall ensure that any choking hazard is inaccessible to any child younger than three years old.
- (5) The provider shall ensure that any strangulation hazard, including any rope, cord, chain, and wire attached to a structure and long enough to encircle a child's neck is inaccessible to children.
- (6) The provider shall ensure that any tripping hazard including unsecured flooring, any rug with a curled edge, or cord in a walkway is inaccessible to children.
- (7) The provider shall ensure that any empty plastic bag large enough for a child's head to fit inside, any latex glove, or balloon is inaccessible to any child younger than five years old.
- (8) The provider shall ensure that standing water that measures two inches or deeper and five by five inches or greater in diameter is inaccessible to children.
- (9) The provider shall ensure that any toxic or hazardous chemical, including any cleaner, insecticide, lawn product, and flammable, corrosive, and reactive material is:
 - (a) disposed of properly;
 - (b) inaccessible to any child;
 - (c) stored in a container labeled with the contents of the container; and

- (d) used according to manufacturer instructions.
- (10) The provider shall ensure that the following items are inaccessible to children:
 - (a) cigarette lighters;
 - (b) hot wax or other hot substances;
 - (c) matches;
 - (d) open flames; and
 - (e) when in use, portable space heaters, wood burning stoves, and fireplaces.
- (11) The provider shall ensure that the following items are inaccessible to a child:
 - (a) any live electrical wire; and
 - (b) for a child younger than five years old, any electrical outlet and surge protector without a protective cap or safety device when not in use.
- (12) Unless used and stored as allowed by any state or federal law, the provider shall ensure that any firearm, including a gun, muzzleloader, rifle, shotgun, handgun, pistol, and automatic gun, is:
 - (a) locked in a cabinet or area using a key, combination lock, or fingerprint lock; and
 - (b) stored unloaded and separate from ammunition.
- (13) The provider shall ensure that any weapon, including a paintball gun, BB gun, airsoft gun, sling shot, arrow, and mace, is inaccessible to children.
- (14) The provider shall ensure that any alcohol, illegal substance, or sexually explicit material is inaccessible and not used on the premises, during any offsite activity, or in any facility vehicle any time a child is in care.
- (15) The provider shall ensure that an outdoor source of drinking water, including individually labeled water bottles, a pitcher of water and individual cups, or a working water fountain is available to each child when the outside temperature is 75 degrees Fahrenheit or higher.
- (16) The provider shall ensure that each area accessible to a child is free of any heavy or unstable object that a child could pull down on themselves, including any furniture, unsecured television, and standing ladder.
- (17) The provider shall ensure that hot water accessible to a child does not exceed 120 degrees Fahrenheit.
- (18) The provider shall ensure that highchairs that are used by children have T-shaped safety straps or safety devices that are used when a child is in the chair.
- (19) The provider shall ensure that infant walkers with wheels are inaccessible to children.
- (20) The provider shall ensure that any tobacco, e-cigarette, e-juice, e-liquid, or similar product is inaccessible and, in compliance with ~~Title 26, Chapter 38,~~ the Utah Indoor Clean Air Act described in Section 26B-7-503 and Rule R392-510, is not used:
 - (a) in a facility or any other building when a child is in care;
 - (b) in any vehicle that is being used to transport a child in care;
 - (c) in any outdoor area or within 25 feet of any outdoor area occupied by a child in care;
 - (d) within 25 feet of any entrance to a facility or other building occupied by a child in care.

R430-90-14. Emergency Preparedness, Response, and Recovery.

- (1) The provider shall develop and follow a written emergency preparedness, response, and recovery plan that:
 - (a) includes a procedure for:
 - (i) accommodating a child with a disability;
 - (ii) accommodating a child with a chronic medical condition;
 - (iii) accommodating any infant and toddler;
 - (iv) communication with and reunification of families;
 - (v) continuity of operations;
 - (vi) evacuation;
 - (vii) lockdown;
 - (viii) relocation; and
 - (ix) shelter in place.
 - (b) includes instructions to follow if there is an allergy, serious reaction to food, or any other trigger that may affect a child's health; and
 - (c) is followed if an emergency happens, unless otherwise instructed by emergency personnel.
- (2) The provider shall post the facility's street address and any emergency numbers, including at least fire, police, and poison control, near each telephone or in an area clearly visible to anyone needing the information.
- (3) The provider shall keep first aid supplies in the facility, including at least antiseptic, bandages, and tweezers.
- (4) The provider shall conduct a fire evacuation drill at least quarterly and ensure each drill includes a complete exit of each child, staff member, and volunteer from the building.
- (5) The provider shall document each fire drill, including:
 - (a) any problems encountered and remediation;
 - (b) the date and time of the drill;
 - (c) the name of the individual supervising the drill;
 - (d) the number of children participating; and
 - (e) the total time to complete the evacuation.
- (6) The provider shall conduct a drill for disasters, other than fires, at least once every six months.

NOTICES OF PROPOSED RULES

- (7) The provider shall document each disaster drill, including:
 - (a) any problems encountered and remediation;
 - (b) the date and time of the drill;
 - (c) the name of the individual supervising the drill;
 - (d) the number of children participating; and
 - (e) the type of disaster, including earthquake, flood, prolonged power or water outage, or tornado;
- (8) The provider shall vary the days and times when fire and other disaster drills are held.
- (9) The provider shall keep documentation of the previous 12 months of fire and disaster drills on-site for review by OL.
- (10) The provider shall:
 - (a) give each parent a written report on the day of occurrence of each incident, accident, or injury involving their child;
 - (b) ensure the report has the signatures of the caregivers involved, the provider, and the individual picking up the child; and
 - (c) if a school-age child signs themselves out of the facility, send a copy of the report to the parent on the day following the occurrence.
- (11) If a child is injured and the injury appears serious but not life-threatening, the provider shall contact the child's parent immediately.
- (12) If a life-threatening injury to a child, or an injury that poses a threat of the loss of vision, hearing, or a limb happens, the provider shall:
 - (a) call emergency personnel immediately;
 - (b) contact the parent after emergency personnel are called; and
 - (c) if the parent cannot be reached, try to contact the child's emergency contact individual.
- (13) If a child is injured while in care and receives medical attention, or for a child fatality, the provider shall:
 - (a) submit a completed accident report form to OL within the next business day of the incident; or
 - (b) contact OL within the next business day and submit a completed accident report form within five business days of the incident.
- (14) The provider shall keep a six-week record of each incident, accident, and injury report on-site for review by OL.
- (15) If the provider must leave the children due to an emergency and a background checked covered individual who is at least 18 years old or older is not available to stay with the children, the provider may leave the children in the care of an emergency substitute who:
 - (a) is at least 18 years old;
 - (b) substitutes the caregiver for the minimum time possible and for less than one business day; and
 - (c) signs a written background statement before being left alone with the children.
- (16) Before leaving for the emergency, the provider must obtain a signed, written background statement from the emergency substitute stating that the emergency substitute:
 - (a) has not been convicted of a felony;
 - (b) has not been convicted of a crime against a person;
 - (c) is not listed on the state or national sex offender registry; and
 - (d) is not being investigated for abuse or neglect by any federal, state, or local government agency.
- (17) Within five working days after the occurrence, the provider shall submit emergency substitute's written background statements to OBP for review.
- (18) The provider shall ensure compliance with incident reporting in accordance with Subsection R380-600-7(16).

R430-90-15. Health and Infection Control.

- (1) The provider shall maintain the building, furnishings, equipment, and outdoor area including keeping:
 - (a) any frequently touched surface, including each doorknob and light switch, clean and sanitized;
 - (b) each area and any equipment used for the storage, preparation, and service of food clean and sanitized;
 - (c) each surface free of rotting food or a build-up of food;
 - (d) each wall and floor clean and free of spills, dirt, and grime;
 - (e) the building and grounds free of a build-up of litter and garbage; and
 - (f) the building and grounds free of animal feces.
- (2) The provider shall take safe and effective measures to prevent and eliminate the presence of insects, rodents, and other pests.
- (3) The provider shall clean and sanitize any toy and material used by a child:
 - (a) at least once a week or more often if needed;
 - (b) after being put in a child's mouth and before another child plays with the toy; and
 - (c) after being contaminated by a body fluid.
- (4) The provider shall ensure that any fabric toy and item including any stuffed animal, cloth doll, pillow cover, and dress-up clothing is machine washable and if used, washed at least each week or as needed.
- (5) The provider shall clean and sanitize each highchair tray before each use.
- (6) The provider shall clean and sanitize each water play table or tub daily, if used by a child.
- (7) The provider shall clean and sanitize each bathroom surface including each toilet, sink, faucet, toilet and sink handle, and counter each business day.
 - (8) The provider shall clean and sanitize each potty chair after each use.
 - (9) The provider shall ensure that toilet paper is accessible and kept in a dispenser.
- (10) The provider shall ensure that each staff member and volunteer washes their hands thoroughly with liquid soap and running water:
 - (a) after cleaning up or taking out garbage;

- (b) after contact with a body fluid;
- (c) after using the toilet or helping a child use the toilet;
- (d) before and after eating meals and snacks or feeding a child;
- (e) before handling or preparing food or bottles;
- (f) upon arrival; and
- (g) when coming in from outdoors.

(11) The provider shall ensure that each caregiver teaches each child how to wash the child's hands thoroughly and that the caregiver oversees handwashing when possible.

(12) The provider shall ensure that each child washes their hands thoroughly with liquid soap and running water:

- (a) after contact with a body fluid;
- (b) after using the toilet;
- (c) before and after eating meals and snacks;
- (d) before using a water play table or tub;
- (e) upon arrival; and
- (f) when coming in from outdoors.

(13) The provider shall ensure that only single-use towels, an electric hand dryer, or individually labeled cloth towels are used to dry hands.

(14) The provider shall ensure that if cloth towels are used, cloth towels are:

- (a) not shared; and
- (b) washed daily.

(15) The provider shall ensure that any personal hygiene items, including a toothbrush, comb, and hair accessory, are not shared and are stored so they do not touch each other or they are sanitized between each use.

(16) The provider shall ensure that any pacifier, bottle, and nondisposable drinking cup is:

- (a) labeled with each child's name or individually identified; and
- (b) not shared, or washed and sanitized before being used by another child.

(17) The provider shall ensure the prompt change of a child's clothing if the child has a toileting accident.

(18) The provider shall ensure that a child's clothing that is wet or soiled from a body fluid is:

- (a) not rinsed or washed at the center;
- (b) placed in a leakproof container that is labeled with the child's name; and
- (c) returned to the parent or thrown away with parental consent.

(19) The provider shall ensure that staff take precautions when cleaning any floor, furniture, or other surface contaminated by blood, urine, feces, or vomit, and ensure that, except for diaper changes and toileting accidents, staff cleaning these bodily fluids shall:

- (a) clean the surface using a detergent solution;
- (b) rinse the surface with clean water;
- (c) sanitize the surface;
- (d) throw away, in a leakproof plastic bag, any disposable material, including paper towels, that were used to clean up the body fluid;
- (e) wash and sanitize any non-disposable material used to clean up the body fluid, including any cleaning cloth, mop, or reusable rubber glove, before reusing it;

- (f) wear waterproof gloves; and
- (g) wash their hands after cleaning up the body fluid.

(20) If a child becomes ill while in care, the provider shall:

(a) as soon as the illness is observed or suspected, contact the child's parent or, if the parent cannot be reached, an individual listed as the emergency contact; and

(b) if the child is ill with an infectious disease, make the child comfortable in a safe, supervised area that is separated from any other child until the parent arrives.

(21) The provider shall notify the parents of each child in care if any child, employee, or person in the home has an infectious disease or parasite on the day the illness is discovered.

(22) If any child or employee has an infectious disease, an unusual or serious illness, or a sudden onset of an illness, the provider shall notify the local health department on the day the illness is discovered.

(23) To prevent contamination of food, the spread of foodborne illnesses, and other diseases, the provider shall ensure that an individual with an infectious disease, or showing symptoms including diarrhea, fever, coughing, or vomiting, does not prepare or serve foods.

R430-90-16. Food and Nutrition.

(1) The provider shall ensure that each child two years old and older is offered a meal or snack at least once every three hours.

(2) If the provider supplies food for children's meals or snacks, the provider shall ensure that:

- (a) the meal service meets local health department food service rules;
- (b) the foods that are served meet the nutritional requirements of the USDA Child and Adult Care Food Program (CACFP) whether or not the provider participates in the CACFP;
- (c) the provider uses the CACFP meal pattern requirements, the standard OL-approved menus, or menus approved by a registered dietitian, and that dietitian approval is noted and dated on the menus, and current within the past five years;
- (d) the current week's menu is posted for review by parents and OL; and
- (e) if not participating or in good standing with the CACFP, keep a six-week record of foods served at each meal and snack.

NOTICES OF PROPOSED RULES

- (3) The provider shall ensure that the individual who serves food to a child:
 - (a) is aware of each child in their assigned group who has any food allergy or sensitivity; and
 - (b) ensures that a child is not served the food that the child is allergic or sensitive to.
- (4) The provider may not place a child's food on a bare table, and shall serve a child's food on a dish, napkin, or sanitary highchair tray, except an individual finger food, including a cracker, that may be placed directly in a child's hand.
 - (5) If a parent brings food and drink for their child's use, the provider shall ensure that the food and drink is:
 - (a) consumed only by that child;
 - (b) labeled with the child's name; and
 - (c) refrigerated if needed.

R430-90-17. Medications.

- (1) The provider shall make medications inaccessible to children in care.
- (2) The provider shall lock any refrigerated medication or store it at least 36 inches above the floor and, if liquid, store it in a separate leakproof container.
 - (3) If a parent supplies any over-the-counter or prescription medication, the provider shall ensure that medication:
 - (a) is labeled with the child's full name;
 - (b) is stored in the original or pharmacy container; and
 - (c) has the original label.
 - (4) The provider shall obtain a written medication permission form completed and signed by the parent before administering any medication supplied by the parent for their child.
 - (5) The provider shall ensure that the medication permission form includes at least:
 - (a) a parent signature and the date signed;
 - (b) any written instructions for administration;
 - (c) the name of the child; and
 - (d) the name of the medication.
 - (6) The provider shall ensure that instructions for administering the medication include at least:
 - (a) how the medication will be given;
 - (b) the disease or condition being treated; and
 - (c) the dosage; and
 - (d) the times and dates to administer the medication.
 - (7) If the provider supplies an over-the-counter medication for a child's use, the provider shall ensure that no staff administer the medication to any child without previous parental consent for each instance it is given. The provider shall ensure that the consent is:
 - (a) written; or
 - (b) verbal, if the date and time of the consent is documented and signed by the parent upon picking up their child.
 - (8) The provider shall ensure that the staff administering the medication:
 - (a) checks the medication label to confirm the child's name if the parent supplied the medication;
 - (b) checks the medication label or the package to ensure that a child is not given a dosage larger than that recommended by the health care professional or manufacturer;
 - (c) washes their hands; and
 - (d) administers the medication.
 - (9) The provider shall ensure that immediately after administering a medication, the staff giving the medication records:
 - (a) any error in administering the medication or adverse reactions;
 - (b) the date, time, and dosage of the medication given; and
 - (c) their signature or initials.
 - (10) The provider shall report to the parent a child's adverse reaction to a medication or error in administration of the medication immediately upon recognizing the reaction or error, or after notifying emergency personnel if the reaction is life-threatening.
 - (11) The provider shall notify the parent before the scheduled medication dosage to a child if the provider chooses not to administer medication as instructed by the parent.
 - (12) The provider shall keep a six-week record of medication permission and administration forms on-site for review by OL.

R430-90-18. Activities.

- (1) The provider shall offer daily activities that support each child's healthy physical, social, emotional, cognitive, and language development.
- (2) The provider shall ensure that daily activities include outdoor play as weather and air quality allow.
- (3) The provider shall ensure that physical development activities include light, moderate, and vigorous physical activity for a daily total of at least 15 minutes for every two hours that children spend in the program.
 - (4) For each child two years old and older, the provider shall post a daily schedule that includes:
 - (a) activities that support children's healthy development; and
 - (b) the times activities occur including at least meal, snack, nap or rest, and outdoor play times.
 - (5) The provider shall ensure that any toy, material, and equipment needed to support a child's healthy development is available to each child.

- (6) Except for occasional special events, the provider shall ensure that each child's primary screen time activity on media, including any television, cell phone, tablet, and computer, is:
- (a) not allowed for a child zero to 17 months old;
 - (b) limited for a child 18 months to four years old to one hour a day, or five hours a week with a maximum screen time of two hours per activity; and
 - (c) planned to address the needs of a child five to 12 years old.
- (7) If the provider offers swimming activities, or if a wading pool is used, the provider shall ensure that:
- (a) a caregiver stays at the pool supervising when a child is in the pool or has access to the pool, and when an accessible pool has water in it;
 - (b) any diapered child wears a swim diaper when the child is in the pool;
 - (c) each lifeguard and pool personnel does not count toward the caregiver-to-child ratio;
 - (d) each wading pool is emptied and sanitized after use by each group of children;
 - (e) if the pool is deeper than four feet, there is a lifeguard on duty who is certified by the Red Cross or another approved certification program any time a child has access to the pool; and
 - (f) the parent gives permission before their child uses the pool.
- (8) If the provider offers offsite activities, the provider shall ensure that:
- (a) a child's name is not used on a nametag, t-shirt, or in any other visible way;
 - (b) first aid supplies, including at least antiseptic, bandages, and tweezers are available;
 - (c) the child's parent gives written consent before each activity;
 - (d) the required caregiver-to-child ratio and supervision are maintained during the entire activity; and
 - (e) there is a way for each child and caregiver to wash their hands with soap and water, or, if there is no source of running water, with a wet wipe or hand sanitizer.
- (9) The provider shall ensure that a caregiver with the children takes the emergency information and releases for each child in the group on each offsite activity, and that the information includes at least:
- (a) the child's name;
 - (b) the parent's name and phone number;
 - (c) the name and phone number of a person to notify if there is an emergency and the parent cannot be contacted;
 - (d) the name of any person authorized by the parent to pick up the child; and
 - (e) current emergency medical treatment and emergency medical transportation releases.

R430-90-19. Play Equipment.

- (1) The provider shall ensure that children using play equipment use it safely and as intended by the manufacturer.
- (2) The provider shall ensure that, when in use, stationary play equipment is not placed on a hard surface including concrete, asphalt, dirt, or the bare floor.
- (3) Except for trampolines, the provider shall ensure that stationary play equipment with a designated play surface that is 18 inches high or higher:
 - (a) has a surrounding three-foot use zone, free of hard objects or surfaces, that extends from the outermost edge of the equipment;
 - (b) has cushioning that covers the entire required use zone; and
 - (c) is stable or securely anchored.
- (4) OL may consider a trampoline on the premises is inaccessible to children in care if the trampoline:
 - (a) is enclosed behind a locked fence or safety net that is at least three feet high;
 - (b) has no jumping mat; or
 - (c) is placed upside down.
- (5) The provider shall ensure that each accessible trampoline without a safety net enclosure has at least a six-foot use zone that is measured from the outermost edge of the trampoline frame, and that is free from any structure or object including play equipment, trees, and fences.
- (6) The provider shall ensure that each accessible trampoline with a properly installed, used as specified by the manufacturer, and in good repair safety net enclosure has at least a three-foot use zone that is measured from the outermost edge of the trampoline frame, and that is free from any structure or object including play equipment, trees, and fences.
 - (7) The provider shall ensure that each accessible trampoline with or without a safety net enclosure is placed over:
 - (a) grass;
 - (b) a six-inch deep cushioning; or
 - (c) other commercial cushioning.
 - (8) The provider shall ensure that cushioning for each accessible trampoline covers the entire required use zone.
 - (9) The provider shall ensure that each accessible trampoline has:
 - (a) no ladders or other objects within the use zone a child could use to climb on the trampoline; and
 - (b) shock absorbing pads that completely cover the trampoline springs, hooks, and frame.
 - (10) The provider must obtain written permission from a child's parent or legal guardian before that child uses the trampoline.
 - (11) The provider shall ensure that if a child uses an accessible trampoline:
 - (a) a caregiver is at the trampoline supervising;
 - (b) only one person at a time uses the trampoline;
 - (c) no child in care is allowed to do somersaults or flips on the trampoline;

NOTICES OF PROPOSED RULES

- (d) no one is permitted under the trampoline while the trampoline is in use; and
- (e) only school-age children in care are allowed to use a trampoline.
- (12) The provider shall ensure that there are no entrapment hazards on or within the use zone of any piece of stationary play equipment.
- (13) The provider shall ensure that there is no strangulation hazard on or within the use zone of any piece of stationary play equipment.
- (14) The provider shall ensure that there is no crush, shearing, or sharp edge hazard on or within the use zone of any piece of stationary play equipment.
- (15) The provider shall ensure that there is no tripping hazard including any concrete footing, tree stump, tree root, or rock within the use zone of any piece of stationary play equipment.

R430-90-20. Transportation.

- (1) For each child that the provider transports, the provider shall obtain a transportation permission form that is:
 - (a) signed by a parent; and
 - (b) on-site for review by OL.
- (2) The provider shall ensure that each vehicle used for transporting children:
 - (a) is enclosed with a roof or top;
 - (b) is equipped with safety restraints;
 - (c) has a current vehicle registration;
 - (d) is maintained in a safe and clean condition; and
 - (e) contains first aid supplies, including at least antiseptic, bandages, and tweezers.
- (3) The provider shall ensure that the safety restraints in each vehicle that transports children are:
 - (a) appropriate for the age and size of each child who is transported, as required by law;
 - (b) properly installed; and
 - (c) in safe condition and working order.
- (4) The provider shall ensure that the driver of each vehicle who is transporting children:
 - (a) is at least 18 years old;
 - (b) has and carries with them a current, valid driver's license for the type of vehicle being driven;
 - (d) ensures that each child being transported is in an individual safety restraint as required by law;
 - (e) ensures that the inside vehicle temperature is between 60 and 85 degrees Fahrenheit;
 - (f) ensures that each child stay seated while the vehicle is moving;
 - (g) ensures that the vehicle is locked during transport;
 - (h) never leaves a child in the vehicle unattended by an adult; and
 - (i) never leaves the keys in the ignition when not in the driver's seat.
- (5) If the provider walks or uses public transportation to transport a child to or from a facility, the provider shall ensure that:
 - (a) each child being transported has a completed transportation permission form signed by their parent;
 - (b) a caregiver goes with and actively supervises each child;
 - (c) a caregiver transporting a child has emergency contact information outlined in Subsection R430-90-18(9) and a release for each child being transported; and
 - (d) the caregiver-to-child ratio is maintained.
- (6) The provider shall:
 - (a) have transport liability insurance; or
 - (b) inform parents in writing that the provider does not have transport liability insurance.

R430-90-21. Animals.

- (1) The provider shall inform each parent of the kinds of animals allowed at the facility.
- (2) The provider shall ensure that there is no animal on the premises that:
 - (a) has a history of biting even one individual;
 - (b) has a history of dangerous, attacking, or aggressive behavior; or
 - (c) is naturally aggressive.
- (3) The provider shall ensure that any animal at the facility is clean and free of any obvious disease or health problem that could adversely affect a child.
- (4) The provider shall ensure that there is no animal or animal equipment in food preparation or eating areas.
- (5) The provider shall ensure that no child younger than five years old assists with the cleaning of any animal or animal cage, pen, or equipment.
- (6) If a school-age child helps in the cleaning of animals or animal equipment, the provider shall ensure that the child washes their hands immediately after cleaning the animal or equipment.
- (7) The provider shall ensure that each child and staff wash their hands immediately after playing with or touching any reptile or amphibian.
- (8) The provider shall ensure that any dog, cat, or ferret that the facility houses have current rabies vaccinations.
- (9) The provider shall keep current animal vaccination records on-site for review by OL.

R430-90-22. Rest and Sleep.

- (1) The provider shall offer a child in care a daily opportunity for rest or sleep in an environment with:
 - (a) a low noise level;
 - (b) freedom from distractions; and
 - (c) subdued lighting.
- (2) The provider shall ensure that each crib:
 - (a) does not have strings, cords, ropes, or other entanglement hazards on the crib or within reach of the child;
 - (b) has a tight-fitting mattress;
 - (c) has at least 20 inches from the top of the mattress to the top of the crib rail, or at least 12 inches from the top of the mattress to the top of the crib rail if the child using the crib cannot sit up without assistance;
 - (d) has documentation from the manufacturer or retailer stating that the crib was built after June 28, 2011, or that the crib is certified if the crib was manufactured before that date; and
 - (e) has slats spaced no more than 2-3/8 inches apart.
- (3) The provider shall ensure that sleeping equipment does not block any exit
- (4) The provider shall ensure that sleeping equipment and bedding items are:
 - (a) clearly assigned to one child; and
 - (b) laundered as needed, but at least once a week, and before use by another child.
- (5) The provider shall clean and sanitize sleeping equipment, that is not clearly assigned to and used by an individual child, before each use.

R430-90-23. Diapering.

- (1) If the provider accepts children who wear diapers, the provider shall ensure that each child's diaper is:
 - (a) checked as soon as a sleeping child awakens;
 - (b) checked at least once every two hours; and
 - (c) promptly changed when wet or soiled.
- (2) The provider shall ensure that caregivers do not change children's diapers directly on the floor, in a food preparation or eating area, or on any surface used for another purpose.
- (3) The provider shall ensure that the diapering surface is smooth, waterproof, and in good repair.
- (4) The provider shall ensure that a caregiver cleans and sanitizes the diapering surface after each diaper change or uses a disposable, waterproof diapering surface that is thrown away after each diaper change.
- (5) The provider shall ensure that a caregiver washes their hands after each diaper change.
- (6) The provider shall ensure that a caregiver places any wet and soiled disposable diaper:
 - (a) in a container that has a disposable plastic lining and a tight-fitting lid;
 - (b) directly in an outdoor garbage container that has a tight-fitting lid; or
 - (c) in a container that is inaccessible to children.
- (7) The provider shall ensure that each indoor container where any wet and soiled diaper is placed is cleaned and sanitized each day.
- (8) If cloth diapers are used, the provider shall:
 - (a) not rinse cloth diapers at the facility; and
 - (b)(i) place cloth diapers directly into a leakproof container that is inaccessible to any child and labeled with the child's name; or
 - (ii) place the cloth diapers in a leakproof diapering service container.

R430-90-24. Infant and Toddler Care.

- (1) The provider shall ensure that each awake infant and toddler receives positive physical and verbal interaction with a caregiver at least once every 15 minutes.
- (2) To stimulate their healthy development, the provider shall ensure that infants receive daily interactions with adults, including on the ground interaction and closely supervised time spent in the prone position for infants less than six months old.
- (3) The provider shall ensure that a caregiver responds promptly to an infant and toddler who is in emotional distress due to any conditions including:
 - (a) a wet or soiled diaper;
 - (b) fatigue;
 - (c) fear;
 - (d) hunger;
 - (e) illness; or
 - (f) teething.
- (4) To stimulate healthy development, the provider shall make safe toys available and accessible for each infant and toddler to engage in play.
- (5) The provider shall ensure that any mobile infant and toddler has freedom of movement in a safe area.
- (6) The provider may not confine an awake infant or toddler in any piece of equipment, including a swing, high chair, crib, playpen, or other similar piece of equipment for more than 30 minutes.
- (7) The provider shall ensure that only one infant or toddler occupies any one piece of equipment at a time, unless the equipment has individual seats for more than one child.
- (8) The provider shall make objects made of styrofoam inaccessible to any infant and toddler.

NOTICES OF PROPOSED RULES

(9) The provider shall allow each infant and toddler to eat and sleep on their own schedule.

(10) The provider shall ensure that baby food, formula, or breast milk that is brought from home for an individual infant and toddlers use is:

- (a) labeled with the child's name;
- (b) labeled with the date and time of preparation or opening of the container, including a jar of baby food;
- (c) kept refrigerated if needed; and
- (d) discarded within 24 hours of preparation or opening, except for unprepared powdered formula or dry food.

(11) If an infant cannot sit upright and hold their own bottle, the provider shall ensure that a caregiver is within arm's reach of each infant during bottle feeding and that a bottle is not propped.

(12) The provider shall ensure that the caregiver swirls and tests warm bottles for temperature before feeding to a child.

(13) The provider shall discard formula and milk, including breast milk, after feeding or within two hours of starting a feeding.

(14) The provider shall ensure that a caregiver cuts solid food for:

- (a) an infant into pieces no larger than 1/4 inch in diameter; and
- (b) a toddler into pieces no larger than 1/2 inch in diameter.

(15) The provider shall ensure that each infant sleeps in equipment designed for sleep including a crib, bassinet, porta-crib or playpen, and that an infant is not placed to sleep on a mat, cot, pillow, bouncer, swing, car seat, or other similar piece of equipment.

(16) The provider shall place an infant on their back for sleeping unless there is documentation from a health care provider requiring a different sleep position.

(17) The provider may not place any soft toy, loose blanket, or other object in sleep equipment while in use by a sleeping infant.

R430-90-25. Compliance.

Any person who violates this rule may be subject to the penalties in Rule R380-600 and Title 26B, Chapter 2, Part 7, Penalties and Investigations.

KEY: child care facilities, licensed family child care

Date of Last Change: ~~July 28, 2025~~ 2026

Notice of Continuation: June 17, 2025

Authorizing, and Implemented or Interpreted Law: 26B-2-402

NOTICE OF SUBSTANTIVE CHANGE		
TYPE OF FILING: Amendment		
Rule or section number:	R614-1-4	Filing ID: 57863

Agency Information

1. Title catchline:	Labor Commission, Occupational Safety and Health	
Building:	Heber M. Wells Building	
Street address:	160 E 300 S	
City, state:	Salt Lake City, UT	
Mailing address:	PO Box 146600	
City, state and zip:	Salt Lake City, UT 84114-6600	
Contact persons:		
Name:	Phone:	Email:
Holly Lawrence	801-530-6494	hlawrence@utah.gov
Floyd Johnson	801-530-6898	fjohnsion@utah.gov
Chris Hill	801-530-6113	chill@utah.gov
Please address questions regarding information on this notice to the persons listed above.		

General Information

2. Rule or section catchline:
R614-1-4. Incorporation of Federal Standards

<p>4. Purpose of the new rule or reason for the change:</p> <p>The reasons for the change are:</p> <ol style="list-style-type: none"> 1) incorporate the most recent edition of the Code of Federal Regulations (CFR); 2) correct several inadvertent errors in the Hazard Communication Standard (HCS), 29 CFR 1910.1200, that were published in the Federal Register on May 20, 2024; 3) correct errors in the HCS that were published in the Federal Register on January 8, 2026; 4) make a technical amendment to an appendix of the HCS; and 5) extend compliance dates in the HCS.
<p>5. Summary of the new rule or change:</p> <p>The proposed amendment:</p> <ol style="list-style-type: none"> 1) Incorporates, by reference, the July 1, 2025, edition, of 29 CFR 1904 (except 29 CFR 1904.36 and the workplace fatality, injury and illness reporting requirements found in 29 CFR 1904.1, 1904.2, 1904.7 and 1904.39); 29 CFR 1908; 29 CFR 1910.6 and 1910.21 through the end of part 1910; and 29 CFR 1926.6 and 1926.20 through the end of part 1926. 2) Incorporates, by reference, Federal Register, Vol. 91, No. 5, Thursday, January 8, 2026, Rules and Regulations, pages 562 to and including 598, "Hazard Communication Standard; Corrections". <ol style="list-style-type: none"> a) Corrects minor and typographical errors in the regulatory text and appendices to the HCS. b) Addresses minor errors which occur in paragraphs (c) and (d) of 29 CFR 1910.1200 and in Appendices A, B, C, D, and F. c) Replaces "gender-specific tumors" with "sex-specific tumors" in Appendix F. 3) Incorporates, by reference, Federal Register, Vol. 91, No. 10, Thursday, January 15, 2026, Rules and Regulations, pages 1695 to and including 1696, "Hazard Communication Standard." <ol style="list-style-type: none"> a) Extends the compliance dates in the HCS by four months. 4) Incorporates, by reference, Federal Register, Vol. 91, No. 30, Friday, February 13, 2026, Rules and Regulations, page 6760, "Hazard Communication Standard; Corrections." <ol style="list-style-type: none"> a) Corrects note under Table B.5.1 on page 572 of the Federal Register, Vol. 91, No. 5, Thursday, January 8, 2026, "Hazard Communication Standard, Corrections."

Fiscal Information

<p>6. Provide an estimate and written explanation of the aggregate anticipated cost or savings to:</p>
<p>A. State budget:</p> <p>Utah Occupational Safety and Health (UOSH)'s enforcement of the proposed amendment will not result in additional costs or savings to the state budget.</p> <p>Changes to the HCS include extension of compliance dates, correction of errors in the regulatory text and appendices, and a technical amendment in one appendix.</p> <p>These errors are minor and primarily typographical in nature.</p>
<p>B. Local governments:</p> <p>Local governments have no administration or enforcement obligations under the proposed amendment.</p>
<p>C. Small businesses ("small business" means a business employing 1-49 persons):</p> <p>The proposed amendment will have no anticipated cost or savings to small businesses.</p> <p>Changes to the HCS include extension of compliance dates, correction of errors in the regulatory text and appendices, and a technical amendment in one appendix.</p> <p>These errors are minor and primarily typographical in nature.</p>
<p>D. Non-small businesses ("non-small business" means a business employing 50 or more persons):</p> <p>The proposed amendment will have no anticipated cost or savings to non-small businesses.</p>

Changes to the HCS include extension of compliance dates, correction of errors in the regulatory text and appendices, and a technical amendment in one appendix.

These errors are minor and primarily typographical in nature.

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 proposed amendment will have no anticipated cost or savings to persons other than small businesses, non-small businesses, state, or local government entities.

Changes to the HCS include extension of compliance dates, correction of errors in the regulatory text and appendices, and a technical amendment in one appendix.

These errors are minor and primarily typographical in nature.

F. Compliance costs for affected persons:

The proposed amendment will have no anticipated compliance costs for affected persons.

Changes to the HCS include extension of compliance dates, correction of errors in the regulatory text and appendices, and a technical amendment in one appendix.

These errors are minor and primarily typographical in nature.

G. Regulatory Impact Summary Table (This table includes only fiscal impacts the agency was able to measure. If the agency could not estimate an impact, it is excluded from this table but described in boxes A through F.)

Regulatory Impact Summary Table					
Fiscal Cost	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
Total Fiscal Cost	\$0	\$0	\$0	\$0	\$0
Fiscal Benefits	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
Total Fiscal Benefits	\$0	\$0	\$0	\$0	\$0
Net Fiscal Benefits	\$0	\$0	\$0	\$0	\$0

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

The Commissioner of the Utah Labor Commission, Jaceson R. Maughan, has reviewed and approved this regulatory impact analysis.

This rule will not have a significant fiscal impact on businesses.

Citation Information

7. 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:

Title 6, Chapter 34A		
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Incorporation by Reference Information

8. Incorporation by Reference:

A. This rule adds or updates the following title of material incorporated by reference (a copy of the material incorporated by reference must be submitted to the Office of Administrative Rules. *If none, leave blank*):

Official Title of Materials Incorporated (from title page)	29 CFR 1904
Publisher	US Government
Issue Date	July 1, 2025

B. This rule adds or updates the following title of material incorporated by reference (a copy of the material incorporated by reference must be submitted to the Office of Administrative Rules. *If none, leave blank*):

Official Title of Materials Incorporated (from title page)	29 CFR 1908
Publisher	US Government
Issue Date	July 1, 2025

C. This rule adds or updates the following title of material incorporated by reference (a copy of the material incorporated by reference must be submitted to the Office of Administrative Rules. *If none, leave blank*):

Official Title of Materials Incorporated (from title page)	29 CFR 1910.6 to 1910.21
Publisher	US Government
Issue Date	July 1, 2025

D. This rule adds or updates the following title of material incorporated by reference (a copy of the material incorporated by reference must be submitted to the Office of Administrative Rules. *If none, leave blank*):

Official Title of Materials Incorporated (from title page)	29 CFR 1926.6 and 1926.20
Publisher	US Government
Issue Date	July 1, 2025

E. This rule adds or updates the following title of material incorporated by reference (a copy of the material incorporated by reference must be submitted to the Office of Administrative Rules. *If none, leave blank*):

Official Title of Materials Incorporated (from title page)	Federal Register, Vol. 91, No. 5
Publisher	US Government
Issue Date	January 8, 2026

F. This rule adds or updates the following title of material incorporated by reference (a copy of the material incorporated by reference must be submitted to the Office of Administrative Rules. *If none, leave blank*):

Official Title of Materials Incorporated (from title page)	Federal Register Vol. 91, No. 10
Publisher	US Government

Issue Date	January 15, 2026
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G. This rule adds or updates the following title of material incorporated by reference (a copy of the material incorporated by reference must be submitted to the Office of Administrative Rules. *If none, leave blank*):

Official Title of Materials Incorporated (from title page)	Federal Register Vol. 91 No. 30
Publisher	US Government
Issue Date	February 13, 2026

Public Notice Information

9. The public may submit written or oral comments to the agency identified in box 1.

A. Comments will be accepted until:	05/15/2026
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10. This rule change MAY become effective on:	05/22/2026
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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

Agency head or designee and title:	Jacson R. Maughan, Commissioner	Date:	03/18/2026
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R614. Labor Commission, Occupational Safety and Health.

R614-1. General Provisions.

R614-1-4. Incorporation of Federal Standards.

A. The following federal occupational safety and health standards are incorporated:

1. 29 CFR 1904, of the July 1, [2024]2025, edition, is incorporated by reference, except 29 CFR 1904.36 and the workplace fatality, injury and illness reporting requirements found in 29 CFR 1904.1, 1904.2, 1904.7 and 1904.39. Workplace fatalities, injuries and illnesses shall be reported pursuant to the more specific Utah standards in Subsection 34A-6-301(3)(b)(ii) of the Utah OSH Act and Subsection R614-1-5(B)(1).
2. 29 CFR 1908, of the July 1, [2024]2025, edition, is incorporated by reference.
3. 29 CFR 1910.6 and 1910.21 through the end of part 1910, of the July 1, [2024]2025, edition, are incorporated by reference.
4. 29 CFR 1926.6 and 1926.20 through the end of part 1926, of the July 1, [2024]2025, edition are incorporated by reference.
5. Federal Register, Vol. 91, No. 5, Thursday, January 8, 2026, Rules and Regulations, pages 562 to and including 598, "Hazard Communication Standard; Corrections," is incorporated by reference.[Federal Register Vol. 89, No. 98, Monday, May 20, 2024, Rules and Regulations, pages 44144 to and including 44461, "Hazard Communication Standard; Final Rule" is incorporated by reference.]
6. Federal Register, Vol. 91, No. 10, Thursday, January 15, 2026, Rules and Regulations, pages 1695 to and including 1696, "Hazard Communication Standard," is incorporated by reference.
7. Federal Register Vol. 91, No. 30, Friday, February 13, 2026, Rules and Regulations, page 6760, "Hazard Communication Standard; Corrections," is incorporated by reference.
6. Federal Register Vol. 89, No. 196, Wednesday, October 9, 2024, Rules and Regulations, pages 81829 to and including 81836, "Hazard Communication standard: Final Rule — correction and technical amendment," is incorporated by reference.
7. Federal Register Vol. 89, No. 238, Thursday, December 12, 2024, Rules and Regulations, pages 100321 to and including 100346, "Personal Protective Equipment in Construction; Final Rule" is incorporated by reference.

KEY: safety

Date of Last Change: 2026[June 9, 2025]

Notice of Continuation: June 24, 2022

Authorizing, and Implemented or Interpreted Law: 34A-6

NOTICE OF SUBSTANTIVE CHANGE

TYPE OF FILING: Amendment		
Rule or section number:	R616-3-3	Filing ID: 57864

Agency Information

1. Title catchline:	Labor Commission, Boiler, Elevator and Coal Mine Safety	
Building:	Heber M. Wells Building	
Street address:	160 E 300 S, 3rd floor	
City, state:	Salt Lake City, UT	
Mailing address:	PO Box 146600	
City, state and zip:	Salt Lake City, UT 84114-6600	
Contact persons:		
Name:	Phone:	Email:
Michael Frost	801-514-0206	Mfrost@utah.gov
Chris Hill	801-530-6113	chill@utah.gov
Please address questions regarding information on this notice to the persons listed above.		

General Information

2. Rule or section catchline:
R616-3-3. Safety Codes for Elevators
4. Purpose of the new rule or reason for the change:
The purpose of the filing is to bring Section R616-3-3 into alignment with the adopted building code exceptions.
5. Summary of the new rule or change:
This filing is to reenact the exemption of section 2.27.1 of the ASME A17.1-2.27.1 code, which requires video communication be provided in passenger elevators, by exempting this code requirement from the 2022 code edition and adopting the 2016 edition communication requirements.
This exception was originally put in place with the adoption of the 2019 edition.

Fiscal Information

6. Provide an estimate and written explanation of the aggregate anticipated cost or savings to:
A. State budget:
By exempting the video communication requirement each elevator could save \$3,500 of upfront costs.
It would be difficult for the agency to determine the aggregate savings, because the savings would depend on the number of elevators owned by the state.
B. Local governments:
By exempting the video communication requirement each elevator could save \$3,500 of upfront costs.
It would be difficult for the agency to determine the aggregate savings, because the savings would depend on the number of elevators owned by local governments.
C. Small businesses ("small business" means a business employing 1-49 persons):
By exempting the video communication requirement each elevator could save \$3,500 of upfront costs.
It would be difficult for the agency to determine the aggregate savings, because the savings would depend on the number of elevators owned by each small business.
D. Non-small businesses ("non-small business" means a business employing 50 or more persons):
By exempting the video communication requirement each elevator could save \$3,500 of upfront costs.

It would be difficult for the agency to determine the aggregate savings, because the savings would depend on the number of elevators owned by each non-small business.

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**):

By exempting the video communication requirement each elevator could save \$3,500 of upfront costs.

It would be difficult for the agency to determine the aggregate savings, because the savings would depend on the number of elevators owned by persons other than small businesses, non-small businesses, state of local government entities.

F. Compliance costs for affected persons:

By exempting the video communication requirement each elevator could save \$3,500 of upfront costs.

It would be difficult for the agency to determine the aggregate savings, because the savings would depend on the number of elevators owned by affected persons.

G. Regulatory Impact Summary Table (This table includes only fiscal impacts the agency was able to measure. If the agency could not estimate an impact, it is excluded from this table but described in boxes A through F.)

Regulatory Impact Summary Table

Fiscal Cost	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
Total Fiscal Cost	\$0	\$0	\$0	\$0	\$0
Fiscal Benefits	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
Total Fiscal Benefits	\$0	\$0	\$0	\$0	\$0
Net Fiscal Benefits	\$0	\$0	\$0	\$0	\$0

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

The Commissioner of the Utah Labor Commission, Jaceson R. Maughan, has reviewed and approved this regulatory impact analysis.

Citation Information

7. 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 34A-1-101 et seq.

Public Notice Information

9. The public may submit written or oral comments to the agency identified in box 1.

A. Comments will be accepted until: 05/15/2026

10. This rule change MAY become effective on: 05/22/2026

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

Agency head or designee and title:	Jacson R. Maughan, Commissioner	Date:	03/18/2026
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R616. Labor Commission, Boiler, Elevator and Coal Mine Safety.

R616-3. Elevator Rules.

R616-3-3. Safety Codes for Elevators.

The following safety codes are incorporated by reference within this rule:

A. ASME A17.1-2022/CSA B44-16, Safety Code for Elevators and Escalators, and amended as follows:

1. Delete 2.2.2.5;

2. The requirements listed in section 2.27.1 will be those listed in the 2016 Edition of ASME A17.1 Section 2.27.1 and not those listed in the 2022 Edition

3. Amend 8.6.5.8 as follows: Existing hydraulic cylinders installed below ground when found to be leaking shall be replaced with cylinders conforming to 3.18.3.4 or the car shall be provided with safeties conforming to 3.17.1 and guide rails, guide rail supports and fastenings conforming to 3.23.1. This code is issued every two years. New issues become mandatory only when a formal change is made to this rule. Elevators are required to comply with the A17.1 code in effect at the time of installation.

~~3~~4. Delete 8.6.4.24 and 8.6.5.19.

B. ASME A17.3 - 2015 Safety Code for Existing Elevators and Escalators. This code is adopted for regulatory guidance only for elevators classified as remodeled elevators by the Division of Boiler, Elevator and Coal Mine Safety.

C. ASME A90.1-2015, Safety Standard for Belt Manlifts.

D. ANSI A10.4-2016, Safety Requirements for Personnel Hoists and Employee Elevators for Construction and Demolition Operations.

E. ICC/ANSI A117.1 (2009) Accessible and Usable Buildings and Facilities, sections 407 and 408, and 410 approved October 20, 2010.

F. ASME A18.1-2020 Safety Standard For Platform Lifts And Stairway Chairlifts.

G. ASME A17.6-2010 Standard for Elevator Suspension, Compensation, and Governor Systems.

H. The Commission may, by rule, add or delete from the applicable safety codes for any good and sufficient safety reason.

I. If incorporated safety codes are in conflict with one another, the ASME A17.1, Safety Code for Elevators and Escalators will take precedence. The exception to this is for compliance with the accessibility guidelines of Pub. L. No. 101-336 "The Americans with Disability Act of 1990". In this instance, the International Building Code standards adopted in Subsection R616-3-3(E) for accessibility as applied to elevators take precedence over ASME A17.1.

KEY: elevators, certification, safety

Date of Last Change: 2026[October 8, 2025]

Notice of Continuation: September 29, 2025

Authorizing, and Implemented or Interpreted Law: 34A-1-101 et seq.

NOTICE OF SUBSTANTIVE CHANGE

TYPE OF FILING: Amendment		
Rule or section number:	R653-11	Filing ID: 57872

Agency Information

1. Title catchline:	Natural Resources, Water Resources	
Building:	Utah Department of Natural Resources Building	
Street address:	1594 W North Temple St, Suite 310	
City, state:	Salt Lake City, UT	
Mailing address:	1594 W North Temple St, Suite 310	
City, state and zip:	Salt Lake City, UT 84116	
Contact persons:		
Name:	Phone:	Email:
Ashley Sampson	801-538-7235	asampson@utah.gov
Shelby Cooley	801-300-1623	scooley@utah.gov
Sarah Shechter	385-977-8919	sshechter@agutah.gov

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

General Information

2. Rule or section catchline:

R653-11. Water Conservation Requirements and Incentives

4. Purpose of the new rule or reason for the change:

The Utah Legislature enacted SB 118 in the 2023 General Session, which amended Section 73-10-37. This section of code directs the Utah Division of Water Resources (Division) to provide a financial incentive to landowners that convert lawn to water efficient landscaping, consistent with statutory and regulatory requirements.

Rule R653-11 effectuates Section 73-10-37. The proposed changes amend Rule R653-11 to clarify that the end user receives water from a retail water provider at the property, clarify the maintenance of a drip irrigation system if one is installed, increase the maximum incentive to \$3 a square foot for eligible city property projects during specific application periods, add flexibility in canopy coverage requirements to include tree canopy, expand requirements for drip irrigation systems to include a filter and pressure regulator, and other technical changes.

5. Summary of the new rule or change:

- The proposed amendments to Rule R653-11:
- 1) clarify that the property receives water at the property from a retail water provider (Subsection R653-11-7(3)(d)(vii)),
 - 2) clarify that the drip system is maintained if installed (Subsection R653-11-7(3)(xi)(A)), and (Subsection R653-11-7(5)(b)(ii)(B)),
 - 3) increase the maximum incentive to \$3 per square foot for eligible city property projects during specific application periods (Subsection R653-11-7(4)(ii)),
 - 4) add flexibility in canopy coverage requirements to include tree canopy (Subsection R653-11-9(1)(iii)), and
 - 5) expand requirements for drip irrigation systems to include a filter and pressure regulator (Subsection R653-11-9(1)(iv)(D)).

Fiscal Information

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

A. State budget:

The rule amendments implement water conservation incentives imposed in Section 73-10-37.

In 2023, SB 118 appropriated \$3,000,000 in ongoing funding to the Division for administering and funding the lawn conversion incentive programs and to distribute to landowners and water conservancy districts for financial incentives to convert existing lawn to drought resistant landscaping (see Section 73-10-37).

The rule, including amendments, govern the distribution of \$3,000,000 to: 1) reimburse some costs incurred converting lawn to drought resistant landscaping; and 2) assist eligible water conservancy districts fund incentives under their respective lawn conversion incentive programs.

The incentive programs will be administered by existing staff at the Division, no new hires or overtime pay will be required.

The changes to this rule will allow for an increase from up to \$2 per square foot to \$3 per square foot for eligible city properties during a specific application window.

Anticipated costs are currently unknown as this program is still new and not many cities have participated in the program yet.

B. Local governments:

The lawn conversion incentive program, including rule amendments, will not fiscally impact local governments negatively.

The program makes funding available to: 1) property owners as an incentive to convert lawns into water efficient landscaping; and 2) water conservancy districts for use in funding financial incentives awarded through their respective lawn conversion incentive programs.

The rule does not require: 1) landowners to convert their lawns to drought resistant landscaping or to seek reimbursement of costs for such conversions from the Division; or 2) water conservancy districts to implement and fund lawn conversion incentive programs or to seek a grant from the Division.

Grants are not reimbursed to the Division or any other entity by recipient districts. Participation in the program is completely voluntary under this rule.

Those that choose to participate and receive funding, however, must pay that portion of the conversion's costs not covered by the incentive award.

The cost to convert lawn to drought resistant landscaping varies considerably depending on contractor, region of the state, and actual work performed, but average costs are generally between \$4 and \$12 per square foot. The state incentive provided in this rule amendment is \$3 per square foot for eligible city properties during a specific application window.

A lawn conversion, once completed, will reduce the landowner's outdoor water use and the associated costs and eliminate lawn maintenance.

It will also conserve water supplies in the community, reduce the likelihood of shortages, and delay the need for further water development by water providers.

Anticipated costs are currently unknown as this program is still new and it is not known how many cities will take advantage of program and to what extent.

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

A small business landowner will be impacted similarly to that described in the local government section.

The rule amendment and the incentive program it implements will have a residual benefit to small businesses of increased demand for: 1) landscaping services by qualified contractors; and 2) organic and inorganic materials (plants, shrubs, trees, gravel, rock, etc.) used in water efficient landscaping.

In total, the incentive program over the next couple years will infuse over \$3,000,000 in state incentive money plus participants' corresponding cost share into the purchase of landscaping services and associated materials.

The increase from \$2 to \$3 per square foot for qualifying city properties during a specific application period could have a fiscal benefit to small businesses engaged in landscape work, landscape supply, plants, and similar businesses as demand for services and supplies could increase.

Impacts to small businesses are unknown and cannot be estimated as it is not known how many cities will take advantage of the increase and to what extent.

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

Impacts to non-small businesses are anticipated to be similar to small businesses. See small business impact response, Box 6. D. above.

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 rule amendment and the incentive program it implements will have a residual benefit to persons by increasing demand for: 1) landscaping services by qualified contractors; and 2) organic and inorganic materials (plants, shrubs, trees, gravel, rock, etc.) used in water efficient landscaping.

In total, the incentive program over the next couple years will infuse over \$3,000,000 in state incentive money plus participants' corresponding cost share into the purchase of landscaping services and associated materials.

F. Compliance costs for affected persons:

Participation in the program is completely voluntary under this rule.

This rule does not require landowners to convert their lawns to drought resistant landscaping or to seek reimbursement of costs for such conversions from the Division. Nor does it compel water conservancy districts to implement and fund lawn conversion incentive programs or to seek a grant from the Division.

Those that choose to participate and receive funding, however, must pay whatever portion of the conversion's costs not covered by the incentive award.

The cost to convert lawn to water efficient landscaping varies considerably depending on contractor, region of the state, and actual work performed, but average costs are generally between \$4 and \$12 a square foot. The state incentive provided in this rule amendment \$3 per square foot for eligible city properties during a specific application window.

A lawn conversion, once completed, will reduce the landowner's outdoor water use and the associated costs, and the need for lawn maintenance.

It will also conserve water supplies in the community, reduce the likelihood of shortages, and delay the need for further water development by water providers.

Again, participation in the program under this rule is voluntary.

G. Regulatory Impact Summary Table (This table includes only fiscal impacts the agency was able to measure. If the agency could not estimate an impact, it is excluded from this table but described in boxes A through F.)

Regulatory Impact Summary Table					
Fiscal Cost	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
Total Fiscal Cost	\$0	\$0	\$0	\$0	\$0
Fiscal Benefits	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
Total Fiscal Benefits	\$0	\$0	\$0	\$0	\$0
Net Fiscal Benefits	\$0	\$0	\$0	\$0	\$0

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

The Executive Director of the Department of Natural Resources, Joel Ferry, has reviewed and approved this regulatory impact analysis.

Citation Information

7. 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 73-10-37

Public Notice Information

9. The public may submit written or oral comments to the agency identified in box 1.

A. Comments will be accepted until: 05/15/2026

10. This rule change MAY become effective on: 05/22/2026

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

Agency head or designee and title:	Joel Williams, Division Director	Date:	03/20/2026
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R653. Natural Resources, Water Resources.

R653-11. Water Conservation Requirements and Incentives.

R653-11-1. Authority and Purpose.

~~(1)~~ This rule is promulgated to:

~~(1)~~ ~~(a)~~ define terms, identify exemptions, and further the objectives of Section 63A-5b-1108 in reducing outdoor water use at state government facilities;

~~(2)~~ ~~(b)~~ clarify terms and further the implementation and administration of the water conservation program created in Section 73-10-37 that financially incentivizes landowners to replace lawn with water efficient landscaping; and

~~(3)~~ ~~(c)~~ fulfill the legislative directives in Subsection 73-10-37(5).

R653-11-2. Definitions.

(1) Terms used in this rule and not otherwise defined in this section are defined in Subsections 63A-5b-1108(1) and 73-10-37(1).

(2) As used in this section:

(a) "District" means a water conservancy district, as that term is defined in Section 73-10-32.

(b) "Division" means the Division of Water Resources.

(c) "Landscaping conversion incentive program" means a program administered by a district that pays an owner a financial incentive to remove lawn from a project area on land owned by the owner.

(d) "Program guidelines" means guidelines adopted by a district for the district's landscaping conversion incentive program.

(e) "Outdoor water use" means water used for outdoor landscape irrigation and ornamental landscape water features.

(f) "Owner" means a person or entity that holds legal or rightful title, or a controlling interest in that title, to private or public nonagricultural land where a water end user is located.

(i) Applicant is an owner that applies to the division or a district for a financial incentive to convert lawn to water efficient landscaping.

(ii) Participant is an owner that executes a contract with the division or a district for a financial incentive to convert lawn to water efficient landscaping.

(g) "Drip irrigation system" means a system of narrow distribution tubes or pipes that deliver water from a dedicated low pressure supply valve to individual plants and trees through drip emitters. Drip emitters do not include micro spray, fogger, or bubbler emitters.

(h) "Lawn" means nonagricultural land planted in closely mowed, managed grasses, excluding golf courses, parks, athletic fields, and sod farms.

(i) "Nonagricultural land" means privately or publicly owned real property immediately surrounding a home, apartment, office building, or similar structure routinely occupied by people for dwelling, business, employment, or recreation; and that is not used to grow crops or to hold, house, or feed livestock.

(j) "Project area" means the area from which lawn is removed and replaced with water efficient landscaping under Sections 73-10-37, R653-11-7, and R653-11-8.

(k) "Water end user" means a person or entity that contracts with a retail water provider to obtain water for residential, commercial, industrial, or institutional use.

R653-11-3. Lawn Limitations at State Government Facilities.

(1) As provided in Subsection 63A-5b-1108(2), a state agency that owns or occupies a state government facility built or reconstructed on or after May 4, 2022, may not have more than 20% of the grounds of the state government facility be in lawn.

(2) The 20% lawn limitation in Subsection 63A-5b-1108(2) does not apply to state government facilities under construction or reconstruction and incomplete as of May 4, 2022.

(3) Upon written request to the division, the division may exempt a state government facility from the 20% lawn limitations in Subsection 63A-5b-1108(2) where it determines that the purpose of the requesting state agency that occupies the facility requires additional lawn.

R653-11-4. Reductions in Outdoor Water Use at State Government Facilities.

(1) As provided in Subsection 63A-5b-1108(3)(a), a state agency shall reduce its outdoor water use compared to the state agency's outdoor water use for fiscal year 2020:

(a) 5% or more by June 30, 2023; and

(b) 25% or more by June 30, 2026.

(2) The unit of measurement for outdoor water use under Subsection 63A-5b-1108(3) is gallons of use per fiscal year.

R653-11-5. Timing of Landscape Irrigation at State Government Facilities.

(1) As provided in Subsection 63A-5b-1108(4), a state agency may not water outdoor landscaping at a state government facility between the hours of 10 a.m. and 6 p.m.

(2) Upon written request to the division, the division may authorize a state agency to water landscapes at a state government facility between 10 a.m. and 6 p.m. where nighttime watering is:

- (a) infeasible due to water availability, insufficient water pressure, landscape use patterns or events, or similar impediments; or
- (b) detrimental to establishing and maintaining a landscape or landscape element in a condition that fulfills its fundamental purpose or ensures its perennial survival.

R653-11-6. State Incentives for Water Efficient Landscaping.

(1) The division may provide an incentive under Sections 73-10-37 and R653-11-7 to an owner to remove lawn from a project area on land owned by the owner in an area without a landscaping conversion incentive program.

(2) The division may award a grant under Sections 73-10-37 and R653-11-8 to a district to help fund financial incentives provided through a landscaping conversion incentive program administered by the district.

R653-11-7. Division Administered Water Efficient Landscaping Incentives.

(1) In an area without an existing landscaping conversion incentive program, the division or its contractor may provide a financial incentive to an owner of private or public property to remove lawn from the property and replace it with water efficient landscaping, as described in Section R653-11-9.

(2) An owner may not receive an incentive under this rule if:

- (a) the owner has previously received an incentive under this section for the same project area;
- (b) the project area is less than 200 square feet, except as otherwise authorized by the division where all lawn is removed from a parking strip or another isolated area of lawn; or
- (c) the project area is located within a municipality or unincorporated area of a county that has not adopted or imposed water use efficiency standards satisfying the minimum benchmarks in Section R653-11-10.

(3) To obtain an incentive under this section an applicant must submit an application to the division or its designated contractor that includes the following:

- (a) the applicant's name, mailing address, email address, and phone number;
- (b) a description of the property where the proposed lawn removal and replacement will occur;
- (c) a description of the lawn area proposed for removal and replacement, including its dimensions and location on the property, such as a project area;

(d) the applicant's acknowledgment and verification that:

- (i) they hold legal or rightful title or a controlling interest in the title to the project area;
- (ii) the project area is nonagricultural land;
- (iii) the project area consists of lawn that is living, mowed, and actively managed;
- (iv) the project area is not part of or located on a golf course, park, athletic field, or sod farm;
- (v) a water end user is located on the property where the project area is located;
- (vi) the water end user contracts with a retail water provider for residential, commercial, industrial, or institutional use of water on the project area;

(vii) ~~end user receives water from a retail water provider at the property~~[the project area is currently irrigated with water supplied by the retail water provider under contract with the water end user];

- (viii) they have legal authority to authorize lawn removal and replacement on the project area;
- (ix) they voluntarily seek to remove the lawn in the project area and replace it with water efficient landscaping, and are not required to do so by government code or policy;

(x) they have not previously received an incentive under Section 73-10-37 and this rule for the same project area;

(xi) they agree:

(A) to maintain the water efficient landscaping and, if one is installed, a drip irrigation system [~~installed~~] in the project area and not return it to lawn or overhead spray irrigation after receiving payment for converting the project area to water efficient landscaping; or

(B) return to the division or to a district the payments received for removal of lawn from the project area;

(xii) the lawn conversion project will not violate any applicable law, regulation, ordinance, zoning requirement, contractual obligation, or other legal limitation; and

(xiii) they understand and acknowledge that neither the lawn removal incentive program, its requirements, nor the award of an incentive by the division supersede applicable laws, regulations, ordinances, or contract terms to the contrary; and

(e) submission of the following documents:

(i) billing statement or other verifiable evidence showing that the water end user contracts with the retail water provider that services the project area; and

(ii) water efficient landscaping plan for the project area prepared by the applicant or a third party detailing the:

(A) location on the property and square footage of lawn planned for removal and conversion to water efficient landscaping, including drawings with dimensional measurements, aerial imagery, and photographs of the project area; and

(B) types and locations of the inorganic ground cover, weed barriers, plants, shrubs, trees, and irrigation systems satisfying the water efficient landscaping requirements in this rule.

(f) Upon request by the division, submission of documentation showing the applicant is the owner of the property and possesses legal authority to authorize the lawn removal and replacement.

(4)(a) The division or its contractors will receive and review lawn conversion incentive applications for completeness and compliance with the requirements of Section 73-10-37 and this rule.

(b) Before approving an incentive application, the division or its contractors will verify the location and eligibility of the project area for an incentive by:

- (i) reviewing information submitted with the application; or
- (ii) physically or virtually inspecting and verifying the project area.

(c)(i) The division or its contractors will approve incentives to qualified applicants under Section 73-10-37 and this rule in the order that eligible applications are filed.

(ii) The division may end an incentive application and corresponding contract where the owner has not completed the project, as prescribed in the application and contract, within 12 months of the date that the application is filed.

(d) An incentive authorized for any single application under Section 73-10-37 and this rule may not exceed:

(i) ~~[\$50,000 in the aggregate, except as otherwise approved by the division in writing on a case-by-case basis; and]~~ \$2 for each square foot of lawn replaced with water efficient landscaping; or

(ii) ~~[\$2 for each square foot of lawn replaced with water efficient landscaping.]~~ \$3 for each square foot of lawn replaced on eligible city projects during a specific application window opened by the division or water district; and.

(iii) \$50,000 in the aggregate, except as otherwise approved by the division in writing on a case-by-case basis.

(e) Incentives offered under Section 73-10-37 and this rule are subject to the availability of funding as appropriated by the Legislature.

(5) Upon approval of an incentive and as a condition to receiving the incentive, the participant shall:

(a) provide the division the information required to complete a federal W-9 tax form; and

(b) execute a lawn conversion incentive contract with the division detailing the parties' mutual obligations and responsibilities,

including:

(i) terms and conditions for receiving the incentive payment;

(ii) participant's commitment to:

(A) complete the project consistent with the approved water efficient landscaping plan within 365 days of approval of the application;

(B) maintain the water efficient landscaping and, ~~and if one is installed, the~~ drip irrigation system ~~[installed]~~ in the project area and not return it to lawn or overhead spray irrigation after receiving payment for converting the project area to water efficient landscaping; and

(C) return to the division the payments received for removing lawn from the project area and replacing it with water efficient landscaping in the event of violating Subsection (B);

(iii) other matters determined by the division necessary to effectively administer the incentive program; and

(iv) participant's acknowledgment that incentive payments received may be subject to state and federal taxation.

(6) Before the division disburses any portion of an incentive to a participant, the division or its contractors will physically or virtually inspect the project area and verify the lawn conversion to water efficient landscaping is completed and consistent with:

(a) the requirements of Section 73-10-37 and this rule;

(b) the approved water efficient landscaping plan prepared by the participant or a third-party; and

(c) the lawn conversion incentive contract between the participant and the division.

(7)(a) Where a project fails to satisfy the requirements of this rule, the division may provide notice to cure that:

(i) identifies the deficiencies; and

(ii) provides the participant with 60 days to correct the deficiencies.

(b) Deficiencies must be corrected, and the project completed within:

(i) 60 days of the division's notice to cure; or

(ii) the remainder of the 365-day completion deadline in Subsection (5)(B)(ii)(A), whichever is greater.

(c) Failure to meet the applicable deadline in Subsection (b) will disqualify the project for a financial incentive.

R653-11-8. Grants for District Administered Water Efficient Landscaping Incentives.

(1) A district may obtain a grant from the division to help fund a financial incentive provided to an owner through a landscaping conversion incentive program administered by the district.

(2) To obtain a grant, a district shall file an application with the division that includes:

(a) the district's name, address, and contact information;

(b) verification that the district:

(i) has an operational landscaping conversion incentive program;

(ii) commits to implement the minimum requirements of Subsection 73-10-37(4)(c) and either this rule or program guidelines approved by the division under Subsection (3) in administering the program;

(iii) commits to use grant money exclusively to fund financial incentives provided to owners that remove lawn or turf from a project area in the district's landscaping conversion incentive program;

(iv) commits not pay an incentive amount with grant money that exceeds the maximum amounts established in Subsection R653-11-7(4)(d); and

(v) commits to provide an equal amount or more of matching funds for its landscaping conversion incentive program from sources other than the grant money the district receives under this rule;

(c) a detailed description of the landscaping conversion incentive program;

(d) a copy of the program guidelines governing the district's landscaping conversion incentive program;

NOTICES OF PROPOSED RULES

(e) a request that the division approve the district's program guidelines under Subsection (3), if the district wants to be subject to program guidelines in lieu of rule requirements; and

(f) any additional information requested by the division.

(3)(a) The division may approve a district's request to use its program guidelines in lieu of requirements in this rule that are not specifically mandated in Section 73-10-37 when the program guidelines satisfy the criteria in Subsection (b).

(b) The district's program guidelines must:

(i) result in at least as much water use savings as the waived rule provisions; and

(ii) accomplish the same objectives as the waived rule provisions.

(4) To obtain a grant under this rule, a district shall enter in a contract with the division that:

(a) identifies the amount of grant funding provided by the division;

(b) confirms the district's contribution of matching funds from sources other than the grant, that equal or exceed the grant amount, for its landscaping conversion incentive program;

(c) restricts the district from paying an incentive amount with grant money that exceeds the maximum amounts established in Subsection R653-11-7(4)(d);

(d) confirms the district's commitment to comply with and ensure all grant funded landscaping conversion projects proposed, undertaken, and completed by participants under its landscaping conversion incentive program satisfy the requirements in Subsection 73-10-37(3) and the contract before using grant money for a financial incentive;

(e) enjoins the use of grant money for a financial incentive in any landscaping conversion project that fails to satisfy the requirements in Subsection 73-37-10(3) and either this rule or program guidelines approved by the division under Subsection (3);

(f) requires the district submit to the division quarterly reports on funding status;

(g) requires the district to prepare and submit an annual accounting to the division on the use of grant money for financial incentives in the district's landscaping conversion incentive program;

(h) directs return to the division of all grant funding not dispersed by the district pursuant to Section 73-10-37 and this rule within 24 months of receiving the grant; and

(i) includes other matters determined by the division necessary to effectively administer the grant award.

(5)(a) The quarterly report referenced in Subsection (4)(f) should include a summary detailing:

(i) grant funding status;

(ii) the division and district's cumulative contributions, respectively, to all incentive payments dispersed by the district over the reporting period; and

(iii) the estimated amount of grant funding needed to satisfy incentive payments for approved projects that are underway but not completed.

(b) The annual accounting referenced in Subsection (4)(g) should include the:

(i) the division and district's cumulative contributions, respectively, to all incentive payments dispersed by the district over the reporting period; and

(ii) following information pertaining to each incentive payment:

(A) an identifying number or participant name for the landscape conversion project;

(B) landscape conversion project location;

(C) total square feet of lawn converted to water efficient landscaping;

(D) date of project approval;

(E) date of project completion;

(F) date of incentive payment;

(G) photographs of the project area before lawn removal and after conversion to water efficient landscaping;

(H) total amount paid as an incentive; and

(I) division and district's respective contributions to the incentive payment.

(6)(a) Upon verification of expending 70% of the total grant award and an annual accounting on the use of that grant money, a district may apply for additional grant money in accordance with Subsections (2) and (4).

(b) The division may award a district an additional grant based on the:

(i) availability of grant money;

(ii) priority or importance of the grant proposal in relation to the availability of grant money for:

(A) the division's landscaping conversion incentive program under Section R653-11-7;

(B) other landscaping conversion incentive program grant requests; and

(C) regional needs and goals;

(iii) effectiveness of the district's landscaping conversion incentive program in incentivizing owners to convert lawn or turf to water efficient landscaping;

(iv) district's past compliance with Section 73-10-37, this rule, and contract terms and conditions; and

(v) any matter bearing on the district's ability to responsibly handle and disperse grant money consistent with the requirements in Section 73-10-37, this rule, and contract terms and conditions.

R653-11-9. Water Efficient Landscaping.

(1)(a) Except as otherwise determined by the division under Subsection (2), water efficient landscaping, for purposes of Sections R653-11-7 and R653-11-8, is a mixture of inorganic and organic ground cover that:

(i) controls the invasion of common weeds and grasses;

- (ii) includes perennial, water efficient plants, shrubs, or trees;~~and~~
- (iii) ~~the canopy of~~ water efficient plants and shrubs~~[-excluding tree canopy,]~~ cover 50% or more of the project ~~[area-]~~at maturity, ~~or roughly three plants per 100 square feet, whichever is greater. One out of every three plants used to fulfill this requirement may be a shade tree;~~
- (iv) has a drip irrigation system that:
 - (A) replaces the existing irrigation system servicing the project area;
 - (B) minimizes evapotranspiration losses; and
 - (C) maintains the water efficient plants, shrubs, and trees in the project area in a healthy state; and
 - (D) has a filter to prevent emitter clogging and a pressure regulator to maintain uniform flow rates suitable for irrigation longevity;

and

- (v) is officially approved by the division, its contractors, or a district.
- (b) All treatment locations in the project area, not otherwise covered in brick, or stone shall be covered in 2-4 inches of permeable gravel, rock, bark, compost mulch, or similar material to control weeds and improve the appearance of the landscaping.
- (c) Water efficient landscaping may include permeable:
 - (i) weed barrier fabric; and
 - (ii) configurations of pavers, brick, stone, and similar hard surfaced materials, provided the project area satisfies the 50% plant and shrub cover requirement with the treated area counted as contributing nothing toward that cover.
 - (d) Water efficient landscaping does not include:
 - (i) a swimming pool, pond, fountain, waterfall, rivulet, or similar above ground landscape water feature;
 - (ii) concrete or artificial turf; and
 - (iii) a project area configuration that leaves adjacent strips of lawn less than eight feet in width.
- (2) The division may approve a district's request to use or partially use its program guidelines definition of "water efficient landscaping" in lieu of the definition in Subsection (1), if the division determines that application of the program guidelines' definition will:
 - (a) conserve as much or more water as the definition in Subsection (1);
 - (b) satisfy environmental needs; and
 - (c) further the water conservation objectives in Section 73-10-37.

R653-11-10. Water Use Efficiency Standards.

- (1) For purposes of Sections R653-11-7 and R653-11-8, water use efficiency standards for counties and municipalities within a county consist of the following outdoor lawn limitations on new residential development.
 - (a) Statewide requirements are as follows:
 - (i) No lawn on parking strips or areas less than eight feet in width in new development.
 - (ii)(A) Except as provided in Subsection (ii)(B), no lawn exceeding 20% of total landscaped area in new commercial, industrial, and institutional development.
 - (B) The 20% limitation does not apply to lawn areas developed and used for outdoor recreation activities that require lawn in an outdoor environment.
 - (b) Regional requirements are as follows:
 - (i) Washington County - no more than 15% of the lot size in new residential development is lawn;
 - (ii) Salt Lake, Utah, Weber, and Davis counties - no more than 35% of the front and side yard landscaped area in new residential development is lawn; and
 - (iii) All other counties in Utah - no more than 50% of the front and side yard landscaped area in new residential development is lawn.
 - (c) The lawn limitations in Subsections (a) and (b) do not apply to small lots with less than 250 square feet in landscaped area.
- (2)(a) A municipality or county may adopt more aggressive water use efficiency standards, provided the new standards increase water conservation and efficiency over the standards in Subsection (1).
- (b) A municipality or county that adopts more aggressive water use efficiency standards in compliance with Subsection (2)(a) shall be deemed compliant with the requirements of Subsection (1).

KEY: water conservation measures

Date of Last Change: ~~[June 21, 2024]~~2026

Authorizing, and Implemented or Interpreted Law: 63A-5b-1108; 73-10-37

NOTICE OF SUBSTANTIVE CHANGE		
TYPE OF FILING: New		
Rule or section number:	R653-17	Filing ID: 57877

Agency Information	
1. Title catchline:	Natural Resources, Water Resources
Building:	Utah Department of Natural Resources Building
Street address:	1594 W North Temple St, Suite 310

NOTICES OF PROPOSED RULES

City, state:	Salt Lake City, UT	
Mailing address:	1594 W North Temple St, Suite 310	
City, state and zip:	Salt Lake City, UT 84116	
Contact persons:		
Name:	Phone:	Email:
Ashley Sampson	801-538-7235	asampson@utah.gov
Rachel Shilton	801-214-5771	rachelshilton@utah.gov
Sarah Shechter	385-977-8919	sshechter@agutah.gov
Please address questions regarding information on this notice to the persons listed above.		

General Information

2. Rule or section catchline:	
R653-17. Regional Water Conservation Goals	
3. Are any changes in this filing because of state legislative action?	Changes are because of legislative action.
If yes, any bill number and session:	SB 89 (2022 General Session)
4. Purpose of the new rule or reason for the change:	
The Utah Legislature enacted SB 89 in the 2022 General Session, which changed Section 73-10-32 and which requires the Division of Water Resources (Division) to adopt regional water conservation goals.	
5. Summary of the new rule or change:	
The Division is adopting regional water conservation goals based on a county's opportunity to conserve water.	
The goals are percent reductions in water use compared to the 2015 Baseline Average, which is a five-year average of water use between 2015 and 2019.	

Fiscal Information

6. Provide an estimate and written explanation of the aggregate anticipated cost or savings to:	
A. State budget:	
This rule does not impact the state budget because it codifies into rule a metric that the State of Utah (the Division) was already using to track effectiveness of conservation efforts on water use.	
B. Local governments:	
This rule does not increase or reduce costs for local governments.	
Local water providers are already required to create a water conservation plan. The newly adopted regional goals are simply another metric for local providers to use in their existing plans.	
C. Small businesses ("small business" means a business employing 1-49 persons):	
This rule does not impact small businesses because it does not apply to small businesses.	
D. Non-small businesses ("non-small business" means a business employing 50 or more persons):	
This rule does not impact non-small businesses because it does not apply to 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):	
To the extent entities in this category are affected by this rule, the impact is the same as for local governments.	

Private public water providers are already required to create a water conservation plan. The newly adopted regional goals are simply another metric for water providers to use in their existing plans.

F. Compliance costs for affected persons:

To the extent entities in this category are affected by this rule, the impact is the same as for local governments.

Private public water providers are already required to create a water conservation plan. The newly adopted regional goals are simply another metric for water providers to use in their existing plans.

G. Regulatory Impact Summary Table (This table includes only fiscal impacts the agency was able to measure. If the agency could not estimate an impact, it is excluded from this table but described in boxes A through F.)

Regulatory Impact Summary Table					
Fiscal Cost	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
Total Fiscal Cost	\$0	\$0	\$0	\$0	\$0
Fiscal Benefits	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
Total Fiscal Benefits	\$0	\$0	\$0	\$0	\$0
Net Fiscal Benefits	\$0	\$0	\$0	\$0	\$0

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

The Executive Director of the Department of Natural Resources, Joel Ferry, has reviewed and approved this regulatory impact analysis.

Citation Information

7. 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 73-10-32

Public Notice Information

9. The public may submit written or oral comments to the agency identified in box 1.

A. Comments will be accepted until: 05/15/2026

10. This rule change MAY become effective on: 05/22/2026

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

Agency head or designee and title: Joel Williams, Division Director **Date:** 03/25/2026

R653. Natural Resources, Water Resources.
R653-17. Regional Water Conservation Goals.
R653-17-1. Authority and Purpose.

This rule is promulgated to:

- (1) define terms;
- (2) establish regional water conservation goals as percent;
- (3) describe water use measurement;
- (4) describe end user water use data;
- (5) present options for alternative conservation evaluation; and
- (6) fulfill legislative directives in Section 73-10-32.

R653-17-2. Definitions.

- (1) Terms used in this rule and not otherwise defined in this section are defined in Section 73-10-32.
- (2) As used in this section:
 - (a) "2015 Baseline Average" means average water use, reported as GPCD, compiled by the division from data reported to the Division of Water Rights and published by the division for calendar years 2015 through 2019.
 - (b) "District" means a water conservancy district, as the term is defined in Section 73-10-32.
 - (c) "Division" means the Division of Water Resources.
 - (d) "End user" means a person or entity that obtains water for M&I use from a public water system provider.
 - (e) "GPCD" means gallons per capita per day.
 - (f) "M&I" means municipal and industrial.
 - (g) "M&I water use" means water being used for residential, commercial, institutional and industrial purposes within a public water system service area, including potable, secondary and reuse water.
 - (h) "Public water system" means a water system which:
 - (i) supplies water to the same population year-round; and
 - (ii) serves at least 25 people at their primary residences; or
 - (iii) serves at least 15 connections that are primary residences.
 - (i) "Potable water" means water appropriate for human consumption.
 - (j) "Secondary water" means water that is not intended for human consumption and is used for landscape and garden irrigation.
 - (k) "Water being conserved" means the reduction by end users within a water provider's service area of M&I water use compared to the 2015 Baseline Average.

R653-17-3. Regions and Regional Water Conservation Goals.

- (1) The division shall establish regional water conservation goals for M&I water use.
- (2) The 2030 regional water conservation goals are a percent reduction from the 2015 Baseline Average established for the region where a public water system is located, as presented in the Table "2030 Water Conservation Goal". If a public water supplier is located in more than one county, it may use the water reduction goal for each county in which it operates for the end users in those counties or use the goal for the county where the majority of the end users are located

<u>TABLE</u> <u>2030 Water Conservation Goal</u>		
<u>Region</u>	<u>County</u>	<u>Goal</u>
<u>1</u>	<u>Beaver</u>	<u>30%</u>
<u>2</u>	<u>Box Elder</u>	<u>17%</u>
<u>3</u>	<u>Cache</u>	<u>18%</u>
<u>4</u>	<u>Carbon</u>	<u>11%</u>
<u>5</u>	<u>Daggett</u>	<u>19%</u>
<u>6</u>	<u>Davis</u>	<u>20% or as determined by Weber Basin Water Conservancy District</u>
<u>7</u>	<u>Duchesne</u>	<u>18%</u>
<u>8</u>	<u>Emery</u>	<u>34%</u>
<u>9</u>	<u>Garfield</u>	<u>20%</u>
<u>10</u>	<u>Grand</u>	<u>9%</u>
<u>11</u>	<u>Iron</u>	<u>13%</u>

<u>12</u>	<u>Juab</u>	<u>20%</u>
<u>13</u>	<u>Kane</u>	<u>15%</u>
<u>14</u>	<u>Millard</u>	<u>19%</u>
<u>15</u>	<u>Morgan</u>	<u>22%</u>
<u>16</u>	<u>Piute</u>	<u>13%</u>
<u>17</u>	<u>Rich</u>	<u>23%</u>
<u>18</u>	<u>Salt Lake</u>	<u>11% or as determined by Jordan Valley Water Conservancy District</u>
<u>19</u>	<u>San Juan</u>	<u>23%</u>
<u>20</u>	<u>Sanpete</u>	<u>26%</u>
<u>21</u>	<u>Sevier</u>	<u>11%</u>
<u>22</u>	<u>Summit</u>	<u>12%</u>
<u>23</u>	<u>Tooele</u>	<u>13%</u>
<u>24</u>	<u>Uintah</u>	<u>17%</u>
<u>25</u>	<u>Utah</u>	<u>20% or as determined by Central Utah Water Conservancy District</u>
<u>26</u>	<u>Wasatch</u>	<u>23%</u>
<u>27</u>	<u>Washington</u>	<u>14% or as determined by Washington County Water Conservancy District</u>
<u>28</u>	<u>Wayne</u>	<u>23%</u>
<u>29</u>	<u>Weber</u>	<u>21% or as determined by Weber Basin Water Conservancy District</u>

(3) The division shall review and update Regional Water Conservation Goals before December 31, 2030.

R653-17-4. Water Use Measurement.

(1) Water use shall annually be reported by every public water system to the Division of Water Rights.

(2) Water use reported to the Division of Water Rights shall be used by the division to calculate water use by end users in GPCD to determine progress toward the regional goal.

R653-17-5. End User Water Use Data.

(1) The division shall collect water use data at the end user connection.

(2) Annually the division shall:

(a) calculate end user water use data for public water systems from the Utah Water Use Program database administered by the Division of Water Rights;

(b) aggregate end user water use data from public water system data by:

(i) county;

(ii) region; and

(iii) basin.

(3) The 2015 Average Baseline shall be calculated by averaging public water system use for calendar years 2015 through 2019 as delivered to the end user.

R653-17-6. Alternative Water Conservation Goals.

(1) Water is conserved by reducing end user demand, improving efficiency, or reducing system and end user losses and waste.

(2) In lieu of adopting a regional water conservation goal percentage reduction presented in the Table "2030 Water Conservation Goal", a water conservancy district or a public water system may adopt an alternate goal.

(3) If a water conservancy district or a public water system elects to adopt a water conservation goal that would result in either more or less water being conserved than would be conserved under the conservation goals shown in the Table, the water conservancy district or public water system shall:

(a) Provide a table that includes the proposed goal to be achieved by 2030.

(b) Provide justification for adopting an alternative water conservation goal.

(c) Provide an explanation of the factors supporting the justification, such as:

NOTICES OF PROPOSED RULES

- (i) demographics;
- (ii) geography;
- (iii) lot size;
- (iv) categories of water use; or
- (v) availability of secondary water.
- (d) Provide a description of the proposed alternative conservation goal.
- (e) Describe how the alternative conservation goal metric is tracked, including:
 - (i) definition of terms as they are used in the metric;
 - (ii) elements and data used to develop the goal values; and
 - (iii) percentage reduction in water use compared to the 2015 Baseline Average using the proposed metric.
- (f) Specify data sources.

R653-17-7. Per Capita Consumptive Water Use.

- (1) The following water conservancy districts shall determine per capita consumptive use for counties for which they provide water in accordance with Section 73-5-8.5:
 - (a) Central Utah Water Conservancy District for Utah County;
 - (b) Jordan Valley Water Conservancy District for Salt Lake County;
 - (c) Washington County Water Conservancy District for Washington County; and
 - (d) Weber Basin Water Conservancy District for Weber and Davis Counties.
- (2) The division may not calculate a statewide per capita consumptive water use number.
- (3) The division may not calculate per capita consumptive water use for any entity within a county which has been designated to a water conservancy district.
- (4) The division may not be required to determine per capita consumptive water use nor establish per capita consumptive water use goals.
- (5) Determination of per capita consumptive water use by water conservancy districts may not prohibit the division from compiling, tracking, and reporting end user water use for all public water systems that report data to the Division of Water Rights.
- (6) A public water system may determine per capita consumptive water use for their own water system.
- (7) The division may adopt the same methodology to track and report water use as used by a water conservancy district.

KEY: water use comparison, water conservation measure, water conservation goals, consumptive water use, GPCD, gallons per person
Date of Last Change: 2026
Authorizing, and Implemented or Interpreted Law: 73-10-32

NOTICE OF SUBSTANTIVE CHANGE		
TYPE OF FILING: Amendment		
Rule or section number:	R765-607	Filing ID: 57880

Agency Information		
1. Title catchline:	Higher Education (Utah Board of), Administration	
Building:	Utah Board of Higher Education Building, The Gateway	
Street address:	60 S 400 W	
City, state:	Salt Lake City, UT	
Contact persons:		
Name:	Phone:	Email:
Hilary Renshaw	801-646-4784	Hilary.renshaw@ushe.edu
Alison Adams	801-646-4784	Alison.adams@ushe.edu
Geoffrey T. Landward	801-646-4784	Glandward@ushe.edu
Please address questions regarding information on this notice to the persons listed above.		

General Information	
2. Rule or section catchline:	
R765-607. PRIME Program Grant	
3. Are any changes in this filing because of state legislative action?	Changes are because of legislative action.

If yes, any bill number and session:	SB 1001 (2025 Special Session)
4. Purpose of the new rule or reason for the change:	
<p>This filing amends Rule R765-607 based on revisions passed by the Utah Board of Higher Education. Those revisions update the award requirements for the PRIME Program Grant (the Grant) and clarify the application process for the Grant.</p> <p>While Rule R765-607 explains the method by which the amount of the Grant will be determined each year, it does not itself provide for the appropriation of funds for the Scholarship.</p> <p>The amendments to Rule R765-607 also include changes in citations, numbering, and organization based on SB 1001 (2025 Special Session).</p>	
5. Summary of the new rule or change:	
<p>The amendments to Rule R765-607 update statutory citations based on SB 1001 (2025 Special Session) and make changes to the language of this rule, including to the provisions related to the requirements for the PRIME Program Grant (the Grant).</p> <p>The amendments also clarify the application process for the Grant, and provide updated provisions related to the method by which the amount of the Grant will be determined annually.</p>	

Fiscal Information

6. Provide an estimate and written explanation of the aggregate anticipated cost or savings to:
A. State budget:
<p>The amendments to Rule R765-607 will not have any fiscal impact on the state budget.</p> <p>There is no fiscal impact on the state budget because this rule provides procedures for the administration of the PRIME Program Grant (the Grant) and the changes made to the provisions of this rule do not have any impact on appropriations (which are not required under this rule) or any potential costs of implementing this rule.</p> <p>While this rule contains provisions related to how the amount of the Grant will be determined annually, the provisions of the new rule effect no change to the state budget as those appropriations occur separately from the processes set forth in this rule. As such, the changes do not create any cost or savings for the state budget.</p>
B. Local governments:
<p>The amendments to Rule R765-607 will not have any fiscal impact on local governments.</p> <p>There is no fiscal impact on local governments because this rule provides procedures for the administration of the PRIME Program Grant (the Grant) and the changes made to the provisions of this rule do not have any impact on appropriations (which are not required under this rule) or any potential costs of implementing this rule.</p> <p>While this rule contains provisions related to how the amount of the Grant will be determined annually, the provisions of the new rule have no financial effect on local governments as those appropriations occur separately from the processes set forth in this rule. As such, the changes do not create any cost or savings for local governments.</p>
C. Small businesses ("small business" means a business employing 1-49 persons):
<p>The amendments to Rule R765-607 will not have any fiscal impact on small businesses.</p> <p>There is no fiscal impact on small businesses because this rule provides procedures for the administration of the PRIME Program Grant (the Grant) and the changes made to the provisions of this rule do not have any impact on appropriations (which are not required under this rule) or any potential costs of implementing this rule.</p> <p>While this rule contains provisions related to how the amount of the Grant will be determined annually, the provisions of the new rule have no financial effect on small businesses as those appropriations occur separately from the processes set forth in this rule. As such, the changes do not create any cost or savings for small businesses.</p>
D. Non-small businesses ("non-small business" means a business employing 50 or more persons):
<p>The amendments to Rule R765-607 will not have any fiscal impact on non-small businesses.</p>

There is no fiscal impact on non-small businesses because this rule provides procedures for the administration of the PRIME Program Grant (the Grant) and the changes made to the provisions of this rule do not have any impact on appropriations (which are not required under this rule) or any potential costs of implementing this rule.

While this rule contains provisions related to how the amount of the Grant will be determined annually, the provisions of the new rule have no financial effect on non-small businesses as those appropriations occur separately from the processes set forth in this rule. As such, the changes do not create any cost or savings for non-small businesses.

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 amendments to Rule R765-607 will not have any fiscal impact on persons other than small businesses, non-small businesses, state, or local government entities.

There is no fiscal impact on persons other than small businesses, non-small businesses, state, or local government entities because this rule provides procedures for the administration of the PRIME Program Grant (the Grant) and the changes made to the provisions of this rule do not have any impact on appropriations (which are not required under this rule) or any potential costs of implementing this rule.

While this rule contains provisions related to how the amount of the Grant will be determined annually, the provisions of the new rule have no financial affect on persons other than small businesses, non-small businesses, state, or local government entities as those appropriations occur separately from the processes set forth in this rule. As such, the changes do not create any cost or savings for persons other than small businesses, non-small businesses, state, or local government entities.

F. Compliance costs for affected persons:

The amendments to Rule R765-607 will not impose any compliance costs on affected persons. There are no compliance costs because this rule provides procedures for administering the PRIME Program Grant and the changes made to the provisions of this rule to not create any such compliance costs.

G. Regulatory Impact Summary Table (This table includes only fiscal impacts the agency was able to measure. If the agency could not estimate an impact, it is excluded from this table but described in boxes A through F.)

Regulatory Impact Summary Table					
Fiscal Cost	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
Total Fiscal Cost	\$0	\$0	\$0	\$0	\$0
Fiscal Benefits	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
Total Fiscal Benefits	\$0	\$0	\$0	\$0	\$0
Net Fiscal Benefits	\$0	\$0	\$0	\$0	\$0

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

The Utah Commissioner of Higher Education, Geoffrey Landward, has reviewed and approved this regulatory impact analysis.

Citation Information

7. 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 53E-10-309		
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Public Notice Information

9. The public may submit written or oral comments to the agency identified in box 1.

A. Comments will be accepted until:

05/15/2026

10. This rule change MAY become effective on:

05/22/2026

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

Agency head or designee and title:

Alison Adams, Board Secretary and Designee	Date:	03/25/2026
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R765. Higher Education (Utah Board of), Administration.

R765-607. PRIME Program Grant.

R765-607-1. Purpose.

This rule outlines the requirements of and application process for the PRIME Program Grant, a grant for a qualified applicant who earns a TRANSFORM certificate from the Utah State Board of Education.

R765-607-2. Authority.

This rule is authorized by S[ubs]ection 53E-10-309[~~(6)~~].

R765-607-3. Definitions.

(1) "Board" means the Utah Board of Higher Education described in Section [~~53B-1-402~~]53H-1-203.

(2) "Eligible institution" means:

(a) a degree-granting institution of higher education or a technical college within the state system of higher education, as identified in [s]Subsection [~~53B-2-101(1)~~]53H-3-102(1); or

(b) a private, nonprofit college or university in the state that is accredited by the Northwest Commission on Colleges and Universities.

(3) "Excusable neglect" means failure to take proper steps at the proper time, not [~~as result of~~]in consequence of willful disregard of the scholarship application process, but [~~as result of~~]in consequence of some unexpected or unavoidable circumstances.

(4) "Good cause" means the applicant's failure to meet a scholarship application process requirement was due to circumstances beyond the student's control or circumstances that are compelling and reasonable.

(5) "OCHE" means the Office of the Commissioner of Higher Education.

(6) "Opportunity Scholarship" means the scholarship program described in Rule R765-608, Opportunity Scholarship.

(7) "Scholarship staff" means staff in OCHE assigned to administer state scholarships on behalf of the [b]Board.

(8) "Substantial compliance" means the applicant, in good faith, demonstrated clear intent to comply with the scholarship application requirements and has demonstrated likely eligibility, but failed to precisely comply with the application specifics.

(9) "USBE" means the Utah State Board of Education, as described in Title 53E, Chapter 1. Title Provisions.

R765-607-4. Private and Nonprofit College and University Eligibility.

To participate in this program, a private or nonprofit college or university must enter into an agreement with OCHE.

R765-607-5. Award Requirements.

(1) To qualify for the PRIME Program Grant, an applicant shall:

(a) be awarded a TRANSFORM certificate by the USBE;

(b) complete the scholarship application provided by the [b]Board;

(c) complete the FAFSA in accordance with [~~the b~~]Board[~~'s~~] [~~p~~]Policy R623, Free Application for Federal Student Aid; and

(d) enroll at an eligible institution full time, as defined by the institution, beginning with the fall semester after high school graduation.

[~~2~~] The institution at which the student attends shall verify the recipient has met the enrollment requirements before disbursing payment.

(e) Students who receive a reasonable accommodation related to the scholarship requirements under the Americans with Disabilities Act (ADA) or Section 504 of the Rehabilitation Act by their institution's ADA Coordinator may obtain a modification to the scholarship requirements. The institution's ADA Coordinator, or their designee, shall provide written documentation to the institutional financial aid office about the student's reasonable accommodation. Under these conditions, an award may be provided to a student who is enrolled less than full-time.

NOTICES OF PROPOSED RULES

R765-607-6. Application Process.

(1) An applicant shall submit an official scholarship application no later than February 1st of the year that the applicant graduates from high school. [

~~(2)(a)~~] The [b]Board may establish a priority deadline each year. [

~~(b)~~] An applicant who meets the priority deadline may be given first priority or consideration based on the date [the application was completed]they completed their application. [

~~(3)~~] Additional criteria to prioritize awarding may be established by the [b]Board.

[~~(4)~~](a) The application deadline for the 2023-24 academic year shall be July 1, 2023.

[~~(5)~~](2) Scholarship staff shall verify TRANSFORM certificate recipients with USBE before funds are awarded.

R765-607-7. Grant Amount.

(1) ~~[Subject to available funding, the board shall award each qualified applicant a one-time grant of \$500 to be used at an eligible institution.]~~The Board will award qualified applicants a one-time grant to be used at an eligible institution. The award amount shall be set annually based on available funding and the number of eligible applicants.

(2)[~~(a)~~] A student may receive both the PRIME Program Grant and the Opportunity Scholarship. [

~~(b)~~] The PRIME Grant shall be applied first to tuition and fees before an Opportunity Scholarship may be awarded.

R765-607-8. Deferral or Leave of Absence.

Awardees may obtain an approved deferral or leave of absence of up to three years after the date of their high school graduation.

R765-607-9. Appeals Process.

(1)[~~(a) Each~~] An applicant has the right to appeal an adverse decision. [

~~(b)~~] Upon request by the [applicant]student, the scholarship staff shall provide an opportunity for the [applicant]student to appeal an adverse decision to a committee of at least three impartial persons. [

~~(c) Each a~~] Appeal requests must be submitted in writing within 30 days of the application notice.

[~~(2)~~](a) An appeal filed before the applicant receives official notification from scholarship staff of its decision may not be considered.

[~~(3)~~](a)(b) If an applicant fails to file their appeal on time, scholarship staff shall notify the applicant of the late filing and give the applicant an opportunity to provide a written explanation of the reasons for failing to file the appeal by the deadline. [

~~(b)~~] An appeal committee may not have jurisdiction to consider the merits of an appeal that is filed beyond the deadline unless it determines the applicant established excusable neglect.

[~~(4)~~](c) The appeal committee shall review the appeal to determine if the award decision was made in error or if the applicant demonstrated substantial compliance with the scholarship application requirements but failed to meet one or more requirements for good cause.

[~~(5)~~](a)(d) Scholarship staff and the appeal committee do not have the authority to consider, adjust, or award a TRANSFORM certificate. [

~~(b)~~] A request for consideration for TRANSFORM certificate eligibility should be submitted [by applicant]through USBE.

[~~(6)~~](c) The appeal committee decision represents the final agency action. An applicant who disagrees with the decision may seek judicial review in accordance with Section 63G-4-402.

R765-607-10. Reporting.

(1) As specified by OCHE, each institution shall provide, as part of an annual institutional financial aid file submission by February 28 of each year, data pertaining to applications, awards, program enrollments, utilization, funding, and other scholarship information for the most recently completed fiscal year.

(2) OCHE may, at any time, request additional documentation or data related to the scholarship program and may review or formally audit an institution's documentation and compliance with this rule.

KEY: Utah Board of Higher Education, Grant, PRIME Program Grant

Date of Last Change: [~~October 30, 2023~~]2026

Authorizing, and Implemented or Interpreted Law: 53E-10-309[~~(6)~~]

NOTICE OF SUBSTANTIVE CHANGE		
TYPE OF FILING: Amendment		
Rule or section number:	R765-621	Filing ID: 57875
Agency Information		
1. Title catchline:	Higher Education (Utah Board of), Administration	
Building:	Utah Board of Higher Education Building, The Gateway	
Street address:	60 S 400 W	
City, state:	Salt Lake City, UT 84101	

Contact persons:		
Name:	Phone:	Email:
Hilary Renshaw	801-646-4784	Hilary.renshaw@ushe.edu
Alison Adams	801-646-4784	Alison.adams@ushe.edu
Geoffrey T. Landward	801-646-4784	Glandward@ushe.edu
Please address questions regarding information on this notice to the persons listed above.		

General Information

2. Rule or section catchline:	
R765-621. Terrell H. Bell Education Scholarship Program	
3. Are any changes in this filing because of state legislative action?	Changes are because of legislative action.
If yes, any bill number and session:	SB 1001 (2025 Special Session)
4. Purpose of the new rule or reason for the change:	
<p>This filing amends Rule R765-621 based on revisions passed by the Utah Board of Higher Education. Those revisions require updated language related to the order in which awards under the Terrel H. Bell Education Scholarship Program are distributed and related to initial and continuing eligibility for an award.</p> <p>The amendments to Rule R765-621 also include minor changes to definitions, numbering, and organization, as well as nonsubstantive formatting corrections.</p>	
5. Summary of the new rule or change:	
<p>The amendments to Rule R765-621 update statutory citations based on SB 1001 (2025 Special Session) and make changes to the language of this rule, including to the definitions, general award conditions for the Terrel H. Bell Education Scholarship Program (the Program), and initial and continuing eligibility for an award under the Program.</p> <p>Specifically, the changes update the language related to how institutions shall prioritize awards under the Program and require that applicants for an award under the Program either be admitted to or making reasonable progress to meet a participating institution's criteria for admission to an approved program to be eligible.</p>	

Fiscal Information

6. Provide an estimate and written explanation of the aggregate anticipated cost or savings to:	
A. State budget:	
<p>The amendments to Rule R765-621 will not have any fiscal impact on the state budget.</p> <p>There is no fiscal impact on the state budget because this rule provides procedures for administering the Program, and the changes made to the provisions of this rule do not create any cost to or any savings for the state budget.</p> <p>Although appropriations are required to fund the Program, those appropriations occur separately from the processes set forth in this rule and, as such, the changes made to this rule have no impact on the state budget.</p>	
B. Local governments:	
<p>The amendments to Rule R765-621 will not have any fiscal impact on local governments.</p> <p>There is no fiscal impact on local governments because this rule provides procedures for administering the Program, and the changes made to the provisions of this rule do not create any cost to or any savings for local governments.</p> <p>Although appropriations are required to fund the Program, those appropriations occur separately from the processes set forth in this rule and, as such, the changes made to this rule have no impact on local governments.</p>	
C. Small businesses ("small business" means a business employing 1-49 persons):	
The amendments to Rule R765-621 will not have any fiscal impact on small businesses.	

There is no fiscal impact on small businesses because this rule provides procedures for administering the Program, and the changes made to the provisions of this rule do not create any cost to or any savings for small businesses.

Although appropriations are required to fund the Program, those appropriations occur separately from the processes set forth in this rule and, as such, the changes made to this rule have no impact on small businesses.

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

The amendments to Rule R765-621 will not have any fiscal impact on non-small businesses.

There is no fiscal impact on non-small businesses because this rule provides procedures for administering the Program, and the changes made to the provisions of this rule do not create any cost to or any savings for non-small businesses.

Although appropriations are required to fund the Program, those appropriations occur separately from the processes set forth in this rule and, as such, the changes made to this rule have no impact on non-small businesses.

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 amendments to Rule R765-621 will not have any fiscal impact on persons other than small businesses, non-small businesses, state, or local government entities.

There is no fiscal impact on persons other than small businesses, non-small businesses, state, or local government entities because this rule provides procedures for administering the Program, and the changes made to the provisions of this rule do not create any cost to or any savings for persons other than small businesses, non-small businesses, state, or local government entities.

Although appropriations are required to fund the Program, those appropriations occur separately from the processes set forth in this rule and, as such, the changes made to this rule have no impact on persons other than small businesses, non-small businesses, state, or local government entities.

F. Compliance costs for affected persons:

The amendments to Rule R765-621 will not impose any compliance costs on affected persons.

There are no compliance costs because the rule provides procedures for administering the Program and the changes made to the provisions of this rule do not create any such compliance costs.

G. Regulatory Impact Summary Table (This table includes only fiscal impacts the agency was able to measure. If the agency could not estimate an impact, it is excluded from this table but described in boxes A through F.)

Regulatory Impact Summary Table					
Fiscal Cost	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
Total Fiscal Cost	\$0	\$0	\$0	\$0	\$0
Fiscal Benefits	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
Total Fiscal Benefits	\$0	\$0	\$0	\$0	\$0

Net Fiscal Benefits	\$0	\$0	\$0	\$0	\$0
H. Department head comments on fiscal impact and approval of regulatory impact analysis:					
The Utah Commissioner of Higher Education, Geoffrey Landward, has reviewed and approved this regulatory impact analysis.					

Citation Information

7. 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:		
Subsection 53H-11-409(6)		

Public Notice Information

9. The public may submit written or oral comments to the agency identified in box 1.	
A. Comments will be accepted until:	05/15/2026
10. This rule change MAY become effective on:	05/22/2026
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

Agency head or designee and title:	Alison Adams, Board Secretary and Designee	Date:	03/25/2026
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R765. Higher Education (Utah Board of), Administration.
R765-621. Terrel~~[H]~~ H. Bell Education Scholarship Program.
R765-621-1. Purpose.

The purpose of this rule is to provide the rules and procedures for administration of the Terrel~~[H]~~ H. Bell Teaching Education Scholarship Program, ensuring it recruits first-generation students into teaching careers, encourages outstanding students to teach in high needs areas in Utah's public schools, and to recognize teaching as a critically important career choice for the state.

R765-621-2. Authority.

Subsection ~~[53B-8-116(6)]~~53H-11-409(6) authorizes this rule.

R765-621-3. Definitions.

(1) "Approved Program" means:

(a) a teacher preparation program that meets the education profession licensure standards described in Section 53E-6-302, and provides enhanced clinical experiences, or prepares an individual to become a speech-language pathologist or another licensed professional providing services in a public school to students with disabilities; or

(b) courses taken at Salt Lake Community College or Snow College that lead students to make reasonable progress to meet institutional criteria for admission into a program in accordance with Subsection R765-621-3(1)(a).

(2) "Average scholarship amount" means average USHE undergraduate resident tuition and general student fees for the corresponding academic year.

(3) "Board" means Utah Board of Higher Education.

(4) "Eligible institution" means a public or private institution of higher education in Utah that offers an approved program.

(5) "FAFSA" means the Free Application for Federal Student Aid.

(6) "High needs area" means a subject area or field in public education that has a high need for teachers or other employees, determined annually by the ~~[b]~~Board in consultation with the Utah State Board of Education.

(7) "First-generation student" means a student whose parents never completed college or beyond.

(8) "Full-time enrollment" means 12 semester hours or such other number of hours as determined by the recipient's institution.

(9) "Part-time enrollment" means ~~[a minimum of six credits in a semester]~~ the participating institution's definition of half-time enrollment for the program in which the recipient is enrolled.

~~(9)~~(10) "Average scholarship amount" means average Utah System of Higher Education undergraduate resident tuition and general student fees for the corresponding academic year.

~~(10)~~(11) "Scholarship staff" means staff in the Office of the Commissioner of Higher Education assigned to administer state scholarships on behalf of the ~~[b]~~Board.

R765-621-4. General Award Conditions.

(1) An eligible institution may award a scholarship to an individual for an amount up to the cost of resident tuition, fees, and books for the number of credit hours in which the individual is enrolled each semester.

NOTICES OF PROPOSED RULES

(2) An eligible private institution may not award a scholarship for an amount that exceeds the average scholarship amount granted by a public institution of higher education.

(3) a recipient may receive a scholarship for up to four consecutive years, or equivalent when considering institution-approved leaves of absence.

(4) An eligible institution may award scholarships to any full-time or part-time enrolled student.

(5) An eligible institution shall:

(a) develop processes for promoting and distributing awards consistent with this rule; and

(b) set application deadlines that accommodate any full-time or part-time student.

(6) Each application shall require a student's declaration to earn a degree in an approved program.

(7) Each institution shall prioritize scholarship awards ~~[as follows]~~ to applicants who meet the qualifications in Section R765-621-5 by awarding qualified applicants in the following order:

(a) first, to first-generation students who intend to work in any area in a Utah public school;

(b) second, to each student who is not a first-generation student but intends to work in a high needs area in a Utah public school; and

(c) third, to each student who meets the requirements in Section R765-621-5.

R765-621-5. Initial and Continuing Eligibility.

(1) To be eligible for a scholarship awarded under this rule, an applicant shall ~~[-do the following]:~~

(a) declare the intent to earn a degree in an approved program and to teach in a Utah public school after graduation; ~~[-and]~~

(b) complete ~~[the]~~ FAFSA in accordance with Board Policy R623, Free Application for Federal Student Aid ~~[-]; and~~

~~[-]~~ either be admitted to or making reasonable progress to meet a participating institution's criteria for admission to an approved program.

(2) To remain eligible for a scholarship awarded under this rule, each recipient must:

(a) maintain satisfactory academic progress in accordance with the recipient's institution's policies;

(b) make reasonable progress to meet institutional criteria for admission to an approved program; and

(c) maintain reasonable progress toward completion of an approved program once admitted to an approved program.

(3) A recipient who transfers to another eligible institution shall retain an award if they continue to meet criteria established for recipients at the receiving institution.

(4) After no more than four semesters of full-time, or eight semesters of part-time postsecondary course work, the recipient shall apply to and gain acceptance into an approved program at an eligible institution.

(5) An eligible institution may grant a temporary deferment of an award for up to two years to a recipient who has not been accepted into an approved program, while they seek acceptance into the program.

(6) After providing a recipient notice and an opportunity to respond, an institution may rescind a recipient's scholarship if the dean of education or the director of financial aid determines the recipient:

(a) is failing to make reasonable progress toward completion of program requirements; or

(b) has demonstrated to a reasonable certainty that the recipient does not intend to teach at a public school in Utah after graduation.

~~[(8)]~~ (7) Under Section 63G-12-402, verification of lawful presence in the United States may not ~~[by]~~ be required to be eligible for this scholarship.

~~[(9)]~~ (8) Upon request by the student, the institution shall provide an opportunity for the student to appeal a dean or director's determination to rescind the scholarship to a committee of at least three impartial persons.

~~[(10)]~~ (9) A recipient may seek leave of absence from attending an institution in accordance with applicable deferral policies at a corresponding eligible institution.

R765-621-6. Transfer of Award Funds.

(1) A recipient may transfer to another eligible institution and keep the scholarship if the recipient meets all requirements of the receiving institution.

(2) The recipient who is transferring shall be responsible for communicating with the recipient's college or school of education and the financial aid office at the receiving institutions well in advance.

(3) A recipient who is transferring and does not meet application deadlines or demonstrate satisfactory academic progress may have the recipient's scholarship rescinded.

(4) The receiving institution shall be responsible to make any adjustments in the transfer of a recipient's award.

R765-621-7. Distribution of Award Funds to Institutions.

(1) The ~~[b]~~ Board shall annually distribute available funds to eligible institutions proportionally equal to the total number of teachers who graduated from the eligible institution and were hired by a Utah public school district for the most recent three cohort years available, minus funds for Snow College and Salt Lake Community College allocated at the discretion of the ~~[b]~~ Board.

(2) The ~~[b]~~ Board shall annually distribute amounts allocated to institutions with new programs without the required three-year history of graduates to fit in the allocation formula, who will receive a minimum allocation amount to be set by scholarship staff.

R765-621-8. Reporting.

As specified by the Office of the Commissioner of Higher Education, each institution shall provide, as part of an annual institutional financial aid file submission by February 28 of each year, data pertaining to applications, awards, program enrollments, utilization, funding, and other Terrel~~[4]~~ H. Bell Education Scholarship information for the most recently completed fiscal year. The ~~[b]~~ Board may, at any time,

request additional documentation or data related to the Terrel[H] H. Bell Education Scholarship and may review or formally audit an institution's compliance with this rule.

KEY: education, teaching

Date of Last Change: ~~February 14, 2024~~2026

Notice of Continuation: August 16, 2024

Authorizing, and Implemented or Interpreted Law: ~~Title 53B, Chapter 8, Part 116~~53H-11-409

NOTICE OF SUBSTANTIVE CHANGE

TYPE OF FILING: Amendment

Rule or section number:

R765-622

Filing ID: 57876

Agency Information

1. Title catchline:	Higher Education (Utah Board of), Administration	
Building:	Utah Board of Higher Education Building, The Gateway	
Street address:	60 S 400 W	
City, state:	Salt Lake City, UT 84101	
Contact persons:		
Name:	Phone:	Email:
Hilary Renshaw	801-646-4784	Hilary.renshaw@ushe.edu
Alison Adams	801-646-4784	Alison.adams@ushe.edu
Geoffrey T. Landward	801-646-4784	Glandward@ushe.edu
Please address questions regarding information on this notice to the persons listed above.		

General Information

2. Rule or section catchline:	
R765-622. Career and Technical Education Scholarship Program	
3. Are any changes in this filing because of state legislative action?	Changes are because of legislative action.
If yes, any bill number and session:	SB 1001 (2025 Special Session)
4. Purpose of the new rule or reason for the change:	
<p>This filing amends Rule R765-622 based on revisions passed by the Utah Board of Higher Education. Those revisions require updates to many provisions and procedures in this rule, including to the rule's definitions, the provisions related to the administration of the Technical Education Scholarship Program (the "Program"), requirements for continued eligibility for scholarships under the Program, and more.</p> <p>The amendments to Rule R765-622 also include changes to numbering and organization, as well as other nonsubstantive changes.</p>	
5. Summary of the new rule or change:	
<p>The amendments to Rule R765-622 update statutory citations based on SB 1001 (2025 Special Session) and make changes to the language of this rule.</p> <p>The changes to the language of this rule include updates to the definitions of key terms within the Program.</p> <p>The changes also introduce a requirement that individuals complete a Free Application for Federal Student Aid (FAFSA) to be eligible for an award under the Program, as well as updated language regarding transfers of individuals who have received an award from one eligible institution to another.</p> <p>Other changes to Rule R765-622 include updated provisions related to the distribution of award funds under the Program, simplified reporting requirements, and language clarifications related to the determination of which programs at an eligible institution are "high demand" such that they satisfy the requirements of the Program.</p>	

Fiscal Information

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

A. State budget:

The amendments to Rule R765-622 will not have any fiscal impact on the state budget.

There is no fiscal impact on the state budget because this rule provides procedures for administering the Program, and the changes made to the provisions of this rule do not create any cost to or any savings for the state budget.

Although this rule includes provisions related to the distribution of funds under the Program, the appropriations that fund the Program occur separately from the processes set forth in this rule and, as such, the changes made to this rule have no impact on the state budget.

B. Local governments:

The amendments to Rule R765-622 will not have any fiscal impact on local governments.

There is no fiscal impact on local governments because this rule provides procedures for administering the Program, and the changes made to the provisions of this rule do not create any cost to or any savings for local governments.

Although this rule includes provisions related to the distribution of funds under the Program, the appropriations that fund the Program occur separately from the processes set forth in this rule and, as such, the changes made to this rule have no impact on local governments.

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

The amendments to Rule R765-622 will not have any fiscal impact on small businesses.

There is no fiscal impact on small businesses because this rule provides procedures for administering the Program, and the changes made to the provisions of this rule do not create any cost to or any savings for small businesses.

Although this rule includes provisions related to the distribution of funds under the Program, the appropriations that fund the Program occur separately from the processes set forth in this rule and, as such, the changes made to this rule have no impact on small businesses.

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

The amendments to Rule R765-622 will not have any fiscal impact on non-small businesses.

There is no fiscal impact on non-small businesses because this rule provides procedures for administering the Program, and the changes made to the provisions of this rule do not create any cost to or any savings for non-small businesses.

Although this rule includes provisions related to the distribution of funds under the Program, the appropriations that fund the Program occur separately from the processes set forth in this rule and, as such, the changes made to this rule have no impact on non-small businesses.

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 amendments to Rule R765-622 will not have any fiscal impact on persons other than small businesses, non-small businesses, state, or local government entities.

There is no fiscal impact on persons other than small businesses, non-small businesses, state, or local government entities because this rule provides procedures for administering the Program, and the changes made to the provisions of this rule do not create any cost to or any savings for persons other than small businesses, non-small businesses, state, or local government entities.

Although this rule includes provisions related to the distribution of funds under the Program, the appropriations that fund the Program occur separately from the processes set forth in this rule and, as such, the changes made to this rule have no impact on persons other than small businesses, non-small businesses, state, or local government entities.

F. Compliance costs for affected persons:

The amendments to Rule R765-622 will not impose any compliance costs on affected persons.

There are no compliance costs because this rule provides procedures for administering the Program, and the changes made to the provisions of this rule do not create any such compliance costs.

G. Regulatory Impact Summary Table (This table includes only fiscal impacts the agency was able to measure. If the agency could not estimate an impact, it is excluded from this table but described in boxes A through F.)

Regulatory Impact Summary Table					
Fiscal Cost	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
Total Fiscal Cost	\$0	\$0	\$0	\$0	\$0
Fiscal Benefits	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
Total Fiscal Benefits	\$0	\$0	\$0	\$0	\$0
Net Fiscal Benefits	\$0	\$0	\$0	\$0	\$0

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

The Utah Commissioner of Higher Education, Geoffrey Landward, has reviewed and approved this regulatory impact analysis.

Citation Information

7. 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 53H-11-408

Public Notice Information

9. The public may submit written or oral comments to the agency identified in box 1.

A. Comments will be accepted until: 05/15/2026

10. This rule change MAY become effective on: 05/22/2026

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

Agency head or designee and title:	Alison Adams, Board Secretary and Designee	Date:	03/25/2026
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R765. Higher Education (Utah Board of), Administration.
R765-622. [Career and] Technical Education Scholarship Program.
R765-622-1. Purpose.

The purpose of this rule is to provide [the rules and] procedures for administration of the [Career and] Technical Education Scholarship Program, which will provide financial assistance to students pursuing [career and] technical education in high demand industries.

R765-622-2. Authority.

This rule is authorized by Subsection ~~[53B-8-115(5)]~~53H-11-408(5).

R765-622-3. Definitions.

(1) ~~["Board" means Utah Board of Higher Education.~~

~~(2) "Eligible [i]Institution" means a higher education institution with a technical education role as specified in Subsection 53H-3-602(1)(b)(iv)[Salt Lake Community College's School of Applied Technology established in Section 53B-16-209; Snow College; Utah State University Eastern established in Section 53B-18-1201; Utah State University Blanding established in Section 53B-18-1202; or Utah State University regional campus located at or near Moab described in Section 53B-18-301].~~

~~(3)(2) "High [d]Demand [p]Program" means a technical education program [non-credit career and technical education program] that is offered by an eligible institution, leads to a certificate, and is designated by the [b]Board in accordance with [Subs]Section R765-622-9(4).~~

~~(3) "Technical Education" is defined by Subsection 53H-1-101(10).~~

R765-622-4. General [Award]Scholarship Administration.

(1) Scholarship Award[?]. ~~[a]An eligible institution may award a scholarship to an individual who;~~

~~(a) is enrolled in, or intends to enroll in, a high demand program; and~~

~~(b) completes a Free Application for Federal Student Aid as required by Rule R765-623.[under the following procedures:]~~

~~(a)(i) An eligible institution may award a scholarship for an amount of money up to the total cost of tuition, fees, and required textbooks for the high demand program in which the scholarship recipient is enrolled or intends to enroll.~~

~~(b)(ii) An eligible institution may award a scholarship to a scholarship recipient for up to [two]three academic years.~~

~~(c) An eligible institution may cancel a scholarship if the scholarship recipient does not:~~

~~(i) maintain enrollment in the eligible institution on at least a half-time basis, as determined by the eligible institution; or~~

~~(ii) make satisfactory progress toward the completion of a certificate.]~~

(2) Application Procedures. An eligible institution shall develop a simple, accessible application process, and ~~[shall]will~~ set application deadlines that accommodate both full-time and ~~[part]half~~-time students.

(3) Prioritization for Underserved Populations. An eligible institution shall establish criteria to identify underserved populations and to assess if an applicant is a member of an underserved population. In accordance with federal and state law, [Eligible]institutions shall prioritize scholarship awards for applicants who are members of an underserved population~~[in accordance with their criteria. Eligible institutions shall provide the criteria and prioritization methodology to the Board].~~

R765-622-5. Continuing Eligibility.

(1) After providing a recipient notice and an opportunity to respond, an ~~[eligible-]institution~~ may rescind a recipient's scholarship if it determines the recipient has not met the following requirements:

(a) ~~[Award recipients must maintain-]Maintaining~~ satisfactory academic progress ~~[in accordance with their institutions' policies]toward the completion of the recipient's high demand program in accordance with the institution's policies; and.~~

(b) ~~[Recipients must be-]Being~~ enrolled at least half-time as determined by the institution.

(2) Deferment. A recipient may seek deferment of an award in accordance with applicable deferral policies at the eligible institution.

R765-622-6. Transfers[~~of Award Funds~~].

If a recipient who has maintained the continuing eligibility specified in Section R765-622-5 transfers to the same high demand program at another eligible institution, upon request of the recipient, the institution to which the recipient is transferring shall facilitate an award for the balance of the program.~~[A recipient who transfers to another eligible institution shall be responsible to inform the financial aid office at the institution to which the recipient is transferring that the recipient is an award recipient. The financial aid office at the respective institution shall coordinate the transfer of any scholarship funds and information. The receiving institution shall verify the transferring student's ongoing eligibility in accordance with this rule and make any adjustments in a recipient's award.]~~

R765-622-7. [Distribution of-]Award Funds[~~to Eligible Institutions~~].

(1) Distribution of Award Funds to Institutions. The Board will establish an ongoing funding amount for each eligible institution, which shall be distributed before each fiscal year, and which may be adjusted based on information and data provided to the Board, subject to legislative appropriation.

(2) Fund Restrictions. Technical education scholarship funds are restricted to expenditure for technical education scholarships and may not be moved or spent on any other program.

(3) Unused or Carryover Funds. Each eligible institution is encouraged to annually utilize all technical education scholarship funds for qualified students. Surplus funds, for example, fund balances or net assets, shall be retained in the scholarship fund and carried over from one fiscal year to the next.~~[The Board shall annually distribute available funds to eligible institutions in accordance with the following formula:~~

~~Fifty percent of each year's appropriation shall be divided and evenly distributed to Utah State University, Snow College, and the Salt Lake Community College's School of Applied Technology. Remaining funds shall be distributed proportionally to the total rolling three-year average of students enrolled in non-credit CTE courses at each eligible institution.]~~

R765-622-8. Reporting.

(1) ~~As specified by the Office of the Commissioner, each institution shall provide, as part of an annual institutional financial aid file submission by February 28 of each year, data pertaining to applications, awards, program enrollments, utilization, funding, and other technical education scholarship information for the most recently-completed fiscal year.~~ ~~On or before September 30 each year, eligible institutions shall report to the Board of Regents the following:~~

- ~~(a) the name and student identification of all recipients to whom the institution awarded scholarship funds the prior academic year;~~
- ~~(b) the scholarship amount each recipient received, including additional amounts from other sources;~~
- ~~(c) the programs in which scholarship recipients enrolled; and~~
- ~~(d) evidence that each award recipient is eligible to receive a scholarship award.~~

(2) The ~~Board~~ Office of the Commissioner may, at any time, request additional documentation or data related to the ~~[Career and]~~ Technical Education Scholarship Program and may review or formally audit an institution's documentation and compliance with this rule.

R765-622-9. ~~[Determination]~~ Designation of High Demand Programs.

Every other year, after consulting with ~~[its regional]~~ the Department of Workforce Services ~~[-representative]~~, the Board shall designate, as high demand programs, ~~[each eligible institution shall identify non-credit career and]~~ technical education programs at each eligible institution that prepare individuals to work in jobs ~~[that]~~ in Utah that have:

- ~~(1) high employer demand and high median hourly wages based on labor market data; or [-or-]~~
- ~~(2) significant industry importance. [-Each eligible institution shall submit the selected programs to the Board for consideration and final approval.]~~

KEY: education, technical, career, scholarship

Date of Last Change: ~~[July 15, 2021]~~ 2026

Notice of Continuation: August 16, 2024

Authorizing, and Implemented or Interpreted Law: ~~[53B-8-415]~~ 53H-11-408

NOTICE OF SUBSTANTIVE CHANGE		
TYPE OF FILING: Repeal and Reenact		
Rule or section number:	R907-66	Filing ID: 57868

Agency Information

1. Title catchline:	Transportation, Administration	
Building:	Calvin Rampton	
Street address:	4501 S 2700 W	
City, state:	Taylorsville, UT	
Mailing address:	PO Box 148455	
City, state and zip:	Salt Lake City, UT 84114-8455	
Contact persons:		
Name:	Phone:	Email:
Leif Elder	801-580-8296	lelder@utah.gov
Marlene Galindo	801-965-4026	mgalindo1@utah.gov
James Godin	801-573-7181	jamesjgodin@agutah.gov
Lori Edwards	385-341-3414	loriedwards@agutah.gov
Please address questions regarding information on this notice to the persons listed above.		

General Information

2. Rule or section catchline:
R907-66. Procurement of Consultant Services, Procedures and Contract Administration
4. Purpose of the new rule or reason for the change:
In performing a five-year review of this rule, the Department of Transportation (department) determined that this rule is still needed but should be updated.

In making proposed amendments to this rule, the department decided to overhaul the organization of this rule and its provisions enough to repeal this rule in its current state and reenact it in a newly organized, updated form.

5. Summary of the new rule or change:

While the department made substantial adjustments to the organization of this rule and some of the language within this rule, these changes are not substantive in that they do not create any material obligations, responsibilities, or processes for the department that were not already present in the repealed version of this rule.

This repeal and reenactment updates and rewrites this rule for clarity, readability, and conformity with the Rulewriting Manual for Utah.

Fiscal Information

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

A. State budget:

Because this repeal and reenactment is a mere clerical overhaul of the existing rule, the department does not anticipate any aggregate anticipated savings or costs to the state budget.

B. Local governments:

Because this repeal and reenactment is a mere clerical overhaul of the existing rule, the department does not anticipate any aggregate anticipated savings or costs to local governments.

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

Because this repeal and reenactment is a mere clerical overhaul of the existing rule, the department does not anticipate any aggregate anticipated savings or costs to small businesses.

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

Because this repeal and reenactment is a mere clerical overhaul of the existing rule, the department does not anticipate any aggregate anticipated savings or costs to non-small businesses

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**):

Because this repeal and reenactment is a mere clerical overhaul of the existing rule, the department does not anticipate any aggregate anticipated savings or costs to other persons.

F. Compliance costs for affected persons:

There are no compliance costs for affected persons.

G. Regulatory Impact Summary Table (This table includes only fiscal impacts the agency was able to measure. If the agency could not estimate an impact, it is excluded from this table but described in boxes A through F.)

Regulatory Impact Summary Table					
Fiscal Cost	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
Total Fiscal Cost	\$0	\$0	\$0	\$0	\$0
Fiscal Benefits	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0

Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
Total Fiscal Benefits	\$0	\$0	\$0	\$0	\$0
Net Fiscal Benefits	\$0	\$0	\$0	\$0	\$0

H. Department head comments on fiscal impact and approval of regulatory impact analysis:
 The Executive Director of the Department of Transportation, Carlos M. Braceras, PE, has reviewed and approved this regulatory impact analysis.

Citation Information

7. 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:
 Subsection 63G-6a-107.7(5) Subsection 72-1-201(1)(h)

Public Notice Information

9. The public may submit written or oral comments to the agency identified in box 1.
A. Comments will be accepted until: 05/15/2026

10. This rule change MAY become effective on: 05/22/2026
 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

Agency head or designee and title:	Carlos M. Braceras, PE, Executive Director	Date:	03/20/2026
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R907. Transportation, Administration.

~~[R907-66. Procurement of Consultant Services – Procedures and Contract Administration.~~

~~**R907-66 1. Authority and Purpose.**~~

~~_____ (1) Authority. The Department of Transportation (the "Department") makes this rule under Subsections 63G-6a-107.7(5) and 72-1-201(1)(h).~~

~~_____ (2) Purpose. This rule establishes requirements and procedures for procuring engineering and engineering related services, and administering the attendant contracts.~~

~~**R907-66 2. Definitions.**~~

~~_____ The following definitions apply:~~

~~_____ (1) "Brooks Act" means a commonly used term for the Federal Property and Administrative Services Act of 1949, Public Law 92-582, 86 Stat. 1278 (1972) and 40 U.S.C. Chapter 11, Sections 1101 through 1104.~~

~~_____ (2) "Competitive negotiation" means any form of negotiation that utilizes qualifications based procedures complying with the Brooks Act.~~

~~_____ (3) "Consultant" means an individual expert or firm the Department contracts with to perform professional services as may be necessary to the planning, progress, and completion of any design, engineering, and engineering related services.~~

~~_____ (4) "Desk review" means a process that includes a limited scope examination of a Consultant's original source financial documentation and communication to provide reasonable assurance the Consultant has not materially misstated costs, and the Consultant's financial documentation complies with FAR Part 31 and 2 CFR Part 200.~~

~~_____ (5) "The Division" means the Consultant Services Division of the Department of Transportation.~~

~~_____ (6) "Engineering," "the practice of engineering," and "professional engineering" mean the same as the terms are defined in Subsection 58-22-102(9)(a).~~

~~_____ (7) "Engineering Related Services" means other professional services, including project related public involvement, right of way acquisition services, transportation research, asset management, prototype development, technology transfer, technical writing, or other services as deemed necessary by the executive director or designee.~~

~~_____ (8) "FAR" means Federal Acquisition Regulations, Title 48, Code of Federal Regulations.~~

~~_____ (9) "Federal aid highway funds" means funds authorized by Congress to assist the Department in providing for the construction, reconstruction, and improvement of highways and bridges on eligible federal aid highway routes and other special purpose programs and projects.~~

NOTICES OF PROPOSED RULES

~~(10) "Financial Screening" means the process performed by the Department's Consultant Services Division under 23 CFR 172.11 to review financial and entity data submitted annually by Consultants and subconsultants. This process will determine financial viability and establish or maintain the ability to contract with the Department for engineering and engineering-related services.~~

~~(11) The "Manual" means the Consultant Services Manual, which is maintained by the Department's Consultant Services Division. This Manual provides details beyond federal and state codes, federal regulations, and this rule.~~

~~(12) "Qualifications-based selection" or "QBS" means that procurement process defined in the Brooks Act, 40 U.S.C. Sections 1101 through 1104.~~

~~(13) "Risk Assessment" is the equivalent of Risk-based Analysis as defined in Subsection 23 C.F.R. 172.11(e)(2).~~

~~R907-66-3. Qualifications-based Selection of Consultants for Design, Engineering and Engineering-related Services.~~

~~The Department will perform qualifications-based selection procedures, including competitive negotiations to procure, manage, and administer contracts with Consultants and other professional services.~~

~~R907-66-4. Incorporation by Reference of Applicable Federal Law.~~

~~To receive grants of federal aid highway funds, the Department must comply with applicable federal law. Therefore, the Department incorporates by reference the following federal regulations for both federal and state funded projects:~~

~~(1) 2 CFR Part 200 Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards.~~

~~(2) FAR Part 31, Contract Cost Principles and Procedures.~~

~~(3) 23 CFR 1.11, Engineering Services.~~

~~(4) 23 CFR 1.33, Conflicts of Interest.~~

~~(5) 23 CFR 172, Procurement, Management, and Administration of Engineering and Design Related Service Contracts.~~

~~R907-66-5. Prequalified Pools.~~

~~The Division will establish pools of prequalified Consultants for various work disciplines to perform services for the Department following the Section 63G-6a-507 Approved vendor list procurement process.~~

~~R907-66-6. Small Purchase Contracts.~~

~~(1) Section 63G-6a-506 grants the Department authority to make rules governing small purchases of any procurement item.~~

~~(2) When procuring services of Consultants, the Division will follow the simplified acquisition threshold established by 48 CFR 2.101 as the small purchase maximum or small purchase cap for individual procurement of Consultant Services.~~

~~(3) The Division will publish detailed procedures to establish prequalified pools in the Manual or solicitations.~~

~~R907-66-7. Non-Small Purchase Contracts.~~

~~For contracts with an estimated value above the small purchase cap, the Department will select Consultants in accordance with 23 CFR Part 172, Title 63G, Chapter 6a, Part 15, Design Professional Services, the Manual, and the requirements set forth in the solicitation or request for qualifications.~~

~~R907-66-8. Consultant Financial Screening and Auditing.~~

~~(1) To provide reasonable assurance that the Consultant's presented Indirect Cost Rates, hourly billing rates, and direct costs comply with FAR Part 31 and 2 CFR Part 200, the Department will conduct risk assessments, desk reviews, and audits as necessary for Consultants seeking to perform design professional, engineering, or engineering-related services for the Department.~~

~~(2) Consultants must submit their firm's Financial Screening Application, including required supporting documents, within 90 days of their most recent fiscal year-end or 180 days if the Consultant submits a Certified Public Accountant audit. The Department may grant an extension at its sole discretion.~~

~~(3) If the Division rejects a Consultant's financial screening as non-compliant, the Consultant may request reconsideration by submitting a written request to the Department's Office of Internal Audit before the end of seven calendar days after receiving notice that the Consultant's financial screening has been rejected. The Consultant must provide notice to the Division before filing the request for reconsideration. The written request must include a detailed explanation of the facts justifying the request for reconsideration.~~

~~(4) The Department's Office of Internal Audit may conduct an audit to determine compliance with the requirements of this rule.~~

~~R907-66-9. Competitive Contract Negotiations.~~

~~(1) The Department will conduct competitive negotiations for contracts.~~

~~(2) The guidelines for Consultant selection and negotiations are in the project specific solicitation or request for qualifications, and other guidelines established by the Division and published on the Department's website.~~

~~R907-66-10. Award of Contracts.~~

~~The Department will award a contract to the most highly qualified, responsive, and responsible Consultant with which it can negotiate a fair and reasonable cost under the Utah Procurement Code, 23 C.F.R. Part 172, and under the Manual and other guidelines and policies established by the Department.~~

~~R907-66-11. Execution of Contracts.~~

~~Funding must be approved, and all appropriate signatures applied before the contract is considered executed.~~

R907-66-12. Notice to Proceed.

~~The Department will not pay for any work:~~

- ~~(1) the Department has not authorized in writing;~~
~~(2) the Consultant performs before the Department has an effective, fully executed contract with the Consultant; or~~
~~(3) the Consultant performs before the Department authorizes the Consultant to begin work by issuing a notice to proceed or similar writing.]~~

R907-66. Procurement of Consultant Services, Procedures and Contract Administration.**R907-66-1. Authority and Purpose.**

~~(1) This rule is authorized by Subsections 63G-6a-107.7(5) and 72-1-201(1)(h).~~

~~(2) This rule describes requirements for the procurement and administration of design, engineering, and engineering-related services contracts by the department and the department's subrecipients.~~

~~(3) This rule applies to department contracts related to design, engineering, and engineering-related projects, including those funded in whole or in part with funds from the:~~

- ~~(a) Federal-aid Highway Program;~~
~~(b) Federal Transit Administration;~~
~~(c) Federal Railroad Administration; or~~
~~(d) Federal Aviation Administration.~~

~~(4) Because the department is a recipient and pass-through entity of federal funds, the department and the department's subrecipients shall comply with applicable federal requirements when entering into contracts related to design, engineering, or engineering-related services.~~

R907-66-2. Definitions.

~~As used in this rule:~~

~~(1) "Brooks Act" means the Federal Property and Administrative Services Act of 1949, 40 U.S.C. Sec. 1101 et seq.~~

~~(2) "Competitive negotiations" means a form of procurement conducted using qualifications-based procedures in accordance with the Brooks Act.~~

~~(3) "Consultant" means an individual or firm under contract with the department to provide design, engineering, or engineering-related professional services.~~

~~(4) "Engineering" means the same as "professional engineering" as that term is defined in Section 58-22-102.~~

~~(5) "Engineering-related services" means professional services ancillary to engineering, including public involvement, right-of-way acquisition services, transportation research, asset management, prototype development, technology transfer, technical writing, and other services as determined by the department.~~

~~(6) "FAR" means the Federal Acquisition Regulation, 48 CFR.~~

~~(7) "Federal funds" means funds authorized by Congress to assist the department in the construction, reconstruction, or improvement of highways and bridges on eligible federal-aid highway routes, or for other special-purpose programs and projects, including those overseen by the:~~

- ~~(a) Federal Transit Administration;~~
~~(b) Federal Railroad Administration; or~~
~~(c) Federal Aviation Administration.~~

~~(8) "Financial screening" means a review of a consultant's annually submitted financial and entity data to evaluate financial viability and compliance with FAR Part 31 and 2 CFR Part 200, for establishing or maintaining the consultant's eligibility to contract with the department.~~

~~(9) "Qualifications-based selection" means the procurement process described in the Brooks Act.~~

~~(10) "Risk assessment" means the same as "risk-based analysis" as that term is described in Subsection 23 C.F.R. 172.11(c)(2).~~

~~(11) "Solicitation" means a document used by the department to obtain consultant proposals.~~

R907-66-3. Qualifications-based Selection of Consultants for Design, Engineering and Engineering-related Services.

~~(1) The department shall conduct qualifications-based selection and competitive negotiations in accordance with the Brooks Act and 23 CFR Part 172.~~

~~(2) The department shall publish selection and contract negotiation procedures for engineering and engineering-related services and include selection and contract negotiation information in project-specific solicitations.~~

R907-66-4. Incorporation by Reference of Applicable Federal Law.

~~The Department incorporates by reference the following federal regulations for both federal and state-funded projects:~~

~~(1) 2 CFR Part 200 Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (1-1-25 Edition);~~

~~(2) FAR Part 31, Contract Cost Principles and Procedures (FAC 2026-01);~~

~~(3) 23 CFR 1.11, Engineering Services (4-1-25 Edition);~~

~~(4) 23 CFR 1.33, Conflicts of Interest (4-1-25 Edition); and~~

~~(5) 23 CFR 172, Procurement, Management, and Administration of Engineering and Design Related Service Contracts (4-1-25 Edition).~~

R907-66-5. Prequalified Pools.

The department shall publish detailed procedures for establishing prequalified consultant pools in accordance with Section 63G-6a-507.

R907-66-6. Small Purchase Contracts.

(1) Pursuant to Section 63G-6a-506, the department adopts and incorporates by reference the simplified acquisition threshold, as defined in 48 CFR 2.101 (10-1-2024) as the maximum dollar amount for small purchases of consultant services.

(2) The department shall publish written procedures governing small purchases of consultant services.

R907-66-7. Non-Small Purchase Contracts.

For contracts with an estimated value exceeding the small purchase threshold, the department shall select one or more consultants in accordance with:

(1) 23 CFR Part 172;

(2) Title 63G, Chapter 6a, Part 15, Design Professional Services;

(3) procedures published by the department; and

(4) the requirements set forth in the applicable solicitation or request for qualifications.

R907-66-8. Consultant Financial Screening and Auditing.

(1) The department shall evaluate a consultant's proposed indirect cost rates and financial screening submissions to provide reasonable assurance of compliance with FAR Part 31 and 2 CFR Part 200.

(2) The department shall publish any additional financial or compliance screening procedures.

(3) The department's auditor may conduct audits to determine compliance with this rule.

(4) If the department rejects a consultant's financial screening as noncompliant, the consultant may request reconsideration by:

(a) notifying the department of the consultant's intent to request reconsideration; and

(b) within 20 calendar days after the day on which the consultant receives notice of the rejection, submitting to the department's auditor a written request that includes a detailed statement of the facts supporting reconsideration.

(5) While the department's auditor reviews a request for reconsideration under Subsection (4), the department may restrict awarding new contracts or work to the consultant until the review is complete and any noncompliance is resolved.

R907-66-9. Competitive Contract Negotiations.

(1) The department shall conduct competitive negotiations for the award of design, engineering, or engineering-related contracts under this rule.

(2) The department shall publish, and include in the applicable solicitation or request for qualifications, the guidelines and procedures governing negotiations conducted under this rule.

R907-66-10. Award and Execution of Contracts.

(1) Consistent with applicable state and federal requirements, the department shall award a contract under this rule to the most highly qualified, responsive, and responsible consultant with whom the department can negotiate a fair and reasonable cost.

(2) A contract between the department and a consultant is not valid, effective, or executed until funding has been approved and the contract has been signed by all parties.

R907-66-11. Notice to Proceed.

The department will not pay a consultant for any design, engineering, or engineering-related services work that was:

(1) not authorized in writing by the department;

(2) performed before contract execution; or

(3) performed before the department issued a written notice to proceed.

KEY: procurement, small purchases, design, and engineering services

Date of Last Change: 2026[June 21, 2022]

Notice of Continuation: August 14, 2021

Authorizing, and Implemented or Interpreted Law: 63G-6-105; 72-1-201

NOTICE OF SUBSTANTIVE CHANGE

TYPE OF FILING: Amendment

Rule or section number:

R926-9

Filing ID: 57867

Agency Information

1. Title catchline:

Transportation, Program Development

Building:

Calvin Rampton

Street address:	4501 S 2700 W	
City, state:	Taylorsville, UT	
Mailing address:	PO Box 148455	
City, state and zip:	Salt Lake City, UT 84114-8455	
Contact persons:		
Name:	Phone:	Email:
Leif Elder	801-580-8296	lelder@utah.gov
Marlene Galindo	801-965-4026	mgalindo1@utah.gov
James Godin	801-573-7181	jamesjgodin@agutah.gov
Lori Edwards	385-341-3414	loriedwards@agutah.gov
Please address questions regarding information on this notice to the persons listed above.		

General Information

2. Rule or section catchline:
R926-9. Establishment, Designation and Operation of Tollways
4. Purpose of the new rule or reason for the change:
The Department of Transportation (department) performed a five-year review on this rule and decided this rule needed a new provision addressing conversion of an existing highway to a tollway.
5. Summary of the new rule or change:
This amendment adds a provision addressing conversion of an existing highway to a tollway, and makes some clerical changes including technical corrections, deletions of redundant language, and changes made to conform with the Rulewriting Manual for Utah.

Fiscal Information

6. Provide an estimate and written explanation of the aggregate anticipated cost or savings to:
A. State budget:
This amendment adds a provision that gives the department discretion to convert an existing highway to a tollway, and the department has yet to exercise that discretion and thus there are no aggregate anticipated cost or savings to the state budget.
B. Local governments:
This amendment adds a provision that gives the department discretion to convert an existing highway to a tollway, and the department has yet to exercise that discretion and thus there are no aggregate anticipated cost or savings to local governments.
C. Small businesses ("small business" means a business employing 1-49 persons):
This amendment adds a provision that gives the department discretion to convert an existing highway to a tollway, and the department has yet to exercise that discretion and thus there are no aggregate anticipated cost or savings to small businesses.
D. Non-small businesses ("non-small business" means a business employing 50 or more persons):
This amendment adds a provision that gives the department discretion to convert an existing highway to a tollway, and the department has yet to exercise that discretion and thus there are no aggregate anticipated cost or savings to non-small businesses.
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 amendment adds a provision that gives the department discretion to convert an existing highway to a tollway, and the department has yet to exercise that discretion and thus there are no aggregate anticipated cost or savings to other persons.

F. Compliance costs for affected persons:

It will not cost affected persons anything to adhere to this change.

G. Regulatory Impact Summary Table (This table includes only fiscal impacts the agency was able to measure. If the agency could not estimate an impact, it is excluded from this table but described in boxes A through F.)

Regulatory Impact Summary Table					
Fiscal Cost	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
Total Fiscal Cost	\$0	\$0	\$0	\$0	\$0
Fiscal Benefits	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
Total Fiscal Benefits	\$0	\$0	\$0	\$0	\$0
Net Fiscal Benefits	\$0	\$0	\$0	\$0	\$0

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

The Executive Director of the Department of Transportation, Carlos M. Braceras, PE, has reviewed and approved this regulatory impact analysis.

Citation Information

7. 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 72-6-118

Public Notice Information

9. The public may submit written or oral comments to the agency identified in box 1.

A. Comments will be accepted until: 05/15/2026

10. This rule change MAY become effective on: 05/22/2026

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

Agency head or designee and title:	Carlos M. Braceras, PE, Executive Director	Date:	03/20/2026
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**R926. Transportation, Program Development.
R926-9. Establishment, Designation, and Operation of Tollways.
R926-9-1. Purpose and Authority.**

- (1) The purpose of this rule is to provide the procedure to establish, designate, and operate tollways.
- (2) This rule is authorized by Section 72-6-118.

R926-9-2. Definitions.

As used in this rule:

- (1) "Commission" means the Transportation Commission, which is created in Section 72-1-301[3].

- (2) "Department" means the Utah Department of Transportation[;].
- (3) "Executive Director" means the Executive Director of the Utah Department of Transportation[;].
- (4) "HOT [L]lane" has the meaning described in Section 72-6-118 for "[H]high occupancy toll lane."[;]
- (5) "HOV [L]lane" means a lane that has been designated for the use of high occupancy vehicles pursuant to Section 41-6a-702[;].
- (6) "Toll" means the toll or user fees that the operator of a motor vehicle must pay for the privilege of driving on a tollway, including the toll or user fees that the operator of a single occupant motor vehicle must pay for the privilege of driving on a HOT [L]lane[;].
- (7) "Toll [L]lane" has the meaning described in Section 72-6-118[;].
- (8) "Tollway" has the meaning described in Section 72-6-118. ~~[Tollways include, but are not limited to, HOT Lanes and Toll Lanes; and]~~
- (9) "Tollway development agreement" has the meaning described in Section 72-6-202.

R926-9-3. Designation of Tollways.

- (1)(a) The [D]department may consider:
- ~~(i) designating tollways, including[-but not limited to,] the designation of existing HOV [L]lanes as HOT [L]lanes[-or may];~~
- ~~(ii) widening existing highways to add one or more [T]toll [L]lane[~~(s)~~]; and~~
- ~~(iii) converting an existing highway to a tollway.~~
- (b) In deciding whether to designate a tollway, the [D]department may evaluate whether:
- ~~[(a)](i) the tollway would make the specific highway or the highway system more efficient;~~
- ~~[(b)](ii) the designation or addition would increase available funds, reduce operational costs, or expedite project delivery; and~~
- ~~[(c)](iii) the project [will be]is consistent with the overall policies, strategies, and actions of the [D]department, including those strategies that are developed through the regular transportation planning process.~~
- (2) Commission approval is required for designation of HOT [L]lanes on existing state highways and establishment of tollways on new state highways or additional capacity lanes. ~~[Legislative approval is required prior to designation of any other types of tollways provided the Commission may provide interim approvals to establish such tollways, between sessions of the Legislature, subject to approval or disapproval by the Legislature during the subsequent session.]~~
- (3) If the [D]department wishes to designate a tollway, it shall submit its recommendations to the [C]commission and request approval.
- (4) The [C]commission will evaluate the recommendations and make a final decision.
- (5) The [C]commission will issue its decision in a public meeting.
- (6) Tollways shall comply with all design and construction standards and specifications normally applicable to [D]department projects, except as may be otherwise agreed to by the [D]department in writing.
- ~~[(7) Automatic tolling systems used for the collection of tolls shall meet or exceed the minimum criteria established by the United States Department of Transportation pursuant to United States Public Law 109-59, Section 1604, Safe, Accountable, Flexible, Efficient Transportation Equity Act: A Legacy for Users (SAFETEA-LU) if procured and deployed after the adoption of such criteria.]~~
- ~~[(8)](7) Tolls are determined[The Commission will set Tolls] in accordance with Rule R940-1 and Section 72-6-118.~~

~~[R926-9-4. Tollway Special Revenue Fund Enforcement.~~

- ~~(1) Pursuant to state law, tolls collected by the Department and certain funds received by the Department through a tollway development agreement are deposited in the Tollway Special Revenue Fund established in Section 72-2-120.~~
- ~~(2) Monies from the fund may be used to establish and operate tollways and related facilities, including design, construction, reconstruction, operation (including snow removal), maintenance, enforcement, impacts from tollways, and acquisition of right of way, pursuant to Section 72-2-120.]~~

KEY: transportation, tolls, highways, tollways

Date of Last Change: 2026[April 21, 2011]

Notice of Continuation: May 10, 2021

Authorizing, and Implemented or Interpreted Law: 72-2-120; 72-6-118

End of the Notices of Proposed Rules Section

NOTICES OF CHANGES IN PROPOSED RULES

After an agency has published a **PROPOSED RULE** in the *Utah State Bulletin*, it may receive comment that requires the **PROPOSED RULE** to be altered before it goes into effect. A **CHANGE IN PROPOSED RULE** allows an agency to respond to comments it receives.

As with a **PROPOSED RULE**, a **CHANGE IN PROPOSED RULE** is preceded by a **RULE ANALYSIS**. This analysis provides summary information about the **CHANGE IN PROPOSED RULE** including the name of a contact person, anticipated cost impact of the rule, and legal cross-references.

While the law does not designate a comment period for a **CHANGE IN PROPOSED RULE**, it does provide for a 30-day waiting period. An agency may accept additional comments during this period and, at its option, may designate a comment period or may hold a public hearing. The 30-day waiting period for **CHANGES IN PROPOSED RULES** published in this issue of the *Utah State Bulletin* ends May 15, 2026.

Following the **RULE ANALYSIS**, the text of the **CHANGE IN PROPOSED RULE** is usually printed. The text shows only those changes made since the **PROPOSED RULE** was published in an earlier edition of the *Utah State Bulletin*. Additions made to the rule appear underlined (example). Deletions made to the rule appear struck out with brackets surrounding them (~~example~~). A row of dots in the text between paragraphs (.) indicates that unaffected text, either whole sections or subsections, was removed to conserve space. If a **CHANGE IN PROPOSED RULE** is too long to print, the Office of Administrative Rules may include only the **RULE ANALYSIS**. A copy of rules that are too long to print is available from the agency or from the Office of Administrative Rules.

From the end of the 30-day waiting period through August 13, 2026, an agency may notify the Office of Administrative Rules that it wants to make the **CHANGE IN PROPOSED RULE** effective. When an agency submits a **NOTICE OF EFFECTIVE DATE** for a **CHANGE IN PROPOSED RULE**, the **PROPOSED RULE** as amended by the **CHANGE IN PROPOSED RULE** becomes the effective rule. The agency sets the effective date. The date may be no fewer than 30 days nor more than 120 days after the publication date of the **CHANGE IN PROPOSED RULE**. If the agency designates a public comment period, the effective 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. Alternatively, the agency may file another **CHANGE IN PROPOSED RULE** in response to additional comments received. If the Office of Administrative Rules does not receive a **NOTICE OF EFFECTIVE DATE** or another **CHANGE IN PROPOSED RULE** by the end of the 120-day period after publication, the **CHANGE IN PROPOSED RULE** filing, along with its associated **PROPOSED RULE**, lapses.

CHANGES IN PROPOSED RULES are governed by Section 63G-3-303, Rule R15-2, and Sections R15-4-3, R15-4-4, R15-4-5b, R15-4-7, R15-4-9, and R15-4-10.

The Changes in Proposed Rules Begin on the Following Page

NOTICE OF SUBSTANTIVE CHANGE		
TYPE OF FILING: CPR (Change in Proposed Rule)		
Rule or section number:	R156-60e	Filing ID: 57656
Date of previous publication (only for CPRs):	12/01/2025	

Agency Information

1. Title catchline:	Commerce, Professional Licensing	
Building:	Heber M. Wells Building	
Street address:	160 E 300 S	
City, state:	Salt Lake City, UT 84111	
Mailing address:	PO Box 146741	
City, state and zip:	Salt Lake City, UT 84114-6741	
Contact persons:		
Name:	Phone:	Email:
Brian Pedersen	801-530-6651	bpedersen@utah.gov
Please address questions regarding information on this notice to the persons listed above.		

General Information

2. Rule or section catchline:
R156-60e. Mental Health Professional Practice Act Rule
4. Purpose of the new rule or reason for the change:
The Division of Professional Licensing (Division) in collaboration with the Behavioral Health Board (Board) is filing this Change in Proposed Rule (CPR) to clarify new requirements in the original filing in response to public comments. The proposed changes adjust the requirements for Supervision to align them with the statute, the recommendations made by Office of Professional Licensure Review (OPLR) and SB 26 from the 2024 General Session, and address the concerns brought forth by public comments. This CPR also changes the proposed minimum hour requirement for the supervision course from 20 hours to 8 hours to better align with statutory requirements.
5. Summary of the new rule or change:
The proposed changes for this change in proposed rule (CPR) are as follows: Subsections R156-60e-305.1(3)(c)(i) and (ii): adds clarifying language for a compromised relationship where the supervised individual has ownership in their employing agency. Subsection R156-60e-306.1(1): the proposed section outlining the graduate level coursework pathway for supervisor training from the original filing was removed since the statutory language in Subsection 58-60-102(4)(a)(iii)(B) already adds this pathway. Subsections R156-60e-306.1(1)(a) through (f): changes the proposed supervisor court from a 20-hour course to an 8-hour course and changes the specific topic hour requirements to align with the minimum eight-hour training course as outlined in the statute. The proposed change also adjusts the soonest date that the training may be completed from 18 months to 24 months after the individual obtains licensure to align with Section R156-60e-305.1. Clinical Supervisor Eligibility. This change better comports with the statutory requirements in Subsection 58-60-102(4)(a)(iii)(A). Subsection R156-60e-307.1(2)(a)(ii)(A): adjusts the rate of supervision meetings from "proportional" to at least twice each month. Subsection R156-60e-307.1(2)(a)(iv)(v): clarifies the general progress goals for the supervised individual as part of the contract.

Subsection R156-60e-307.1(2)(e)(ii)(C): removes the requirements to disclose remote supervision to the client.

Subsection R156-60e-308.1(2)(a)(ii): clarifies that a supervisor may not supervise an individual if that individual has ownership in the supervisor's employing agency.

Subsection R156-60e-308.1(2)(b)(ii): clarifies the general progress goals and learning objectives for the supervised individual.

Subsection R156-60e-308.1(2)(c)(iv): clarifies the clinical supervisor's duties and expectations in the event of a supervised individual's violation or practice outside the scope of their practice.

Subsection R156-60e-308.1(2)(e)(ii): adjusts the rate of supervision meetings from weekly to at least twice each month.

Subsection R156-60e-309.1(1)(b)(ii)(B): clarifies that a supervisor may not supervise an individual if that individual has ownership in the supervisor's employing agency.

Subsection R156-60e-309.1(2): clarifies hours that a supervised individual cannot count towards licensure.

Subsection R156-60e-501.4(1): updates the Code of Ethics for ACMHCA.

(EDITOR'S NOTE: The original proposed amendment upon which this change in proposed rule (CPR) was based was published in the December 1, 2025, issue of the Utah State Bulletin, on page 22. Underlining in the rule below indicates text that has been added since the publication of the proposed rule mentioned above; strike-out indicates text that has been deleted. You must view the CPR and the proposed amendment together to understand all of the changes that will be enforceable should the agency make this rule effective.)

Fiscal Information

<p>6. Provide an estimate and written explanation of the aggregate anticipated cost or savings to:</p>
<p>A. State budget:</p> <p>The changes in this CPR reduce the supervisor course hour requirement from 20 hours to 8 hours to more closely align with statutory requirements.</p> <p>The changes further clarify and update language from the previous draft filing.</p> <p>These proposed changes are expected to have zero net impact on state revenues or expenditures because these changes should not result in any additional complaints, investigations, or disciplinary actions or any additional licensing issues.</p>
<p>B. Local governments:</p> <p>The changes in this CPR reduce the supervisor course hour requirement from 20 hours to 8 hours to more closely align with statutory requirements. The changes further clarify and update language from the previous draft filing.</p> <p>For local government entities that employ supervisors who need to complete the supervision course, the proposed change to reduce the supervision course from 20 hours to 8 hours may reduce the original estimated fiscal impact on these local government entities that pay for the supervisors' training as provided in the previously published proposed changes.</p> <p>Any reduction in costs from these proposed changes is not measurable currently as several courses are in the process of development by local associations and the cost of those training courses is not currently known.</p> <p>Additionally, whether the supervisor or the supervisor's employer will cover the cost of the eight-hour training course will vary.</p>
<p>C. Small businesses ("small business" means a business employing 1-49 persons):</p> <p>There are approximately 1,532 small businesses in Utah with licensees engaged in the practice of mental health therapy and who may employ those engaged in the practice of mental health therapy, such as private or group practices, hospitals, or medical centers (NAICS 621112, 621420, 621330, 622210, 623220, 623210).</p>

The changes in this CPR reduce the supervisor course hour requirement from 20 hours to 8 hours to more closely align with statutory requirements. The changes further clarify and update language from the previous draft filing.

For small businesses that employ supervisors who need to complete the supervision course, the proposed change to reduce the supervision course from 20 hours to 8 hours may reduce the original estimated fiscal impact on small businesses that pay for the supervisors' training as provided in the previously published proposed changes.

Any reduction in costs from these proposed changes is not measurable currently as several courses are in the process of development by local associations and the cost of those training courses is not currently known.

Additionally, whether the supervisor or the supervisor's employer will cover the cost of the eight-hour training course will vary.

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

There are approximately 96 non-small businesses in Utah comprising of licensees engaged in the practice of mental health therapy who may employ those engaged in the practice of mental health therapy, such as private or group practices, hospitals, or medical centers (NAICS 621112, 621420, 621330, 622210, 623220, 623210).

The changes in this CPR reduce the supervisor course hour requirement from 20 hours to 8 hours to more closely align with statutory requirements. The changes further clarify and update language from the previous draft filing.

For non-small businesses that employ supervisors who need to complete the supervision course, the proposed change to reduce the supervision course from 20 hours to 8 hours may reduce the original estimated fiscal impact on non-small businesses as provided in the previously published proposed changes.

Any reduction in costs from these proposed changes is not measurable currently as several courses are in the process of development by local associations and the cost of those training courses is not currently known.

Additionally, whether the supervisor or the supervisor's employer will cover the cost of the eight-hour training course will vary.

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 changes in the change in proposed rules reducing the hours for the supervision course from 20 hours to eight hours may reduce the original estimated fiscal impact on government entities such as the Utah Department of Health and Human Services (DHHS), The Division of Correctional Health Services, Local Mental Health Authorities (LMHAs), and the Utah State Board of Education (USBE) and Local School Districts as provided in the previously published proposed changes. Mental health supervisors employed by these agencies will need to complete the required training as outlined in the rule and incur the cost to pay for the training.

There are an estimated 300 to 500 therapists directly employed by the state and likely 1,500 to 2,000 therapists employed by LMHAs and Utah's 41 school districts. Any reduction in costs from these proposed changes are not measurable currently as several courses are in the process of development by local associations and the cost of those training courses is not currently known.

Additionally, whether the supervisor or the supervisor's employer will cover the cost of the eight-hour training course will vary.

F. Compliance costs for affected persons:

The changes in this change in proposed rule reduce the supervisor course hour requirement from 20 hours to 8 hours to more closely align with statutory requirements. The changes further clarify and update language from the previous draft filing.

As of early 2026, there are approximately 17,400 licensed independent mental health providers in the state of Utah. For affected persons who need to complete the supervision course, the proposed change to reduce the supervision course from 20 hours to 8 hours may reduce the original estimated fiscal impact as provided in the previously published proposed changes for this rule.

However, the costs are not measurable currently as several courses are in the process of development by local associations and the cost of those training courses is not currently known.

NOTICES OF CHANGES IN PROPOSED RULES

Additionally, whether the supervisor or the supervisor's employer will cover the cost of the eight-hour training course will vary.

G. Regulatory Impact Summary Table (This table includes only fiscal impacts the agency was able to measure. If the agency could not estimate an impact, it is excluded from this table but described in boxes A through F.)

Regulatory Impact Summary Table					
Fiscal Cost	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
Total Fiscal Cost	\$0	\$0	\$0	\$0	\$0
Fiscal Benefits	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
Total Fiscal Benefits	\$0	\$0	\$0	\$0	\$0
Net Fiscal Benefits	\$0	\$0	\$0	\$0	\$0

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

The Executive Director of the Department of Commerce, Margaret W. Busse, has reviewed and approved this regulatory impact analysis.

Citation Information

7. 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:

Subsection 58-1-103(1)(a)	Subsection 58-1-202(1)(a)	Section 58-60-201
Section 58-60-301	Section 58-60-401	Section 58-60-501

Incorporation by Reference Information

8. Incorporation by Reference:

A. This rule adds or updates the following title of material incorporated by reference (a copy of the material incorporated by reference must be submitted to the Office of Administrative Rules. *If none, leave blank*):

Official Title of Materials Incorporated (from title page)	AAMFT Code of Ethics
Publisher	American Association for Marriage and Family Therapy
Issue Date	January 1, 2026

Public Notice Information

9. The public may submit written or oral comments to the agency identified in box 1.

A. Comments will be accepted until: 05/15/2026

B. A public hearing (optional) will be held (The public may request a hearing by submitting a written request to the agency, as outlined in Section 63G-3-302 and Rule R15-1.):

Date:	Time:	Place (physical address or URL):
05/08/2026	11:00 AM	Anchor Meeting Location: Heber M. Wells Building Room 474 160 E 300 S Salt Lake City, UT Google Meet joining info: Video call link: https://meet.google.com/nyf-ymve-nrg Or dial: (US) +1 318-373-3469 PIN: 191 500 317# More phone numbers: https://tel.meet/nyf-ymve-nrg? pin=5750197820340

10. This rule change MAY become effective on:	05/22/2026
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

Agency head or designee and title:	Jana Johansen, Assistant Division Director	Date:	03/13/2026
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R156. Commerce, Professional Licensing.

R156-60e. Mental Health Professional Practice Act Rule.

R156-60e-101.1. Title - Authority - Relationship to Rule R156-1.

- (1) This rule is known as the "Mental Health Professional Practice Act Rule."
- (2) This rule is adopted by the Division under Subsection 58-1-106(1)(a), to enable the Division to administer Title 58, Chapter 60, Mental Health Professional Practice Act.
- (3) The organization of this rule and its relationship to Rule R156-1 is as described in Section R156-1-101.

R156-60e-102.1. Definitions Applicable To All Mental Health Professionals.

Terms used in this rule are defined in Title 58, Chapter 1, Division of Professional Licensing Act, and Title 58, Chapter 60, Mental Health Professional Practice Act. In addition:

- (1) "Accredited institution of higher education," unless otherwise specified in this rule, means an educational institution that has accreditation recognized by the Council for Higher Education Accreditation (CHEA).
- (2) "AI" as used in Subsection R156-60e-307.1(2)(c)(iii) means artificial intelligence.
- (3) "Approved diagnostic and statistical manual for mental disorders" means one of the following:
 - (a) Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition, Text Revision (DSM-5-TR), published by the American Psychiatric Association; or
 - (b) International Classification of Diseases, Tenth Revision, Clinical Modifications (ICD-10-CM), published as the ICD-10-CM: The Complete Official Codebook by the American Medical Association.
- (4) "APRN" means an advanced practice registered nurse licensed under Subsection 58-60-102(15)(b).
- (5) "Asynchronous" as used in Subsections R156-60e-302.1(3)(d) and R156-60e-402.1(3)(b)(vii) means the individual:
 - (a) accesses material online;
 - (b) learns at the individual's own pace and not in real-time; and
 - (c) with or without instructor interaction.
- (6) "CHEA" means the Council for Higher Education Accreditation.
- (7) "CSWE" means the Council on Social Work Education.
- (8) "Client" or "patient" means:
 - (a) an individual who is competent to request mental health services; or
 - (b) an individual who is not competent to request mental health services but is lawfully provided professional services by a mental health therapist who:
 - (i) agrees orally or in writing to provide professional services to that individual; or
 - (ii) without an overt agreement, provides professional services to that individual.
- (9) "Clinical supervision form" means the form provided by the Division for use by a supervisor and a supervised individual to document who is providing supervision to a supervised individual and includes at least the following:

NOTICES OF CHANGES IN PROPOSED RULES

- (a) name and license number of the supervised individual;
- (b) name and license number of the supervisor; and
- (c) supervised individual's place of employment.

(10) "Independent of control" as used in Subsection R156-60e-309.1(1)(b)(ii)(A) means the supervisor is not employed by the supervised individual, an agency owned in total or part by the supervised individual, or an agency in which the supervised individual has a controlling interest.

(11) "Internship" means one or more courses completed as part of a graduate program at an accredited institution of higher education where the internship hours are obtained:

- (a) at a public agency or private clinic;
- (b) while the individual is engaged in the clinical practice of mental health therapy as defined in Subsection 58-60-102(17); and
- (c) under supervision of a qualified mental health training supervisor as defined in Section R156-60e-305.1.

(12) "Interpersonal and intrapersonal dysfunction" as used in Subsection 58-60-302(2)(d) means the dysfunction is a core feature of a diagnosable disorder.

(13) "Mild to moderate behavioral health symptoms or disorders" as used in Subsections 58-60-202(1)(a)(ii)(A), 58-60-202(1)(a)(v)(B), 58-60-502(6)(e)(iii)(B), 58-60-601(4)(c)(v)(A), 58-60-601(4)(c)(vi)(A), and 58-60-601(4)(d)(iii)(B), means symptoms that:

- (a) cause clinically significant disturbances in an individual's cognition, emotion regulation, or behavior that reflect a dysfunction, but are not so severe as to be debilitating or require hospitalization or medications;
- (b) satisfy the legal definition of a disability as defined in Subsection 26B-6-801(1) or the equivalent; and
- (c) can be treated with brief, solution-focused therapy.

(14) "NASW" means the National Association of Social Workers.

(15) "On-the-job training program" as used in Subsections 58-1-307(1)(c) and 58-60-107(2)(g) means a program that:

(a) applies to an individual who has completed courses required for graduation in a degree or formal training program that qualifies the individual for licensure under Title 58, Chapter 60, Mental Health Professional Practice Act;

- (b) starts immediately upon completion of coursework required for graduation;
- (c)(i) ends 60 days from the date it begins or upon licensure, whichever is earlier; and
- (ii) may not be extended or repeated a second time;
- (d) is completed while the individual is providing clinical mental health services in a public agency or private clinic; and

(e) is supervised by a qualified mental health training supervisor qualified under Section R156-60e-305.1 who conducts supervision meetings at least weekly in circumstances where the supervisor is physically present in the same room at the same time as the supervised individual.

(16) "Practicum" means one or more courses completed as part of a graduate program at an accredited institution of higher learning where the practicum hours are obtained:

- (a) at a public agency or private clinic;

(b) while engaged in the clinical practice of mental health therapy as used in Subsection 58-60-102(17), 58-60-202(2), 58-60-302(2), 58-60-502(7), or Section 58-60-402; and

- (c) under supervision of a qualified mental health training supervisor as defined in Section R156-60e-305.1.

(17) "Public agency or private clinic" as used in Subsections 58-60-308(2)(a)(i), 58-60-407(2)(a)(i), 58-60-512(2)(a), R156-60e-102.1(11)(a), R156-60e-102.1(15)(d), R156-60e-102.1(16)(a), R156-60e-304.1(1)(b), and R156-60e-309.1(1)(b)(vi), means one of the following:

- (a) mental health agency;
- (b) in-patient or out-patient hospital;
- (c) educational institution;
- (d) non-profit organization; or
- (e) government agency.

(18) "Supervisee" as used in Subsections 58-60-102(3)(d) and (4)(a)(v) means a supervised individual.

(19) "Supervision contract" as used in Subsections 58-60-102(8)(a) and (9) means a written contract between a clinical supervisor and a supervised individual that:

- (a) is signed by both parties;
- (b) facilitates the experience requirements for licensure; and
- (c) meets the requirements of Section R156-60e-307.1.

(20) "Synchronous" as used in Subsections R156-60e-102.2(4)(a)(ii), R156-60e-302.1(3)(c), R156-60e-306.1(1)[(+)], R156-60e-307.1(2)(e)(i)(A), and R156-60e-402.1(3)(b)(vi) means a meeting or class where the parties gather:

- (a) virtually or in a physical place; and
- (b) interact in real-time.

R156-60e-102.2. Definitions Specific To Social Work.

Terms used in this rule are defined in Title 58, Chapter 1, Division of Professional Licensing Act, and in Title 58, Chapter 60, Part 2, Social Worker Licensing Act. In addition:

- (1) "ASWB" means the Association of Social Work Boards.

(2) "Clinical social work concentration and practicum," "case work," "group work," or "family treatment course sequence with a clinical practicum," as used in Subsection 58-60-109(2)(b) and Section 58-60-205 mean a track of professional education that is specifically established to prepare an individual to practice or engage in clinical mental health therapy.

(3) "CSW" means a licensed certified social worker.

(4) "General supervision" as used in Subsection 58-60-202(1)(a) means that the supervisor is available for consultation with the supervised individual:

(a)(i) when both are physically present in the same room at the same time; or

(ii) remotely via a synchronous electronic method that provides real-time communication through interactive technology that enables a supervisor at a distant site and a supervised individual at an originating site to interact simultaneously through two-way audio and video transmission; and

(b) within a reasonable time and consistent with the acts and practices in which the supervised individual is engaged.

(5) "Human growth and development" as used in Subsection 58-60-205(3)(c)(iii)(A)(II) means a course completed from a CSWE-accredited bachelor's degree in social work program that includes an emphasis on human growth and development across the lifespan and from conception to death.

(6) "LCSW" means a licensed clinical social worker.

(7) "Social welfare policy" as used in Subsection 58-60-205(3)(c)(iii)(A)(I) means a course completed from a CSWE-accredited bachelor's degree in social work program that includes an emphasis on the following:

(a) local, state, and federal social policies and how those policies impact individuals, families, and communities; and

(b) the diverse needs of social welfare recipients.

(8) "Social work practice methods" as used in Subsection 58-60-205(3)(c)(iii)(A)(III) means a course from a CSWE-accredited bachelor's degree in social work program that includes an emphasis on the following:

(a) generalist social work practice at the individual, family, group, organization, and community levels;

(b) planned client change processes and social work roles at various levels;

(c) application of key values and principles of the NASW Code of Ethics and resolution of ethical dilemmas; and

(d) evaluation of programs and direct practice in the social work field.

(9) "SSW" means a licensed social service worker.

R156-60e-102.3. Definitions Specific To Marriage and Family Therapy.

Terms used in this rule are defined in Title 58, Chapter 1, Division of Professional Licensing Act, and Title 58, Chapter 60, Part 3, Marriage and Family Therapist Licensing Act. In addition:

(1) "AAMFT" means the American Association for Marriage and Family Therapy.

(2) "AMFT" means an associate marriage and family therapist.

(3) "AMFT-Extern" means an associate marriage and family therapist extern under Section 58-60-117.

(4) "Deficiency" as used in Subsections 58-60-117(1)(d) and R156-60e-302.3(4)(a) relating to MFT licensure means the applicant's completed and required educational degree for licensure lacks no more than six semester credit hours or eight quarter credit hours that cover the coursework listed in Subsections R156-60e-302.3(3)(a) through (g).

(5) "MFT" means a marriage and family therapist.

R156-60e-102.4. Definitions Specific To Clinical Mental Health Counselor.

Terms used in this rule are defined in Title 58, Chapter 1, Division of Professional Licensing Act, and Title 58, Chapter 60, Part 4, Clinical Mental Health Counselor Licensing Act. In addition:

(1) "ACMHC" means an associate clinical mental health counselor.

(2) "ACMHC-Extern" means an associate clinical mental health counselor extern under Section 58-60-117.

(3) "CMHC" means a clinical mental health counselor.

(4) "Deficiency" as used in Subsections 58-60-117(1)(d) and R156-60e-302.4(2) relating to CMHC licensure means that the applicant's completed and required educational degree for licensure lacks no more than 12 semester credit hours or 18 quarter credit hours of the hours required under Subsection 58-60-405(1)(c)(ii) but still meets the coursework requirements of Subsection R156-60e-302.4(1).

(5) "Equivalent field" as used in Subsection 58-60-405(1)(c)(i)(B) means that the educational program:

(a) prepares students to practice mental health counseling through the study of generally recognized clinical mental health counseling principles, methods, and procedures;

(b) meets the requirements of Subsection R156-60e-302.4(1); and

(c) has adequately prepared the applicant for practice as demonstrated by the applicant passing the NBCC's National Counselor Examination (NCE) to verify education.

(6) "NBCC" means the National Board for Certified Counselors.

R156-60e-102.5. Definitions - Specific To Substance Use Disorder Counselor and Master Addiction Counselor.

Terms used in this rule are defined in Title 58, Chapter 1, Division of Professional Licensing Act, and Title 58, Chapter 60, Part 5, Substance Use Disorder Counselor Act. In addition:

(1) "AMAC" means associate master addiction counselor.

NOTICES OF CHANGES IN PROPOSED RULES

- (2) "ASAM" means the American Society of Addiction Medicine.
- (3) "ASUDC" means an advanced substance use disorder counselor.
- (4) "General supervision" as used in Subsection 58-60-502(3) means experience gathered under the general supervision of a licensed individual who meets the requirements of Section 58-60-508.
- (5) "Human growth and development" as used in Subsection R156-60e-302.5(2)(b)(i)(A) means a course at an accredited institution of higher education that includes an emphasis on human growth and development across the lifespan and from conception to death.
- (6) "IC&RC" means the International Certification and Reciprocity Consortium.
- (7) "Initial assessment" means the procedure of gathering psycho-social information from a client or patient that:
 - (a) includes the application of the Addiction Severity Index (ASI) as the basis for recommending a level of treatment to assist the mental health therapist supervisor in the information collection process; and
 - (b) that may include a referral to an appropriate treatment program.
- (8) "MAC" means Master Addiction Counselor.
- (9) "NAADAC" means the Association for Addiction Professionals.
- (10) "NCC AP" means the National Certification Commissions for Addiction Professionals.
- (11) "Prerequisite courses" as used in Subsections 58-60-506(6)(a)(ii) and R156-60e-302.5(2) means courses that shall be completed before an individual may qualify for licensure.
- (12) "SASSI" means Substance Abuse Subtle Screening Inventory.
- (13)(a) "Screening" as used in Subsections 58-60-502(6)(b) and 58-60-502(9)(b)(i) means a brief interview with the client that is conducted in-person or by other electronic means and is used to determine the potential of a substance abuse problem.
 - (b) The screening may also include the following:
 - (i) a preliminary ASAM Criteria recommendation to expedite the subsequent assessment and evaluation process;
 - (ii) screening instruments such as the SASSI; or
 - (iii) if a potential problem is identified, a referral for an initial assessment or a substance use disorder evaluation.
- (14) "Substance use disorder evaluation" means the process used to interpret information gathered from a client during an initial assessment, other instruments as needed, and a face-to-face interview with the client by a licensed mental health therapist to determine if the client or patient meets the DSM-5-TR or ICD-10-CM criteria for substance abuse or dependence and requires an individualized treatment plan.
- (15) "Substance use disorder education program" as used in Subsections 58-60-502(13) and 58-60-506(6)(b) means college or university coursework at a regionally accredited institution.
- (16) "Supervised experience" as used in Subsection 58-60-506(4)(c)(ii) means experience gathered under the general supervision of a licensed individual who meets the requirements of Section 58-60-508.
- (17) "SUDC" means a substance use disorder counselor.

R156-60e-102.6. Definitions - Specific To Behavioral Health Coach and Behavioral Health Technician.

Terms used in this rule are defined in Title 58, Chapter 1, Division of Professional Licensing Act, and Title 58, Chapter 60, Part 6, Behavioral Health Coach and Technician Licensing Act.

R156-60e-202.1. Utah Behavioral Health Board -- Advisory Committees.

- (1) Under Subsection 58-60-102.5(3)(b), the Board shall hear advisory committee reports and make determinations based upon those reports regarding any Division action to be taken on an individual's license or on an application for licensure.
- (2) Under Subsection 58-60-102.5(4)(b)(i), the Board shall annually elect a member to serve as chair on each advisory committee that reports to the Board.
- (3) Under Subsection 58-60-102.5(4)(c)(i), a member of the Qualifications and Professional Development Advisory Committee may be both a licensed individual and an educator.
- (4) Under Subsection 58-60-102.5(4)(c)(ii), a criminal justice professional is an individual who is actively employed or who has retired from employment in at least one of the following capacities:
 - (a) as a member of law enforcement including a police officer, sheriff, patrol officer, police investigator, police detective, state trooper, or federal agent;
 - (b) as an attorney in criminal law court including a city attorney, county attorney, district attorney, attorney general, assistant attorney general, city public defender, county public defender, or judge who is a member of the attorney Bar;
 - (c) in corrections including as a corrections officer, probation officer, parole officer, or warden; or
 - (d) as an instructor of a criminal justice program from a regionally accredited institution of higher education.

R156-60e-302.1. Qualifications for Licensure or Certification - Suicide Prevention Course.

Under Subsections 58-60-105(3), 58-60-205(1)(f), 58-60-305(1)(f), 58-60-405(1)(f), 58-60-506(1)(c), and 58-60-506(6)(b)(ii), the Division-approved two-hour suicide prevention course required to obtain licensure shall be:

- (1) approved, sponsored, or conducted by one of the following:
 - (a) an accredited institution of higher education;
 - (b) county, state, or federal agency;
 - (c) professional association, or similar body, involved in clinical mental health therapy; or

- (d) mental health agency that provides clinical mental health services;
- (2) relevant to mental health therapy and suicide prevention that is consistent with the laws of this state and includes one or more of the following components:
 - (a) suicide concepts and facts;
 - (b) suicide risk assessment, crisis intervention, and first aid;
 - (c) evidence-based intervention for suicide risk;
 - (d) continuity of care and follow-up services for suicide risk; and
 - (e) therapeutic alliances for intervention in suicide risk;
 - (3) completed in not less than 50-minute blocks of time in one of the following formats:
 - (a) classroom lecture and discussion;
 - (b) workshop;
 - (c) synchronous webinar;
 - (d) asynchronous online self-pace module;
 - (e) case study review; or
 - (f) simulation; and
 - (4) certified as complete via an official document that contains at least the following:
 - (a) course attendance;
 - (b) title, objective, or official description of the course as outlined in Subsection (2);
 - (c) hours completed;
 - (d) name of provider; and
 - (e) date of completion.

R156-60e-302.2. Qualifications Specific to Social Work Licensure.

- (1) Under Subsections 58-60-205(1)(c)(ii) and (2)(c)(ii), a doctoral degree that contains a clinical social work concentration and practicum qualifying an applicant for LCSW licensure or CSW licensure shall include professional education that is specifically established to prepare an individual to practice or engage in clinical mental health therapy.
- (2) Under Subsection 58-60-205(3)(c)(ii), a master's degree qualifying an applicant for SSW licensure shall be from a regionally accredited institution of higher education in one of the following areas of study:
 - (a) clinical mental health counseling;
 - (b) education and human development;
 - (c) human and social services;
 - (d) marriage and family therapy;
 - (e) psychology;
 - (f) social, behavioral, or health sciences; or
 - (g) social work.
- (3) Under Subsection 58-60-205(3)(c)(iii)(B), the supervised individual's 2,000 hours of supervised qualifying experience for SSW licensure shall be performed:
 - (a) in an agency providing social work services and activities;
 - (b) according to a written social work job description approved by a licensed mental health therapist supervisor; and
 - (c) under the general supervision of an SSW, CSW, or master's level mental health license holder.
- (4) Under Subsection 58-60-205(1)(h)(i), an applicant for LCSW licensure shall pass the ASWB Clinical Exam.
- (5) Under Subsection 58-60-205(4), an applicant requesting additional testing time shall complete an ASWB application for non-standard testing arrangements.

R156-60e-302.3. Qualifications Specific to Marriage and Family Therapy Licensure.

- (1) Under Subsection 58-60-305(1)(c)(ii), an applicant for AMFT licensure or MFT licensure shall produce certified transcripts evidencing completion of a clinical master's degree or higher in marriage and family therapy or equivalent from an institution that was accredited by a professional accrediting body approved when the applicant obtained the education.
- (2) Under Subsection 58-60-305(1)(e), at least 500 hours of the applicant's required 1,200 direct client hours shall be clinical therapy provided to couples, families, or groups.
- (3) Under Subsection 58-60-305(1)(c)(ii), certified transcripts evidencing completion of an equivalent degree shall include the following:
 - (a) six semester hours or nine quarter hours of coursework in theoretical foundations of marital and family therapy;
 - (b) nine semester hours or 12 quarter hours of coursework in assessment and treatment in marriage and family therapy including the most current diagnostic statistical manual;
 - (c) six semester hours or nine quarter hours of course work in human development and family studies that include ethnic minority issues, and gender issues including sexuality, sexual functioning, and sexual identity;
 - (d) three semester hours or four quarter hours in professional ethics;
 - (e) three semester hours or four quarter hours in research methodology and data analysis;

NOTICES OF CHANGES IN PROPOSED RULES

- (f) three semester hours or four quarter hours in electives in marriage and family therapy; and
- (g) a supervised clinical practicum that includes at least 400 hours as follows:
 - (i) at least 100 hours of direct clinical supervision; and
 - (ii) at least 300 hours of clinical mental health therapy practice under direct clinical supervision with at least 150 hours in couple or family therapy with two or more clients participating.
- (4)(a) An individual whose education after graduation has a deficiency as defined in Subsection R156-60e-102.3(4) may engage in marriage and family therapy under supervision as outlined in Section R156-60e-304.1 if:
 - (i) the educational deficiency is under Subsection (3)(a), (c), (e), or (f); and
 - (ii) the applicant qualifies for AMFT-Extern licensure under Section 58-60-117.
- (b) No hour earned under Subsection (4)(a) may be counted toward an internship, practicum, or associate-level licensure.
- (5) Under Subsection 58-60-305(1)(g)(i), an applicant for MFT licensure shall pass one of the following exams:
 - (a) Examination in Marital and Family Therapy administered by the Association of Marital and Family Therapy Regulatory Boards (AMFTRB); or
 - (b) Licensed Marriage and Family Therapist Clinical Examination by the California Board of Behavioral Sciences (BBS).

R156-60e-302.4. Qualifications Specific to Clinical Mental Health Counselor Licensure.

- (1) Under Subsection 58-60-405(1)(c), an applicant for ACMHC licensure or ACMHC-Extern licensure shall provide certified transcripts evidencing completion of a degree that includes the following:
 - (a) at least three semester credit hours or four quarter credit hours of graduate-level courses in the following subjects:
 - (i) mental status examination, the appraisal of diagnostic and statistical manual maladaptive, and psychopathological behavior; and
 - (ii) professional and counseling ethics; and
 - (b) a practicum or internship that includes at least 700 documented hours of supervised clinical mental health counselor training of which at least 240 hours consist of providing clinical therapy directly to clients under the direction of an educational institution.
- (2) Under Subsection 58-60-117(1)(d), an individual applying for ACMHC-Extern licensure whose completed educational degree has a deficiency as defined in Subsection R156-60e-102.4(4) may apply for an ACMHC-Extern license while completing the missing coursework post-degree to obtain an ACMHC license if the courses are taken:
 - (a) for full credit;
 - (b) through one institution; and
 - (c) from a master's or doctoral program in:
 - (i)(A) clinical mental health counseling, clinical rehabilitation counseling, or counselor education and supervision; and
 - (B) a program that is accredited by the Council for Accreditation of Counseling and Related Education Programs (CACREP); or
 - (ii) clinical mental health counseling or an equivalent field as defined in Subsection R156-60e-102.4(5), from an institution accredited by CHEA.
- (3)(a) An individual who qualifies to complete educational requirements post-degree under this section and qualifies for ACMHC-Extern licensure under Section 58-60-117 may engage in clinical mental health counseling under supervision as outlined in Section R156-60e-304.1.
 - (b) No hour obtained under Subsection (2)(a) may be counted toward an internship, practicum, or associate-level licensure.
- (4) Under Subsection 58-60-405(1)(g)(i), an applicant for CMHC licensure shall pass the National Clinical Mental Health Counseling Examination (NCMHCE) from the NBCC.

R156-60e-302.5. Qualifications Specific to Substance Use Disorder and Master Addiction Counselor Licensure.

- (1) Under Subsections 58-60-506(1)(h)(i) and 58-60-506(4)(c)(iii), an applicant for MAC licensure or ASUDC licensure shall pass one of the following examinations:
 - (a) Advanced Alcohol and Drug Counselor (AADC) Examination administered by the IC&RC;
 - (b) National Certified Addiction Counselor, Level II (NCAC II) Examination administered by the NCC AP;
 - (c) Master Addiction Counselor (MAC) Examination administered by the NCC AP; or
 - (d) Examination for Master Addiction Counselors (EMAC) administered by the National Board of Certified Counselors (NBCC).
- (2)(a) Under Subsection 58-60-506(6)(a)(ii), an applicant for SUDC licensure shall complete the prerequisite courses at a regionally accredited institution of higher education.
 - (b) The prerequisite courses under Subsection (2)(a) shall:
 - (i) cover the following subjects:
 - (A) human growth and development across the lifespan and from conception to death; and
 - (B) general psychology; and
 - (ii) include a two-hour suicide prevention course as described in Section R156-60e-302.1.

R156-60e-302.6. Qualifications Specific To Behavioral Health Coach and Behavioral Health Technician Licensure.

Reserved.

R156-60e-303.1. Qualifications for Licensure or Certification - Alternate Examination Pathway.

An applicant for licensure using an alternate examination pathway under Subsection 58-60-205(1)(h)(ii) as an LCSW, Subsection 58-60-305(1)(g)(ii) as an MFT, Subsection 58-60-405(1)(g)(ii) as a CMHC, or Subsection 58-60-506(1)(h)(ii) as an MAC, shall submit the following:

(1) proof that the applicant attempted the qualifying professional examination after May 1, 2024, except an applicant for CMHC licensure who uses the NBCC's National Counselor Examination (NCE) to verify education in an equivalent field under Subsection R156-60e-102.4(5) may not use the NCE to qualify for licensure under the alternate examination pathway;

(2) a signed alternate exam pathway supervisor association form provided by the Division verifying that the applicant is choosing to use the alternate exam pathway before starting any hours toward the alternate exam pathway 500-hour requirement;

(3) a signed form provided by the Division verifying that the applicant's 500 hours of direct client care hours were obtained under one supervisor;

(4) a recommendation letter from the direct clinical supervisor that contains the following information:

(a) the applicant's:

(i) clinical competency;

(ii) consistency and accuracy of diagnosing;

(iii) orderly decision-making skills;

(iv) use of population-appropriate practices and modalities; and

(v) ability to efficiently and effectively:

(A) screen patients;

(B) make clinical assessments;

(C) draft appropriate treatment plans;

(D) use proper case management;

(E) use proper discharge procedures;

(F) apply ethics and legal standards including managing crises and required reporting;

(G) work within the professional scope of practice;

(H) document treatment; and

(I) use knowledge of profession-relevant laws and rules; and

(b) any ethical violation or concerning behavior by the applicant that occurred during supervision; and

(5) a letter of recommendation from a mental health professional approved by the applicant's direct clinical supervisor who observed the applicant's direct client care and includes the following information:

(a) observed practice including any concern regarding the applicant's work; and

(b) any ethical violation or concerning behavior by the applicant.

R156-60e-304.1. Supervised Clinical Experience Requirements.

(1) Under Subsections 58-60-102(3) and (7), 58-60-205(1)(d) and (e), 58-60-305(1)(d) and (e), 58-60-405(1)(d) and (e), and 58-60-506(1)(e) and (f), an applicant shall submit proof that the direct clinical supervision and direct client care hours were obtained as follows:

(a)(i) in Utah while providing clinical mental health services;

(ii) in a state, district, or territory of the United States while providing clinical mental health services if legally obtained under the current law of that state, territory, or district; or

(iii) internationally if:

(A) while the applicant obtained the supervision hours, the license was in a regulated mental health profession, active, and in good standing; or

(B) the applicant was unlicensed, with proof that the applicant's supervision hours were legally obtained as a mental health professional;

(b) in a public agency or private clinic;

(c) after the applicant received a master's or doctoral degree in mental health; and

(d) while the applicant holds an active Utah associate or CSW license, or the out-of-state equivalent.

(2) An applicant who is exempt from licensure under Subsection 58-1-307(1)(a) or (j) may obtain supervision hours while exempt from licensure.

(3) An applicant who is exempt from licensure under Subsection 58-1-307(1)(b) or (c) may not obtain supervision hours while exempt from licensure.

R156-60e-305.1. Clinical Supervisor Eligibility.

(1) Under Subsection 58-60-102(4), to be eligible to become a Division-approved clinical supervisor and oversee the clinical supervision of a master's level license holder, a licensed individual shall:

(a) be an active license holder in good standing in one of the following classifications:

(i) APRN specializing in the practice of clinical mental health therapy under Subsection R156-31b-302e(2);

(ii) CMHC;

(iii) LCSW;

NOTICES OF CHANGES IN PROPOSED RULES

- (iv) MFT;
- (v) physician who is board certified or board eligible in psychiatry;
- (vi) psychologist; or
- (vii) MAC;
- (b) hold a master's degree or higher;
- (c) be licensed under Subsection (1)(a) for at least two years before providing supervision;
- (d) complete a supervisor training program that meets the requirements of Section R156-60e-306.1;
- (e) meet one of the following requirements during the 24 months preceding supervision:
 - (i) have overseen or engaged in direct clinical supervision of another licensed individual;
 - (ii) provided clinical mental health therapy; or
 - (iii) provided direct client care; and
- (f) submit proof to the Division that the licensed individual has completed the training program under Subsection (1)(e) and request

Division-approved status as a clinical supervisor.

(2) A qualified mental health training supervisor shall comply with the duties and responsibilities established in Sections R156-60e-307.1 and R156-60e-308.1.

(3) A clinical supervisor may not supervise an individual:

- (a) who employs or supervises the clinical supervisor;
- (b) who is a family member; or

(c) if the supervision is compromised by a relationship where the supervisor is controlled by: ~~the supervised individual or the supervised individual's employing agency.~~

(i) the supervised individual; or

(ii) the supervised individual's employing agency, if the supervised individual has ownership in the employing agency.

R156-60e-306.1. Clinical Supervisor Training Program.

(1) Under Subsection 58-60-102(4)(a)(iii)(A), a licensed individual applying to become a Division-approved clinical supervisor shall complete a synchronous training course on learning clinical supervision that meets the following requirements: ~~through one of the following approved training pathways:~~

~~(a) complete graduate level coursework that includes:~~

~~(i) a clinical supervision course that is:~~

~~(A) verified by official transcript;~~

~~(B) completed as a graduate student in an accredited educational institution's doctoral program; and~~

~~(C) taken after obtaining one of the following licenses:~~

~~(I) ACMHC;~~

~~(II) AMAC;~~

~~(III) AMFT; or~~

~~(IV) CSW license; or~~

~~(ii) a clinical supervision course that is:~~

~~(A) verified by official transcript;~~

~~(B) completed as a graduate student in an accredited educational institution's clinical psychology doctoral program; and~~

~~(C) includes a practicum;~~

~~(b) complete a specialized certification by completing an AMFT approved clinical supervision course; or~~

~~(c) complete a 20 hour synchronous course on learning clinical supervision that:~~

~~(i)a~~ is presented by:

~~(A)i~~ a regionally accredited educational institution;

~~(B)ii~~ a national or state association-approved provider;

~~(C)iii~~ a professional training organization; or

~~(D)iv~~ a government agency;

~~(ii)b~~ is taught by a mental health license ~~holder~~ therapist from any state, territory, or jurisdiction of the United States or Canada;

~~(iii)c~~ is a single, dedicated course of study where all ~~20~~ hours are completed ~~under that one course~~;

~~(iv)d~~ ~~with~~ has a curriculum that includes:

~~(A)i~~ at least one hour on defining and conceptualizing clinical supervision and models;

~~(B)ii~~ at least two hours on the supervisory relationship and the supervised individual's development;

~~(C)iii~~ ~~six~~ at least two hours on supervision methods and techniques including roles, process, group supervision, multi-cultural supervision, and evaluation;

~~(D)iv~~ ~~six~~ at least two hours on standards of practice, codes of ethics, and legal and professional issues; and

~~(E)v~~ ~~two~~ at least one hour[s] on executive and administrative tasks including supervision plans, contracts, record keeping, and reporting; ~~and~~

~~(F)~~ other supervision related topics, with up to two hours dedicated to single profession specific topics;

~~(v)c~~ is completed at least ~~18~~ 24 months after the licensed individual obtains one of the following licenses:

- (~~[A]~~^[i]) APRN;
- (~~[B]~~^[ii]) CMHC;
- (~~[C]~~^[iii]) LCSW;
- (~~[D]~~^[iv]) MAC;
- (~~[E]~~^[v]) MFT;
- (~~[F]~~^[vi]) physician; or
- (~~[G]~~^[vii]) psychologist license; and
- (~~[v]~~^[i]) includes a completion certificate verifying:
 - (~~[A]~~^[i]) the course title;
 - (~~[B]~~^[ii]) the attendee's name;
 - (~~[C]~~^[iii]) instructor's name;
 - (~~[D]~~^[iv]) presenting organization; and
 - (~~[E]~~^[v]) total hours.

(2)(a) To maintain approved clinical supervisor status under Subsection 58-60-102(4)(a)(iv), a supervisor shall complete at least six hours of ongoing professional development that is specific to clinical supervision.

(b) The required hours under Subsection (2)(a) may count toward the total hours required to maintain licensure if the ongoing professional development course title clearly states that the course is specific to providing clinical supervision.

(3)(a) If the Division takes formal disciplinary action on the license of a Division-approved clinical supervisor, the clinical supervisor's Division-approval status shall be immediately revoked.

(b) A licensed individual whose status was revoked under Subsection (3)(a) who applies to requalify as a Division-approved supervisor shall:

- (i) successfully comply with the disciplinary order;
- (ii) hold an active license in good standing; and
- (iii) retake an approved clinical supervision course.

R156-60e-307.1. Clinical Supervision Contract -- Requirements.

(1) Under Subsections 58-60-102(8)(a) and (9), the requirements of a clinical supervision contract for an individual seeking clinical supervision for licensure are established, defined, and clarified in this section.

(2) The clinical supervision contract shall include the following provisions:

(a) a meeting and accessibility plan that includes:

- (i) a plan to ensure the supervised individual has consistent access to the clinical supervisor;
- (ii) a plan [~~for meetings-~~]that specifies the following for each meeting:

(A) that the [~~frequency of the meetings will be at least weekly;~~]supervisor and supervised individual shall meet:

(I) at least weekly, if the supervised individual works full time; or

(II) at least twice each month;

(B) the [~~weekly-~~meeting under Subsection (2)(a)(ii)(A) shall last at least 50 minutes;

(C) the format of the meeting, such as individual or a small group; and

(D) the location of the meeting, such as in-person or remote; [~~and~~]

(iii) the general learning objectives [~~, progress goals for the supervised individual, and expectations of the supervisor;~~] for the supervised individual;

(iv) the general progress goals for the supervised individual; and

(v) the supervisor's expectations;

(b) a documentation and communication plan that includes:

- (i) a plan for documenting ongoing supervision, with a focus on competency-based measures;
- (ii) a procedure for ensuring the supervisor signs the clinical supervision hours at least quarterly; and
- (iii) a plan for who to contact in case of an emergency;

(c) an ethical and professional standards plan that includes:

- (i) the specific code of ethics that will be used by both the clinical supervisor and the supervised individual;
- (ii) an outline of the ethical requirement to report any unethical actions or violations of the ethical code; and
- (iii) a detailed plan of how the use of artificial intelligence (AI) will be managed in practice, including its role in:

(A) supervision;

(B) administration;

(C) note and report writing; and

(D) best practices;

(d) a conflict and breach resolution plan that includes:

(i) a plan for addressing potential conflicts between the supervisor's clinical recommendations and those of the supervised individual's employer;

(ii) remedies in the event of a contract breach by either party, including procedures for contract termination; and

(iii) a list of reasons why clinical supervision hours may not meet the clinical supervision requirements; and

NOTICES OF CHANGES IN PROPOSED RULES

- (e) if any part of the supervision is remote, a remote supervision protocols plan that includes:
 - (i) an outline of:
 - (A) how the parties will meet via synchronous electronic methods with two-way audio and video; and
 - (B) how the security of confidential electronic data will be protected; and
 - (ii) a specific plan that includes:
 - (A) how the clinical supervisor will comply with supervision duties;
 - (B) how the supervised individual will be notified of the use of remote supervision; and
 - (C) under Subsections 58-60-110(c)(i) and (ii), how the supervised individual's employer and clients or patients [and employer] will be notified; [~~of the remote supervision.~~
 - (I) that the supervised individual is being supervised; and
 - (II) of the supervisor's:
 - (Aa) name;
 - (Bb) type of license held;
 - (Cc) license number; and
 - (Dd) contact information.

R156-60e-308.1. Clinical Supervisor - Duties and Responsibilities.

- (1) Before providing clinical supervision, a supervisor shall enter a written supervision contract with the supervised individual that meets the requirements of Section R156-69-307.1.
- (2) A clinical supervisor shall have the following duties and responsibilities:
 - (a) maintain appropriate licensure and independence including:
 - (i) ensuring that both the clinical supervisor and the supervised individual hold and maintain current, valid licenses; and
 - (ii) maintaining a professional relationship with the supervised individual by ensuring that; [~~the clinical supervisor's ability to supervise and direct the individual's practice is not compromised by any relationship where the supervisor is controlled by the supervised individual or the supervised individual's employing agency;~~
 - (A) the clinical supervisor is independent of control from the supervised individual; and
 - (B) the clinical supervisor's ability to supervise and direct the supervised individual's practice is not compromised by a relationship where the supervisor is controlled by:
 - (I) the supervised individual; or
 - (II) the supervised individual's employing agency, if the supervised individual has ownership in the employing agency;
 - (b) provide guidance and direction including:
 - (i) being available to the supervised individual for advice, consultation, and direction that is:
 - (A) consistent with the standards and ethics of the profession; and
 - (B) tailored to the individual's level of training, patient diagnoses, and other relevant factors;
 - (ii) working with the supervised individual to:
 - (A) develop a [~~well conceptualized~~] detailed supervision plan[; and] that includes:
 - (I) learning objectives; and
 - (II) progress goals; and
 - (B) update the supervision plan when there is a change in:
 - (I) employment;
 - (II) job function;
 - (III) supervision goals; or
 - (IV) the method of supervision;
 - (iii) periodically reviewing the client records assigned to the supervised individual;
 - (iv) ensuring that each supervised individual knows and adheres to the supervised individual's authorized scope of practice; and
 - (v) reviewing and understanding the statutes, rules, and ethics specific to the license type the supervised individual is working toward;
 - (c) monitor and enforce compliance including:
 - (i) ensuring that both parties follow the supervision contract;
 - (ii) monitoring the supervised individual's performance for compliance with all applicable laws, rules, standards, and professional ethics;
 - (iii) being professionally responsible for the supervised individual's acts and practices that are part of the required clinical supervision; and
 - (iv) ~~ceasing to provide supervision after becoming aware that a supervised individual is practicing outside their authorized scope of practice; and~~
 - (v) ~~providing notice to the Division within ten days after the supervisor becomes aware of the supervised individual's violation or practice outside the scope of practice;~~
 - (i) after the supervisor becomes aware of a supervised individual's violation or practice outside the scope of practice;
 - (A) providing notice to the Division within ten days;

(B) not approve a supervised individual's hours performed outside the supervised individual's authorized scope of practice towards licensure; and

(C) take other action in compliance with the applicable code of ethics.

(d) manage documentation and reporting including:

(i) requiring each supervised individual to maintain a monthly supervision log;

(ii) upon completion of the supervised individual's required clinical training, submitting the following to the Division on forms provided by the Division:

(A) documentation verifying that the supervised individual completed the required clinical supervision hours; and

(B) the supervisor's evaluation of the supervised individual's competency to practice subject to Subsection (2)(d)(iii);

(iii) notifying the Division if the clinical supervisor does not support the issuance of a license to the individual or has other concerns and submitting:

(A) the supervised individual's current hours reporting form; and

(B) a written explanation of the clinical supervisor's concerns;

(iv) notifying the Division in writing within 30 days of:

(A) the termination of a supervision contract;

(B) a change in the supervised individual's place of employment; or

(C) disciplinary action taken against a supervised individual at their place of employment that involves professional misconduct or unlawful conduct; and

(v) complying with the confidentiality requirements of Section 58-60-114;

(e) defining the structure of the clinical supervision including specifying the following:

(i) up to ten hours of direct clinical supervision may be counted toward the supervised individual's licensure hours in any 30-day period;

(ii) clinical supervision will occur in proportion to the number of actual hours that the supervised individual works;

(iii) clinical supervisions may be provided:

(A) through:

(I) group clinical supervision sessions with up to six supervised individuals in a group;

(II) in one-on-one sessions; or

(III) a combination of Subsections (3)(e)(iii)(A)(I) and (II); and

(B) using one of the following formats:

(I) in-person; or

(II) via electronic means that comply with state and federal laws; and

(iv) each clinical supervision session and format used will encourage clear, accurate communication that meets confidentiality standards and promotes professional growth; and

(f) address disciplinary matters including:

(i) a clinical supervisor subject to a Division disciplinary order and is no longer a Division-approved supervisor under Section R156-60e-30 shall:

(A) inform each supervised individual that the clinical supervisor is no longer a Division-approved clinical supervisor; and

(B) assist each supervised individual find alternate clinical supervision; and

(ii) a supervisor who agrees to supervise a licensee under a Division-ordered disciplinary action shall review and understand the order, follow all stipulations, and help the licensee remediate the behaviors that led to the discipline.

(3)(a) If the clinical supervisor's employer compensates the clinical supervisor for supervising a supervised individual, then the clinical supervisor may not charge the supervised individual an additional fee.

(b) If the supervised individual directly pays the clinical supervisor for the supervision services, then the clinical supervisor shall:

(i) notify the clinical supervisor's employing agency;

(ii) obtain and maintain written approval from the employing agency; and

(iii) produce the written approval to the Division upon request.

(4) If the clinical supervisor's license expires or receives formal Division discipline, then any of the supervised individual's clinical supervision hours obtained after the expiration or the discipline may only be counted toward licensure hours if approved by the Division in collaboration with the Board.

(5) If the Division receives a supervisor's written concerns about a supervised individual under Subsection (3)(d)(iii), the Division:

(a) shall provide the supervised individual an opportunity to respond;

(b) shall review all statements with the Board; and

(c) may require the supervised individual to obtain additional hours, education, or training.

R156-60e-309.1. Supervised Individual - Duties and Responsibilities.

(1) A supervised individual shall have the following duties and responsibilities:

(a) before beginning any clinical supervised training:

(i) enter a written supervision contract with the clinical supervisor that meets the requirements of Section R156-60e-307.1;

(ii) submit a signed clinical supervisor association form, provided by the Division, to the Division; and

NOTICES OF CHANGES IN PROPOSED RULES

(iii) within 30 days of initiating supervision, submit to the Division the supervision contract and a clearly defined job description that is consistent with your scope of practice;

(b) Maintain compliance and ethical standards including:

(i) maintain all required licensure;

(ii) maintain a professional relationship with the clinical supervisor ~~[where]~~ensuring that:

(A) the clinical supervisor is independent of control from the supervised individual; and

(B) the ability of the clinical supervisor to supervise and direct the practice of the supervised individual is not compromised~~[;]~~ by a relationship where the supervisor is controlled by:

(I) the supervised individual; or

(II) the supervised individual's employing agency, if the supervised individual has ownership in the employing agency;

(iii) comply with the terms of the supervision contract;

(iv) comply with the confidentiality requirements of Section 58-60-114;~~[and]~~

(v) adhere to all applicable laws, rules, standards, and ethics of the profession; and

(vi) maintain employment providing clinical mental health services at a public agency or a private clinic; and

(c) notify the Division in writing within 30 days of:

(i) the termination of a supervision contract;

(ii) a change in the supervised individual's place of employment; or

(iii) disciplinary action taken against a supervised individual at their place of employment that involves professional misconduct or unlawful conduct.

(2) A supervised individual may not count any hour practicing outside their authorized scope of practice towards licensure.

~~(2)~~ If the supervised individual's license expires or receives formal Division discipline, then any of the supervised individual's clinical supervision hours obtained after the expiration or the discipline may only be counted toward licensure hours if approved by the Division in collaboration with the Board.

R156-60e-402.1. Ongoing Professional Development - Continuing Education.

(1) Under Subsections 58-1-203(1)(g), 58-1-308(3)(b), and 58-60-102.5(5)(d), and Sections 58-60-105 and 58-60-205.5, and subject to Subsection (9), the hours of ongoing professional development requirements or continuing education requirements for each two-year renewal cycle shall:

(a) be completed by a licensed individual based on the educational degree used for licensure or the equivalent as follows:

(i) 40 hours for a master's degree or higher;

(ii) 20 hours for a bachelor's degree; or

(iii) ten hours for an associate's degree; and

(b) include:

(i) six hours of professional ethics, law, or ethics of technology; and

(ii) two hours in suicide prevention through a course that meets the requirements of Section R156-60e-302.1.

(2) A licensed individual who completes more than the required number of ongoing professional development hours during a two-year renewal cycle may carry over excess hours to the next two-year renewal cycle based on educational degree used for licensure or equivalent as follows:

(a) up to ten hours for a master's degree or higher;

(b) up to five hours for a bachelor's degree; or

(c) up to five hours for an associate's degree.

(3) Under Subsection 58-60-102.5(5)(d) and Sections 58-60-105 and 58-60-205.5, a licensed individual shall complete the ongoing professional development hours required under Subsection (1) through courses that are:

(a) approved, conducted, or under the sponsorship of one of the following:

(i) an accredited institution of higher education;

(ii) county, state, or federal agency;

(iii) professional association, or similar body, involved in clinical mental health therapy or substance use disorder treatment; or

(iv) mental health agency that provides clinical mental health services or substance use disorder treatment;

(b) completed in one of the following formats:

(i) college or university lecture and discussion, up to three ongoing professional development hours per semester hour or one and one-half hours per quarter hour;

(ii) professional conference;

(iii) lecture or instruction, up to two times per course and up to five hours;

(iv) seminar;

(v) training session;

(vi) synchronous distance learning course that is clearly documented as real-time and interactive;

(vii) asynchronous distance learning course that is not real-time or interactive, up to ten hours;

(viii) specialty certification;

(ix) certifiable clinical readings, up to ten hours;

- (x) direct clinical supervision of a licensed individual completing the experience requirements for advanced licensure, up to ten hours;
- (xi) volunteer service on a board, committee, or in a leadership role in any state, national, or international organization for the development and improvement of the licensed individual's profession up to six hours;
- (xii) volunteer service providing mental health services, up to ten hours;
- (xiii) peer case consultation, up to ten hours; or
- (xiv) peer direct observation, up to ten hours;
- (c) prepared and presented by an individual who is qualified by education, training, and experience to provide ongoing professional development;
 - (d) relevant to the licensed individual's scope of practice; and
 - (e) is verified by:
 - (i) a certificate of course completion that shall include the following:
 - (A) name of the attendee;
 - (B) name of course provider;
 - (C) name of instructor;
 - (D) date of the course;
 - (E) title of the course;
 - (F) number of course hours;
 - (G) course objectives; and
 - (H) format of professional development under Subsection (3)(b); or
 - (ii) a letter from:
 - (A) a peer who also participated; or
 - (B) an individual who oversaw the licensee's volunteer service.
 - (4) A licensed individual shall maintain adequate documentation as proof of compliance for two years after the end of the renewal cycle for which the ongoing professional development is due.
 - (5) An individual may only carry forward ongoing professional development hours completed after the renewed license was initially granted including any professional upgrade.
 - (6) Ongoing professional development hours shall be increased or decreased proportionately based on the date of licensure within the two-year renewal cycle.
 - (7) Under Section R156-1-308d, the Division may defer or waive ongoing professional development requirements.
 - (8) The Division shall randomly audit a licensed individual's ongoing professional development hours during each two-year renewal window.
 - (9) To maintain approval, Division-approved clinical supervisors shall complete an additional six hours of ongoing professional development specifically related to supervision during each two-year renewal cycle.

R156-60e-403.1. Renewal and Reinstatement of License.

- (1) Under Subsection 58-1-308(1), the renewal date for the two-year renewal cycle applicable to licenses under Title 58, Chapter 60, Mental Health Professional Practice Act, is established in Section R156-1-308a.
- (2) Under Section 58-60-117, the Division may extend a current externship license or reinstate an expired externship license for one additional three-year term if the licensed individual completes the following:
 - (a) submits an application;
 - (b) pays the application fee; and
 - (c) has attempted the profession-specific exam at least once while holding the previous extern license.
- (3) Under Sections 58-60-304, 58-60-404, and 58-60-504, the Division may reinstate an associate license for one additional three-year term if the licensed individual completes the following:
 - (a) submits an application;
 - (b) pays the application fee;
 - (c) has completed at least 40 hours of ongoing professional development under Section R156-60e-402.1 during the preceding two years;
 - (d) has attempted the specific mental health profession exam at least once while holding the previous associate license; and
 - (e) has completed at least one-half of the supervision hours required to advance licensure.
- (4) Under Subsections 58-1-203(g), 58-60-102.5(4)(d)(iii), 58-60-102.5(4)(e)(iii), and 58-60-102.5(4)(f)(iii), reinstatement procedures shall be in accordance with this section and Sections R156-1-308a through R156-1-308l, except as provided in Subsection (5).
- (5) Under Subsection 58-1-308(6)(a) and Section R156-1-308g, an applicant for reinstatement of licensure whose unencumbered license has been expired between two and five years shall, upon Division request:
 - (a) meet with the Behavioral Health Board's Qualification and Professional Development Advisory Committee to evaluate the applicant's ability to safely and competently practice within the scope for the license held; and
 - (b) if recommended by the Behavioral Health Board's Qualification and Professional Development Advisory Committee with the concurrence of the Behavioral Health Board, complete one or more of the following:

NOTICES OF CHANGES IN PROPOSED RULES

- (i) establish a plan of clinical supervision under an approved supervisor which may include up to 1,200 hours of direct client care while holding an associate's level license or CSW license before qualifying for reinstatement of full master's level licensure; or
 - (ii) complete up to 40 hours of continuing education in subjects determined by the Behavioral Health Board's Qualification and Professional Development Advisory Committee.
- (6) Under Subsections 58-1-308(5)(a) and (6)(a) and Section R156-1-308h, an applicant for reinstatement of licensure whose license was suspended, revoked, or otherwise disciplined shall, upon Division request:
- (a) meet with the Behavioral Health Board's Background and Investigations Advisory Committee to evaluate the applicant's ability to safely and competently practice within the scope for the license held; and
 - (b) if recommended by the Background and Investigations Advisory Committee with the concurrence of the Behavioral Health Board, agree to one of the following:
 - (i) a three-year probationary license with conditions set by the Behavioral Health Board; or
 - (ii) a five-year probationary license with conditions set by the Behavioral Health Board.

R156-60e-502.1. Unprofessional Conduct Affecting All Mental Health License Holders.

Under Subsection 58-60-110(2), "unprofessional conduct" includes:

- (1) using one of the following abbreviated titles without the required licensure:
 - (a) ACMHC;
 - (b) ACMHC-Extern;
 - (c) AMAC;
 - (d) AMFT;
 - (e) AMFT-Extern;
 - (f) ASUDC;
 - (g) BHC unless licensed has a behavioral health coach;
 - (h) CMHC;
 - (i) CSW;
 - (j) LCSW;
 - (k) MAC;
 - (l) MFT;
 - (m) SSW; or
 - (n) SUDC;
- (2) acting as a supervisor or accepting supervision from a supervisor without complying with or ensuring compliance with Subsections 58-60-102(3), (4), and (7) through (10), and Sections R156-60e-307.1, R156-60e-308.1, and R156-60e-309.1;
- (3) directing one's clinical supervisor to engage in a practice that would violate any statute, rule, or generally accepted professional or ethical standard of the supervisor's profession;
- (4) directing a supervised individual to engage in a practice that would violate any statute, rule, or generally accepted professional or ethical standard of the supervised individual's profession;
- (5) providing supervision without current and valid status as a Division-approved clinical supervisor;
- (6) engaging in, aiding, or abetting:
 - (a) conduct or a practice that is dishonest, deceptive, or fraudulent;
 - (b) deceptive or fraudulent billing practices;
 - (c) sexual harassment or any conduct that is exploitive or abusive concerning a student, trainee, employee, or colleague with whom the licensed individual has supervisory or management responsibility; or
 - (d) physical contact with a client when there is a risk of exploitation or potential harm to the client resulting from the contact;
- (7) engaging in a dual relationship or multiple relationships with a client or former client in violation of the standards set by the licensee's professional code of ethics as established in this rule;
- (8) knowingly engaging in a sexual activity or sexual contact with a client's relative or another individual with whom the client maintains a relationship in violation of the standards set by the licensee's professional code of ethics as established in this rule;
- (9) exploiting one of the following for personal gain:
 - (a) a client;
 - (b) a former client; or
 - (c) an individual who has a personal relationship with a client;
- (10) failing to:
 - (a) establish and maintain professional boundaries with a client or former client;
 - (b) exercise professional discretion and impartial judgment required for the performance of professional activities, duties, and functions;
 - (c) provide impartial, objective, and informed services, recommendations, or opinions concerning:
 - (i) custodial or parental rights;
 - (ii) divorce;
 - (iii) domestic relationships;

- (iv) adoption;
- (v) mental competency;
- (vi) mental health; or
- (vii) another determination concerning an individual's civil or legal rights;
- (d) maintain client records including records of assessment, treatment, progress notes, and billing information, for at least ten years from the documented termination of services to the client;
- (e) provide client records in a reasonable time upon written request of the client or the client's legal guardian;
- (f) obtain informed consent from the client or the client's legal guardian before recording or permitting a third-party observation of a client's activities or records;
- (g) protect the confidences of an individual named or identified in the client records;
- (h) follow the Model Standards of Practice for Child Custody Evaluation of the Association of Family and Conciliation Courts (AFCC) May 2006, which is incorporated by reference;
- (i) cooperate with the Division during an investigation;
- (j) obtain a thorough working knowledge of the Code of Ethics specifically related to the licensed individual's professional practice;
- (k) as a supervisor, obtain a thorough working knowledge of the Code of Ethics specifically related to any supervised individual's professional practice; or
- (l) provide notification as required under Subsection 58-60-110(1)(e) on each agency or practitioner website~~[, or if no website exists,]~~ or provide notification by paper or electronic document to each individual receiving mental health services;
- (11) when providing services remotely, failing to:
 - (a) practice according to professional standards of care in the delivery of services;
 - (b) protect the security of electronic confidential data and information; or
 - (c) appropriately store and dispose of electronic confidential data and information; or
- (12) violating:
 - (a) Section R156-60e-307.1 regarding the clinical supervision contract;
 - (b) Section R156-60e-308.1 as a clinical supervisor; or
 - (c) Section R156-60e-309.1 as a supervised individual.

R156-60e-502.2. Unprofessional Conduct Specific To Social Work Licensed Professionals.

Under Subsection 58-60-110(2), "unprofessional conduct" includes:

- (1) failing to abide by the following:
 - (a) NASW Code of Ethics as approved by the 1996 NASW Delegate Assembly and revised by the 2020 and 2021 NASW Delegate Assembly, which is incorporated by reference; and
 - (b) NASW, ASWB, CSWE, and Clinical Social Work Association (CSWA) Standards for Technology in Social Work Practice as approved by the 2017 NASW Delegate Assembly, which is incorporated by reference; or
- (2) engaging in the supervised practice of clinical mental health therapy as a licensed CSW if the licensed individual:
 - (a) has not completed a clinical practicum while obtaining a master's degree accredited by CSWE or the Canadian Association of Schools of Social Work; or
 - (b) is not in compliance with Subsection 58-60-110(1)(b) and Sections R156-60e-307.1 and R156-60e-309.1.

R156-60e-502.3. Unprofessional Conduct Specific To Marriage and Family Therapy Licensed Professionals.

Under Subsection 58-60-110(2), "unprofessional conduct" includes:

- (1) failing to abide by the AAMFT Code of Ethics, effective January 1, ~~[2015]~~2026, which is incorporated by reference; or
- (2) engaging in the supervised practice of clinical mental health therapy as a licensed AMFT or AMFT-Extern if the licensed individual:
 - (a) has not completed a clinical practicum while obtaining a master's degree accredited by the Commission on Accreditation for Marriage and Family Therapy Education (COAMFTE); or
 - (b) is not in compliance with Subsection 58-60-110(1)(b) and Sections R156-60e-307.1 and R156-60e-309.1.

R156-60e-502.4. Unprofessional Conduct Specific To Clinical Mental Health Counselor Licensed Professionals.

Under Subsection 58-60-110(2), "unprofessional conduct" includes:

- (1) failing to abide by the American Mental Health Counselors Association's ~~[ACMHC]~~AMHCA Code of Ethics, Revised 2020, which is incorporated by reference; or
- (2) engaging in the supervised practice of clinical mental health therapy as a licensed ACMHC or ACMHC-Extern if the licensed individual:
 - (a) has not completed a clinical practicum while obtaining a master's degree accredited by CHEA or the Council for Accreditation of Counseling and Related Educational Programs (CACREP); or
 - (b) is not in compliance with Subsection 58-60-110(1)(b) and Sections R156-60e-307.1 and R156-60e-309.1.

NOTICES OF CHANGES IN PROPOSED RULES

R156-60e-502.5. Unprofessional Conduct Specific To Substance Use Disorder and Master Addiction Counselor Licensed Professionals.

Under Subsection 58-60-110(2), "unprofessional conduct" includes:

- (1) failing to abide by the NAADAC/NCC AP Code of Ethics, January 1, 2021 edition, which is incorporated by reference;
- (2) engaging in the supervised practice of substance use disorder treatment as a licensed ASUDC if the licensed individual:
 - (a) has not completed a substance use disorder education program accredited by CHEA; or
 - (b) is not in compliance with Subsection 58-60-110(1)(b) and Sections R156-60e-307.1 and R156-60e-309.1; or
- (3) engaging in the supervised practice of clinical mental health or substance use disorder therapy as a licensed AMAC if the licensed individual:

- (a) has not completed a clinical practicum while obtaining a master's degree accredited by:
 - (i) CHEA; or
 - (ii) the National Addiction Studies Accreditation Commission (NASAC); or
- (b) is not in compliance with Subsection 58-60-110(1)(b) and Sections R156-60e-307.1 and R156-60e-309.1.

R156-60e-502.6. Unprofessional Conduct Specific To Behavioral Health Coach and Behavioral Health Technician Licensed Professionals.

Under Subsection 58-60-110(2), "unprofessional conduct" includes:

- (1) failing to abide by the following:
 - (a) NASW Code of Ethics as approved by the 1996 NASW Delegate Assembly and revised by the 2020 and 2021 NASW Delegate Assembly, which is incorporated by reference; and
 - (b) NASW, ASWB, CSWE, and Clinical Social Work Association (CSWA) Standards for Technology in Social Work Practice as approved by the 2017 NASW Delegate Assembly, which is incorporated by reference; or
 - (2) engaging in the supervised practice of providing mental health or substance use disorder services as a licensed behavioral health coach if the licensed individual:
 - (a) has not completed a practicum while obtaining a bachelor's degree from a regionally accredited institution of higher education;
- or
- (b) is not in compliance with Subsection 58-60-110(1)(b) and Subsections 58-60-601(4) and (6).

KEY: licensing, social worker, therapist, marriage and family therapist, counselor, mental health, clinical mental health counselor, substance use disorder counselor, master addiction counselor, behavioral health coach, behavioral health technician

Date of Last Change: 2026[2025]

Authorizing, and Implemented or Interpreted Law: 58-1-106(1)(a); 58-1-202(1)(a); 58-60-201; 58-60-301; 58-60-401; 58-60-501

NOTICE OF SUBSTANTIVE CHANGE		
TYPE OF FILING: CPR (Change in Proposed Rule)		
Rule or section number:	R432-100	Filing ID: 57644
Date of previous publication (only for CPRs):	12/01/2025	

Agency Information

1. Title catchline:	Health and Human Services, Health Care Facility Licensing	
Building:	Multi-Agency State Office Building	
Street address:	195 N 1950 W	
City, state:	Salt Lake City, UT	
Mailing address:	PO Box 142003	
City, state and zip:	Salt Lake City, UT 84114-2003	
Contact persons:		
Name:	Phone:	Email:
Kamille Sheikh	385-227-1290	kamillesheikh@utah.gov
Mariah Noble	385-214-1150	mariahnoble@utah.gov
Please address questions regarding information on this notice to the persons listed above.		

General Information

2. Rule or section catchline:	
R432-100. General Hospital Standards	
3. Are any changes in this filing because of state legislative action?	Changes are because of legislative action.
If yes, any bill number and session:	HB 152 (2025 General Session)
4. Purpose of the new rule or reason for the change:	
Based on a review of statutory requirement updated through HB 152 of the 2025 General Session, Division of Licensing and Background Checks leadership determined it necessary to add language to this rule through a change in proposed rule (CPR) to clarify the required clinical laboratory test and analyses for any satellite emergency department located in any county of first or second class, including Cache, Davis, Salt Lake, Utah, Washington, and Weber counties, and operating under a general hospital license.	
5. Summary of the new rule or change:	
This CPR adds the on-site clinical laboratory tests and analyses required for any satellite emergency department in a county of first or second class under Subsection R432-100-17(1)(e) and specifies related requirements in Subsections R432-100-17(1)(f) and (1)(g).	
(EDITOR'S NOTE: The original proposed amendment upon which this change in proposed rule (CPR) was based was published in the December 1, 2025, issue of the Utah State Bulletin, on page 116. Underlining in the rule below indicates text that has been added since the publication of the proposed rule mentioned above; strike-out indicates text that has been deleted. You must view the CPR and the proposed amendment together to understand all of the changes that will be enforceable should the agency make this rule effective.)	

Fiscal Information

6. Provide an estimate and written explanation of the aggregate anticipated cost or savings to:	
A. State budget:	
This CPR is not anticipated to result in any measurable cost or saving to the state budget, as the Office of Licensing (OL), under the Department of Health and Human Services, already regulates satellite emergency departments located in any county of first or second class and operating under a general hospital license.	
The CPR does not add any new procedure for any licensing review by OL and adds details about the clinical laboratory tests and analyses required for any satellite emergency department, which will provide OL staff, licensees, and the public with clarity about these requirements.	
Fiscal impacts associated with HB 152 of the 2025 General Session are captured in that bill's fiscal note, which can be viewed at https://pf.utleg.gov/public-web/sessions/2025GS/fiscal-notes/HB0152S01.fn.pdf .	
B. Local governments:	
This CPR is not anticipated to impact local governments' revenues or expenditures because satellite emergency departments located in any county of first or second class and operating under a general hospital license are regulated by OL for basic health and safety requirements and not local governments.	
There will be no change in local business licensing or any other item with which local government is involved.	
This CPR does not add any new procedure for any licensing review by OL and adds details about the required clinical laboratory tests and analyses for any satellite emergency department, which will provide licensees and the public with clarity about these requirements.	

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

This CPR is not anticipated to result in a cost or savings for small businesses because satellite emergency departments located in any county of first or second class and operating under a general hospital license are already regulated by OL for basic health and safety requirements.

The CPR does not add any new procedure for any licensing review by OL and adds details about the clinical laboratory tests and analyses required for any satellite emergency department, which will provide licensees and the public with clarity about these requirements.

Fiscal impacts associated with HB 152 of the 2025 General Session are captured in that bill's fiscal note, which can be viewed at <https://pf.utleg.gov/public-web/sessions/2025GS/fiscal-notes/HB0152S01.fn.pdf>.

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

This CPR is not anticipated to result in a cost or savings for non-small businesses because satellite emergency departments located in any county of first or second class and operating under a general hospital license are already regulated by OL for basic health and safety requirements.

The CPR does not add any new procedure for any licensing review by OL and adds details about the clinical laboratory tests and analyses required for any satellite emergency department, which will provide licensees and the public with clarity about these requirements.

Fiscal impacts associated with HB 152 of the 2025 General Session are captured in that bill's fiscal note, which can be viewed at <https://pf.utleg.gov/public-web/sessions/2025GS/fiscal-notes/HB0152S01.fn.pdf>.

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 CPR is not anticipated to result in a cost or savings for persons other than small businesses, non-small businesses, state, or local government entities, including nonprofit entities, because satellite emergency departments located in any county of first or second class and operating under a general hospital license are already regulated by OL for basic health and safety requirements.

The CPR does not add any new procedure for any licensing review by OL and adds details about the clinical laboratory tests and analyses for any satellite emergency department, which will provide licensees and the public with clarity about these requirements.

Fiscal impacts associated with HB 152 of the 2025 General Session are captured in that bill's fiscal note, which can be viewed at <https://pf.utleg.gov/public-web/sessions/2025GS/fiscal-notes/HB0152S01.fn.pdf>.

F. Compliance costs for affected persons:

Affected persons would be the small businesses, non-small businesses, and persons other than small businesses, non-small businesses, state, or local government entities, including nonprofit entities, operating satellite emergency departments located in any county of first or second class, under a general hospital license.

Additionally, OL, as the regulatory body for health and safety standards for general hospital licensees operating satellite emergency departments, is affected by the CPR.

Satellite emergency departments under a general hospital license are already regulated by OL for basic health and safety standards and there is no anticipated compliance cost associated with this CPR to affected persons.

The CPR does not add any new procedure for any license review by OL and adds details about the clinical laboratory tests and analyses required for any satellite emergency department, which will provide OL staff, licensees, and the public with clarity about these requirements.

G. Regulatory Impact Summary Table (This table includes only fiscal impacts the agency was able to measure. If the agency could not estimate an impact, it is excluded from this table but described in boxes A through F.)

Regulatory Impact Summary Table					
Fiscal Cost	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
Total Fiscal Cost	\$0	\$0	\$0	\$0	\$0
Fiscal Benefits	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
Total Fiscal Benefits	\$0	\$0	\$0	\$0	\$0
Net Fiscal Benefits	\$0	\$0	\$0	\$0	\$0

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 S. Gruber, has reviewed and approved this regulatory impact analysis.

Citation Information

7. 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-2-202	Section 26B-2-203	
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Public Notice Information

9. The public may submit written or oral comments to the agency identified in box 1.

A. Comments will be accepted until:	05/15/2026
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10. This rule change MAY become effective on:	05/22/2026
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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

Agency head or designee and title:	Tracy S. Gruber, Executive Director	Date:	03/29/2026
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R432. Health and Human Services, Health Care Facility Licensing.

R432-100. General Hospital Standards.

R432-100-1. Authority and Purpose.

- (1) Sections 26B-2-202 and 26B-2-203 authorize this rule.
- (2)(a) This rule promotes public health and welfare through the establishment and enforcement of licensure standards.
- (b) This rule sets standards for the construction and operation of a general hospital. The standards of patient care apply to inpatient, outpatient, and satellite services.

R432-100-2. Definitions.

Terms used in this rule are defined in Rule R432-1. Additionally:

NOTICES OF CHANGES IN PROPOSED RULES

- (1) "Caregiver" means an individual designated by a patient of the hospital to assist with continuing care that can be given in the patient's residence after discharge.
- (2) "County of the first class or second class" means the same as described in Section 17-50-501.
- (3) "Hospital blood services" are defined as follows:
 - (a) "Blood bank" means a facility that combines the functions of a donor center and transfusion service within the same facility;
 - (b) "Donor center" means a facility that procures, prepares, processes, stores, and transports blood and blood components; or
 - (c) "Transfusion service" means a facility that stores, determines compatibility, transfuses blood and blood components, and monitors transfused patients for any adverse effect.
- (4) "Satellite emergency department" means the same as defined in Section 26B-2-203.
- (5) "Swing-bed" means a hospital room that can switch from inpatient acute care status to skilled care status.
- (6) "Type I Acute or Critical Access Hospital" means a hospital that offers comprehensive emergency care 24 hours a day in-house, with at least one physician experienced in emergency care on staff in the emergency care area.
- (7) "Type II Acute or Critical Access Hospital" means a hospital that offers emergency care 24 hours a day, with at least one physician experienced in emergency care on duty in the emergency care area, and with specialty consultation available within 30 minutes by members of the medical staff.
- (8) "Type III Acute or Critical Access Hospital" means a hospital that offers emergency care 24 hours a day, with at least one physician available to the emergency care area within 30 minutes through a medical staff call roster.
- (9) "Type IV Acute or Critical Access Hospital" means a hospital that offers emergency first aid treatment to patients, staff, and visitors; and to persons who may be unaware of, or unable to, immediately reach services in other facilities.

R432-100-3. Construction, Facilities, and Equipment Standards.

A licensee shall comply with Rule R432-4 when constructing and maintaining a general hospital and satellite services.

R432-100-4. Hospital Swing-Bed and Transitional Care Units.

- (1) A licensee that operates a hospital with designated swing-bed units or transitional care units shall comply with this section.
- (2) In addition to this rule, a licensee that operates designated hospital swing-beds shall comply with:
 - (a) Section R432-150-4, Scope of Services;
 - (b) Section R432-150-5, Adult Day Care Services;
 - (c) Section R432-150-10, Quality Assurance;
 - (d) Section R432-150-11, Resident Rights;
 - (e) Section R432-150-12, Resident Assessment;
 - (f) Section R432-150-13, Restraint Policy;
 - (g) Section R432-150-14, Quality of Care;
 - (h) Section R432-150-15, Physician Services;
 - (i) Section R432-150-16, Laboratory Services;
 - (j) Section R432-150-17, Pharmacy Services;
 - (k) Section R432-150-18, Recreation Therapy;
 - (l) Section R432-150-20, Admission, Transfer, and Discharge; and
 - (m) Section R432-150-22, Food Services.
- (3) A transitional care unit requires licensure as a nursing care facility under a separate licensing category and the licensee shall conform to the requirements of Rule R432-150.

R432-100-5. Governing Body.

- (1) Each licensee shall have a governing body referred to in this rule as the board.
- (2) The board members are legally responsible for the conduct of the hospital staff. The board members are also responsible for the appointment of the medical staff and an administrator assigned to carry out the requirements of Section R432-100-6.
- (3) The licensee shall ensure that the board is organized in accordance with the articles of incorporation or bylaws that specify:
 - (a) the board's functional organization, including any standing committee;
 - (b) the duties and responsibilities of each board member;
 - (c) the duties and responsibilities of each officer and any standing committee;
 - (d) the frequency of meetings;
 - (e) the mechanism for formal approval of the organization, bylaws, rules of the medical staff, and hospital departments;
 - (f) the method for election or appointment to the board;
 - (g) the methods established by the board for holding such individuals responsible;
 - (h) the methods for removal of board members and officers;
 - (i) the numbers or percentages of members that constitute a quorum for board meetings;
 - (j) the size of the board;
 - (k) the terms of office of the board; and
 - (l) to who responsibility for operation and maintenance of the hospital, including evaluation of hospital practices, may be delegated.

- (4) The board members shall:
 - (a) meet at least quarterly; and
 - (b) keep written minutes of meetings and actions and distribute copies to members of the board.

(5)(a) The board members shall employ a competent administrator and vest this person with authority and responsibility for carrying out board policies.

(b) The board shall define, in writing, the administrator's qualifications, responsibilities, authority, and accountability.

- (6) The board, through officers, committees, medical, and other staff, shall:
 - (a) appoint members of the medical staff and delineate clinical privileges;
 - (b) approve organization, bylaws, and rules of medical staff and hospital departments;
 - (c) develop and implement a long-range plan; and
 - (d) maintain a list of the scope and nature of any contracted services.

R432-100-6. Administrator.

(1) The administrator shall establish and maintain an organizational structure for the hospital indicating the authority and responsibility of various positions, departments, and services within the hospital.

(2) The administrator shall:

- (a) advise the board in the formulation of hospital policies and procedures;
- (b) appoint a member of the staff to oversee compliance with the requirements of the Utah Anatomical Gift Act;
- (c) be the direct representative of the board in the management of the hospital;
- (d) designate, in writing, a person to act in the administrator's absence;
- (e) ensure that each applicant for medical and professional staff membership is oriented to agency or hospital bylaws and shall agree in writing to abide by each condition;

(f) ensure that patient billing practices comply with Section 26B-2-219;

(g) ensure that policies and procedures are implemented and followed;

(h) function as liaison between the board, the medical staff, the nursing staff, and departments of the hospital;

(i) maintain a written record of any business transactions and patient services provided in the hospital and submit reports as requested to the board;

(j) review and revise policies and procedures to reflect current hospital practice; and

(k) submit to OL, upon receipt from any accrediting organization, copies of each:

- (i) certificate;
- (ii) survey report; and
- (iii) recommendation of any survey result.

R432-100-7. Medical and Professional Staff.

(1) Each licensee shall have an organized medical and professional staff that operates under bylaws approved by the board.

(2) The medical and professional staff shall advise and be accountable to the board for the quality of medical care provided to patients.

(3)(a) The medical and professional staff shall adopt bylaws and policies and procedures to establish and maintain a qualified medical and professional staff, including current licensure, relevant training and experience, and competency to perform the privileges requested.

(b) The bylaws shall address:

- (i) a fair hearing and appeal process;
- (ii) temporary credentialing and privileging of staff in emergency or disaster situations;
- (iii) the appointment and re-appointment process;
- (iv) the delineation of privileges;
- (v) the necessary qualifications for membership; and
- (vi) the participation and documentation of continuing education.

(4)(a) A fully qualified physician who is licensed by the Department of Commerce shall supervise and direct the medical care of each person admitted to the hospital.

(b) During an emergency or disaster situation, a member of the credentialed and privileged staff shall supervise temporary credentialed practitioners.

(5) The licensee may not deny an applicant that is a podiatrist or psychologist solely on the grounds that the podiatrist or psychologist is not licensed to practice medicine under Title 58, Chapter 67, Utah Medical Practice Act or Title 58, Chapter 68, Utah Osteopathic Medical Practice Act.

(6) Membership and privileges may not be denied on any ground that is otherwise prohibited by law.

(7) The licensee shall orient each applicant for medical and professional staff membership to the bylaws and ensure the applicant agrees, in writing, to abide by each condition.

(8) The medical and professional staff shall review each applicant and grant privileges based on the scope of the applicant's license and abilities.

NOTICES OF CHANGES IN PROPOSED RULES

(9) The medical and professional staff shall review appointments and re-appointments to the medical and professional staff at least every three years.

(10) During an emergency or disaster situation, the licensee shall ensure that each temporary practitioner is oriented to the temporary practitioner assigned area.

R432-100-8. Personnel Management Service.

(1) The licensee shall organize the personnel management system to ensure personnel are competent to perform respective duties, services, and functions.

(2) The licensee shall ensure there are written policies, procedures, and performance standards that include:

(a)(i) direct care staff having current cardiopulmonary resuscitation (CPR) certification, which requires:

(ii) an in-person course, to include skills testing and evaluation on-site with a licensed instructor;

(b) direct care staff receiving continued competency training in current patient care practices;

(c) each employee receiving unit-specific training;

(d) employee health screening, including tuberculosis skin testing:

(i) within two weeks of:

(A) development of symptoms of tuberculosis;

(B) initial hiring; or

(C) suspected exposure to a person with active tuberculosis;

(ii) done by the Mantoux method or another Food and Drug Administration (FDA)-approved in vitro serologic test and follow-up for tuberculosis in accordance with Rule R388-804; and

(iii) which may be exempt for an employee with a known positive reaction to skin testing;

(e) Occupational Safety and Health Administration regulations regarding bloodborne pathogens being implemented and followed;

(f) job descriptions for each position or employee; and

(g) periodic employee performance evaluations.

(3) The licensee shall ensure that medical and professional personnel are registered, certified, or licensed as required by the Department of Commerce within 45 days of employment.

(4) The licensee shall maintain a copy of each current certificate, license, or registration available for department review.

(5) The licensee shall provide annual documented in-service training for direct care and housekeeping staff that addresses the requirements for reporting abuse, neglect, or exploitation of children or adults.

(6)(a) The licensee may utilize a volunteer in the daily activities of the hospital but a volunteer may not be included in the hospital staffing plan in lieu of hospital employees.

(b) The licensee shall screen and supervise a volunteer according to hospital policy.

(c) The licensee shall ensure that a volunteer is familiar with hospital volunteer policies, including patient rights and hospital emergency procedures.

(7) If the licensee participates in a professional graduate education program, the licensee shall ensure that there are policies and procedures specifying the patient care responsibilities and supervision of the graduate education program participants.

R432-100-9. Quality Improvement Plan.

(1) The board members shall ensure that there is a well-defined quality improvement plan designed to improve patient care.

(2) The plan shall:

(a) be consistent with the delivery of patient care;

(b) be implemented and include a system for the collection of indicator data;

(c) ensure that incident reports are available for department review;

(d) implement actions designed to eliminate identified problems and improve patient care;

(e) include a system for assessing identified problems, concerns, and opportunities for improvement of patient care; and

(f) include an incident reporting system to identify problems, concerns, and opportunities for improvement of patient care.

(3)(a) The licensee shall maintain a quality improvement committee.

(b) The quality improvement committee shall maintain written minutes documenting any corrective action and result and make these minutes available for department review.

(4) The quality improvement committee shall report findings and concerns, at least quarterly, to the board, the medical staff, and the administrator.

(5) The licensee shall ensure that infection reporting is integrated into the quality improvement plan and is reported to the department in accordance with Rule R386-702.

R432-100-10. Infection Control.

(1) The licensee shall implement a hospital-wide infection control program that includes:

(a) a system for reporting, evaluating, and investigating infections;

(b) an employee health program;

(c) definitions of nosocomial infections;

- (d) documented in-service education for departments and services related to infection control;
 - (e) laboratory services;
 - (f) methods for isolation depending on the medical condition involved;
 - (g) orientation of new employees;
 - (h) preventative, surveillance, and control procedures; and
 - (i) review and evaluation of aseptic, isolation, and sanitation techniques.
- (2) The licensee shall incorporate infection control reporting data into the hospital quality improvement plan.
- (3) The licensee shall ensure that:
- (a) reuse data is incorporated into the hospital infection control identification and reporting processes;
 - (b) reuse data is incorporated into the quality improvement plan;
 - (c) single-use items may be reused according to hospital policy;
 - (d) there are specific policies and procedures for each type of reusable item;
 - (e) there are written infection control policies and procedures for each area of the hospital, including requirements dictated by the physical layout, personnel, and equipment involved; and
 - (f) there are written policies for the selection, storage, handling, use, and disposition of disposable or reusable items.

R432-100-11. Patient Rights.

- (1) The licensee shall inform each patient during admission of patient rights and support the exercise of the patient's right to:
- (a) access medical records and purchase, at a cost not to exceed the community standard, photocopies of that patient's record;
 - (b) be examined and treated in surroundings designed to give visual and auditory privacy;
 - (c) be free from mental and physical abuse and from chemical and, except in emergencies, physical restraints, except as authorized in writing by a licensed practitioner for a specified and limited period or when necessary to protect the patient from self-injury or from injuring another;
 - (d) be fully informed of that patient's medical health status in a language the patient can understand;
 - (e) express any complaint regarding the care received and to have that complaint resolved when possible;
 - (f) formulate an advance health care directive in accordance with the Title 75A, Chapter 3, Health Care Decisions;
 - (g) participate in the decision-making process in managing that patient's health care with the patient's physician, or to have a designated representative involved;
 - (h) refuse to participate in experimental treatment or research;
 - (i) refuse treatment;
 - (j) reasonable access to care; and
 - (k) uniform, considerate, and respectful care.
- (2)(a) The licensee shall establish a policy and inform patients and legal representatives regarding the withholding of resuscitative services and the forgoing or withdrawing of life-sustaining treatment and end-of-life care.
- (b) The licensee shall ensure the policy is consistent with Title 75A, Chapter 3, Health Care Decisions.

R432-100-12. Patient Designated Caregiver.

- (1) The licensee shall give a patient admitted to the hospital the opportunity to designate a caregiver to assist the patient with continuing care after discharge from the hospital.
- (a) The licensee shall document the designated caregiver in the patient record and include contact information.
 - (b) If the patient declines to designate a caregiver, the licensee shall document the patient's choice in the medical record.
- (2) The licensee shall notify the designated caregiver as soon as practicable before:
- (a) the patient is discharged back to the patient's own residence; or
 - (b) the patient is transferred to another health facility.
- (3) The licensee shall document each date and time of any attempt to contact the designated caregiver in the patient record.
- (4) If the licensee cannot contact the designated caregiver when changes occur, the lack of contact may not interfere with, delay, or otherwise affect the medical care provided to the patient or the transfer or discharge of the patient.
- (5) The patient may give written consent to allow the licensee to release medical information to the designated caregiver, pursuant to the hospital's established procedures for the release of personal health information.
- (6) Before the patient is discharged, the licensee shall provide a written discharge plan for continuing care needs to the patient and designated caregiver, that shall include:
- (a) a description of continuing care tasks that the patient requires, in a culturally competent manner;
 - (b) contact information for any other health care resources necessary to meet the patient's needs; and
 - (c) the name and contact information of the designated caregiver and relation to the patient.
- (7) Before the patient is discharged, the licensee shall provide the designated caregiver with an opportunity for instruction in continuing care tasks outlined in the discharge plan, that shall include:
- (a) demonstration of the continuing care tasks by hospital personnel;
 - (b) education and counseling about medications, including dosing and proper use of delivery devices; and
 - (c) opportunity for the patient and designated caregiver to ask questions and receive answers regarding the continuing care tasks.

NOTICES OF CHANGES IN PROPOSED RULES

(8) The licensee shall document the instruction given to the patient and designated caregiver in the patient record, to include the date, time, and contents of the instructions.

R432-100-13. Nursing Care Services.

- (1)(a) The licensee shall ensure that there is an organized nursing department that is integrated with other departments and services.
- (b) The licensee shall ensure the chief nursing officer of the nursing department is a registered nurse with demonstrated ability in nursing practice and administration.
- (c) The chief nursing officer shall approve the nursing policies and procedures, nursing standards of patient care, and standards of nursing practice.
- (d) The licensee shall ensure a registered nurse is designated and authorized to act in the chief nursing officer's absence.
- (e) Nursing tasks may be delegated pursuant to Section R156-31b-701a.
- (2) The licensee shall ensure qualified registered nurses are on duty 24 hours a day to give patients nursing care that requires the judgment and special skills of a registered nurse.
- (3) The nursing department shall develop and maintain a system for determining staffing requirements for nursing care on the basis of demonstrated patient need, intervention priority for care, patient load, and acuity levels.
- (4)(a) The licensee shall ensure nursing care is documented for each patient from the time of admission through discharge.
- (b) A registered nurse shall document each patient's nursing care and coordinate interdisciplinary care.
- (c) The licensee shall ensure that nursing care documentation includes:
 - (i) clinical diagnoses;
 - (ii) intervention identified to meet the patient's needs;
 - (iii) nursing care provided and the patient's response;
 - (iv) the ability of the patient, family, or designated caregiver to manage the continued care after discharge;
 - (v) the assessments of each patient's needs; and
 - (vi) the outcome of the care provided.
- (d) Before discharge, each patient shall receive written instructions for any follow-up care or treatment.

R432-100-14. Critical Care Unit.

- (1) A licensee that provides a critical care unit shall comply with the requirements of this section. The scope of services as delineated in hospital policy and board approval shall dictate the medical direction for the unit.
- (2) A designated, qualified, registered nurse manager with relevant education, training, and experience in critical care shall provide critical care unit nursing direction. The nurse manager shall:
 - (a) assure that a registered nurse who has advanced life support certification is on duty and present in the unit 24 hours a day;
 - (b) coordinate the care provided by any nursing service personnel in the critical care unit; and
 - (c) have administrative responsibility for the critical care unit.
- (3) The licensee shall ensure that each critical care unit is designed and equipped to facilitate the safe and effective care of the patient population served and make equipment and supplies available to the unit as determined by hospital policy in accordance with the needs of the patients.
- (4)(a) The licensee shall ensure that an emergency cart is readily available to the unit and contains appropriate drugs and equipment according to hospital policy.
- (b) The nursing manager shall check the cart, or the cart locking mechanism, every shift and after each use to assure that items required for immediate patient care are in place in the cart and in usable condition.
- (5) The licensee shall ensure that the following support services are immediately available to the critical care unit on a 24-hour basis:
 - (a) blood bank or supply;
 - (b) clinical laboratory; and
 - (c) radiology services.
- (6) If the licensee provides dialysis services, the dialysis services shall comply with:
 - (a) Section R432-650-7; and
 - (b) Section R432-650-12.

R432-100-15. Surgical Services.

- (1)(a) The licensee shall integrate surgical services provided by the hospital with other departments or services of the hospital and specify in writing the relationship, objective, and scope of each surgical service.
- (b) A person appointed and authorized by the administrator shall provide administrative direction of surgical services.
- (c) A member of the medical staff shall provide medical direction of surgical services.
- (d) A qualified registered nurse shall supervise the provision of surgical nursing care.
- (e) A qualified registered nurse shall direct and supervise the operating room suites. The operating room suites supervisor shall have authority and responsibility for:
 - (i) assuring that the planned procedure is within the scope of privileges granted to the physician;
 - (ii) maintaining the operating room register; and

- (iii) other administrative functions, including serving on patient care committees.
- (f) The licensee shall establish a policy governing the use of obstetrical delivery and operating rooms to ensure that any patient with parturition imminent, or with an obstetrical emergency requiring immediate medical intervention to preserve the health and life of the parent or the infant, is given priority over other obstetrical and non-emergent surgical procedures.
- (g) A qualified surgical assistant shall assist as needed in operations in accordance with hospital bylaws.
- (h) A surgical technician or licensed practical nurse may serve as a scrub nurse under the direct supervision of a registered nurse but may not function as a circulation nurse in the operating rooms, unless the scrub nurse is a registered nurse.
- (i)(i) An outpatient surgical patient may not be routinely admitted to the hospital as an inpatient.
- (ii) The licensee shall complete a systematic review process to evaluate patients who require hospitalization after outpatient surgery.
- (2) The licensee shall establish, control and consistently monitor a safe operating room environment that ensures:
 - (a) surgical equipment, including suction facilities and instruments, is provided and maintained in good condition to assure safe and aseptic treatment of surgical cases;
 - (b) the following equipment shall be available to the operating suite:
 - (i) a call-in system;
 - (ii) a cardiac monitor;
 - (iii) a defibrillator;
 - (iv) a ventilation support system;
 - (v) an aspirator; and
 - (vi) equipment for CPR;
 - (c) there is a scavenging system for evacuation of anesthetic waste gasses; and
 - (d) traffic in and out of the operating room is controlled and there is no through traffic.
- (3) The administration of anesthetics shall conform to the requirements of Section R432-100-16.
- (4) Removal of surgical specimens shall conform with the requirements of Section R432-100-23.

R432-100-16. Anesthesia Services.

- (1) The licensee shall provide facilities and equipment for the administration of anesthesia commensurate with the clinical and surgical procedures planned for the institution on a 24-hour basis.
- (2) The hospital administrator shall appoint and authorize an individual to provide administrative direction of anesthesia services.
- (3) A member of the medical staff shall provide the medical direction of anesthesia services.
- (4) A member of the medical staff, including an anesthesiologist, other qualified physician, dentist, oral surgeon, or certified registered nurse anesthetist, shall provide anesthesia care within the scope of that member's practice and license.
- (5) A qualified physician, dentist, or oral surgeon shall have documented training that includes the equivalent of 40 days preceptorship with an anesthesiologist and be able to perform at least:
 - (a) any procedure commonly used to make the patient insensate to pain during the performance of surgical, obstetrical, and other pain-producing clinical procedures;
 - (b) life support functions during the administration of anesthesia, including induction and intubation procedures; and
 - (c) pre-anesthesia and post-anesthesia management of the patient.
- (6) The medical staff shall clearly define the responsibilities and privileges of the person administering anesthesia.
- (7) The medical staff shall inform both the patient and the operating surgeon before surgery of who will be administering anesthesia.
- (8) A Medicaid certified hospital licensee shall comply with the requirements of 42 CFR 482.52(a) (2007).
- (9) The licensee shall prohibit the use of flammable anesthetic agents for anesthesia or for the pre-operative preparation of the surgical field.
- (10) The licensee shall ensure that anesthetic equipment is inspected and tested by the person administering anesthesia before use in accordance with hospital policy.

R432-100-17. Emergency Care Service.

- (1)(a) Each licensee shall self-evaluate and classify to show capability in providing emergency care. Type I, II, or III categories represent acute care hospitals and critical access hospitals, and Type IV category represents specialty hospitals.
- (b) A Type I acute or critical access hospital licensee shall provide in-hospital support by members of the medical staff for:
 - (i) anesthesia services;
 - (ii) medical;
 - (iii) obstetric;
 - (iv) orthopedic;
 - (v) pediatric; and
 - (vi) surgical.
- (c) The licensee shall ensure specialty consultation is available within 30 minutes, or two-way voice communication is available for the initial consultation.
- (d) A Type III licensee shall ensure that specialty consultation is available by request of the attending medical staff member by transfer to a Type I or Type II hospital where care can be provided.

NOTICES OF CHANGES IN PROPOSED RULES

- (e) A general hospital licensee operating a satellite emergency department in a county of first or second class shall:
 - (i) comply with Section 26B-2-203;~~and~~
 - (ii) submit to the department any initial and renewal application and applicable fee; and
 - (iii) have the capability to conduct the following clinical laboratory tests and analyses available on-site during hours of operation:
 - (A) core blood panels;
 - (B) critical care and cardiac marker tests;
 - (C) point-of-care tests (POCTs); and
 - (D) specialized emergency analyses.
 - (f) The licensee shall ensure clinical laboratory services are immediately available to meet the emergency diagnostic and stabilizing needs of any patient presenting to the satellite emergency department in a county of first or second class.
 - (g) The licensee shall develop, implement, and maintain a written policy, approved by the medical staff and governing body, that identifies the specific laboratory tests and analyses to be performed at the satellite emergency department in a county of first or second class, including:
 - (i) a list of emergency laboratory tests available at the facility;
 - (ii) the required turnaround time for any critical laboratory result; and
 - (iii) any protocol for obtaining an emergency test not performed on-site.
- (2)(a) The licensee shall organize and staff the emergency service with qualified individuals based on the defined capability of the hospital.
 - (b) An individual appointed and authorized by the hospital administrator shall direct the emergency services.
 - (c)(i) One or more members of the medical staff shall define in writing and provide medical direction of emergency services.
 - (ii) The medical staff shall provide back-up and on-call coverage for emergency services and as needed for emergency specialty services.
 - (d) A licensed practitioner is responsible for the evaluation and treatment of a patient who goes to or is brought to the emergency care area including:
 - (i) an appropriate medical screening examination;
 - (ii) if necessary for definitive treatment, an appropriate transfer to another medical facility that has agreed to accept the patient for care; and
 - (iii) stabilizing treatment.
 - (e) Trained personnel using guidelines by the emergency room director and approved by the medical staff may determine the priority that a physician sees a person seeking emergency care.
 - (f) The licensee shall post rosters designating medical staff members on duty or on-call for primary coverage and specialty consultation in the emergency care area.
 - (g) A designated registered nurse who is qualified by relevant training, experience, and current competence in emergency care shall supervise the care provided by nursing service personnel in the department, including that:
 - (i) the emergency nurse supervisor shall ensure that there is enough nursing service personnel for the types and volume of patients served;
 - (ii) the emergency nurse supervisor shall participate in internal committee activities concerned with the emergency service; and
 - (iii) Type I and II emergency department licensees shall have at least one registered nurse with advanced cardiac life support certification, and enough other nursing staff assigned and on duty within the emergency care area.
 - (h) The licensee shall ensure that the emergency service is integrated with other departments in the hospital.
 - (i) The licensee shall provide clinical laboratory services with the capability of performing any routine studies and standard analyses of blood, urine, and other body fluids.
 - (j) The licensee shall ensure that a supply of blood is available 24 hours a day.
 - (k) The licensee shall ensure that diagnostic radiology services is available 24 hours a day.
 - (l) The licensee shall define, in writing, the duties and responsibilities of personnel, including physicians and nurses, providing care within the emergency service area.
- (3)(a) Each licensee shall define the scope of emergency services in writing and implement a plan for emergency care, based on community needs and on the capabilities of the hospital.
 - (b) Each licensee shall comply with federal anti-dumping regulations as defined in 19 CFR 351.101 (1998).
 - (c) The licensee shall define the role of the emergency service in the hospital's disaster plans.
 - (d) Each licensee shall have a communication system that permits instant contact with law enforcement agencies, rescue squads, ambulance services, and other emergency services within the community.
 - (e) The licensee shall have emergency department policies and protocols that address:
 - (i) the care, security, and control of incarcerated individuals or people to be detained for police or protective custody;
 - (ii) handling of hazardous materials and contaminated patients;
 - (iii) providing care to an unemancipated minor not accompanied by parent or guardian, or to an unaccompanied unconscious patient;
 - (iv) reporting of persons dead-on-arrival to the proper authorities including the legal requirements for the collection and preservation of evidence; and
 - (v) the evaluation and handling of alleged or suspected child or adult abuse cases.

(f) The licensee shall develop criteria to alert emergency department and service personnel to possible child or adult abuse. The criteria shall address:

- (i) suspected domestic abuse of elders, spouses, partners, and children;
- (ii) suspected physical assault;
- (iii) suspected rape or sexual molestation;
- (iv) the collection, retention, and safeguarding of specimens, photographs, and other evidentiary materials; and
- (v) visual and auditory privacy during examination and consultation of patients.

(g) The licensee shall make a list available in the emergency department that outlines private and public community agencies and resources that provide, arrange, evaluate, and care for the victims of abuse.

(4) The licensee shall make reasonable and timely efforts to contact the guardian, parents, or next of kin of any unaccompanied minor, or any unaccompanied unconscious patient admitted to the emergency department.

R432-100-18. Perinatal Services.

(1)(a) Each licensee shall designate its capability to provide perinatal, antepartum, labor, delivery, postpartum, and nursery care in accordance with Level I basic, Level II specialty, or Level III sub-specialty or tertiary care.

(b) A qualified member of the hospital staff shall provide administrative, medical and nursing direction, and oversight for perinatal services according to each hospital's designated level of care.

(c) The licensee shall ensure a qualified registered nurse is immediately available 24 hours a day with enough trained competent staff to meet the designated level.

(d) The licensee shall ensure support personnel are available to the perinatal care service according to each hospital's designated level of care.

(2) Each licensee shall establish and implement security protocols for perinatal patients.

(3) The perinatal department shall include facilities and equipment for antepartum, labor and delivery, nursery, postpartum, and optional birthing rooms.

(4) The licensee shall ensure that perinatal areas are located and arranged to avoid non-related traffic to and from other areas.

(5)(a) The licensee shall isolate patients with infections or other communicable conditions.

(b) The licensee may not use maternity rooms for patients other than maternity patients.

(6) The licensee shall have at least one surgical suite for operative delivery.

(7) The licensee shall maintain and make immediately available, equipment and supplies for the parent and newborn, including:

(a) a clock capable of showing seconds;

(b) a device to assess fetal heart rate;

(c) a newborn warming unit with temperature controls that comply with Underwriters' Laboratories requirements. The unit shall have capability for administering oxygen and suctioning;

(d) an adjustable examination light;

(e) emergency medications, intravenous fluids, and related supplies and equipment;

(f) equipment to monitor and maintain the optimum body temperature of the newborn;

(g) furnishings suitable for labor, birth, and recovery;

(h) mechanical suction and bulb suction;

(i) oxygen with flow meters and masks or equivalent; and

(j) resuscitation equipment.

(8) The licensee shall maintain a delivery room record keeping system for cross-referencing information with other departments.

(9) If birthing rooms are provided, the licensee shall equip them in accordance with this section.

(10) The licensee shall ensure that the nursery includes facilities and equipment according to its designated level of care, including an individual bassinet for each infant, with space between bassinets as follows:

(a) Level I Basic: Full Term or Well Baby Nursery: 24 inches between bassinets;

(b) Level II Specialty: Continuous Care Nursery: four feet between bassinets; or

(c) Level III Sub-specialty: Newborn Intensive Care Nursery: four feet between bassinets.

(11) The licensee shall ensure the availability of the following equipment and supplies:

(a) a covered soiled-diaper container with removable lining;

(b) a linen hamper with removable bag for soiled linen other than diapers;

(c) a newborn warming unit with temperature controls that comply with Underwriters' Laboratories requirements;

(d) a supply of medication immediately available for emergencies;

(e) a wall thermometer;

(f) an individual thermometer, or one with disposable tips, for each infant;

(g) an oxygen concentration monitoring device;

(h) accurate scales; and

(i) oxygen, oxygen equipment, and suction equipment.

(12) The licensee shall maintain temperature between 70-80 degrees Fahrenheit in the nursery area.

NOTICES OF CHANGES IN PROPOSED RULES

(13) The licensee shall make infant formula storage space available that conforms to the manufacturer's recommendations. Only single-use bottles may be used for newborn feeding.

(14) The licensee shall provide a furnished suspect nursery or isolation area that has a separate hand washing facility and equipment and supplies to be used for any infant who:

- (a) has a communicable disease;
- (b) is delivered of an ill parent infected with a communicable disease;
- (c) is delivered outside the hospital; and
- (d) is readmitted after discharge from a hospital.

(15) The licensee shall:

- (a) instill a prophylactic solution in the eyes of the infant within three hours of birth in accordance with Section R386-702-14;
- (b) not try to delay the imminent, normal birth of a child;
- (c) perform a newborn hearing screening in accordance with Rule R398-2; and
- (d) perform disease screening, including phenylketonuria (PKU), in accordance with Section 26B-4-319.

R432-100-19. Pediatric Services.

(1)(a) If the licensee provides pediatric services, the services shall be under the direction of a member of the medical staff who is experienced in pediatrics and whose functions and scope of responsibility are defined by the medical staff.

(b) A pediatrics qualified registered nurse shall supervise pediatric nursing care and shall supervise the documentation of the implementation of pediatric patient care on an interdisciplinary plan of care.

(c) If the licensee provides a pediatric unit, the licensee shall ensure there is an interdisciplinary committee responsible for policy development and review of practice within the unit. The committee shall include representatives from administration, the medical and nursing staff, and rehabilitative support staff.

(d) A licensee that admits pediatric patients shall have written policies and procedures specifying the criteria for admission to the hospital and conditions requiring transfer when indicated. These policies and procedures shall consider and address the resources available at the hospital, specifically, in terms of personnel, space, equipment, and supplies.

(e) The licensee shall:

(i) assess each pediatric patient for maturity and development that incorporates information obtained from the maturity and development assessment into the plan of care;

(ii) establish and implement security protocols for pediatric patients; and

(iii) provide a safe area for diversional play activities.

(2) A licensee that admits pediatric patients shall have equipment and supplies in accordance with the hospital's scope of pediatric services.

(3) The licensee shall have written guidelines for the placement or room assignment of pediatric patients according to patient acuity under usual, specific, or unusual conditions within the hospital that shall address the use of:

- (a) cribs;
- (b) bassinets;
- (c) beds; and
- (d) proper use of restraints, bed rails, and other safety devices.

(4) The licensee shall place infant patients in beds where frequent observation is possible.

(5) The licensee shall ensure that pediatric patients other than infants are placed in beds to allow frequent observation according to each patient's assessed care needs.

(6) Personnel working with pediatric patients shall have specific training and experience relating to the care of pediatric patients.

(7) Orientation and in-service training provided by the licensee for pediatric care staff shall include pediatric-specific training on:

- (a) child abuse and neglect;
- (b) drugs;
- (c) infant and child nutrition;
- (d) intravenous therapy;
- (e) pediatric emergency procedures;
- (f) the emotional needs and behavioral management of hospitalized children;
- (g) toxicology; and
- (h) other topics according to the needs of the pediatric patients.

R432-100-20. Respiratory Care Services.

(1) A person authorized by the hospital administrator shall provide administrative direction of respiratory care services.

(2)(a) A member of the medical staff who has the responsibility and authority for the overall direction of respiratory care services shall direct the respiratory care service.

(b) When the scope of services warrants, a technical director who is registered or certified by the National Board for Respiratory Care, or has the equivalent education, training, and experience shall supervise the respiratory care services.

(c) The technical director shall inform physicians about the use and potential hazards in the use of any respiratory care equipment.

(3)(a) The responsible licensed practitioner shall provide respiratory care services to patients in accordance with a written prescription that specifies the type, frequency, and duration of the treatment; and when appropriate, the type and dose of medication, the type of diluent, and the oxygen concentration.

(b) The licensee shall have equipment to perform any pulmonary function study or blood-gas analysis.

(c) The licensee shall ensure availability of resuscitation, ventilatory, and oxygenation support equipment in accordance with the needs of the patient population served.

R432-100-21. Rehabilitation Therapy Services.

(1)(a) If rehabilitation therapy services are provided by the licensee, the services may include physical therapy, speech therapy, and occupational therapy.

(b) A qualified, licensed provider who has clinical responsibility for the specific therapy service shall direct rehabilitation therapy services.

(c) Support personnel shall perform patient services that are commensurate with each person's documented training and experience.

(d)(i) Rehabilitation therapy services may be initiated by a member of the medical staff or by a licensed rehabilitation therapist.

(ii) A physician's written request for services shall include reference to the diagnosis or condition for the treatment that is planned, and any contraindications.

(iii) The patient's physician shall be responsible for the specific medical problem or condition that necessitated the referral.

(2) Rehabilitation therapy services provided to the patient shall include evaluation of the patient, establishment of goals, development of a plan of treatment, regular and frequent assessment, maintenance of treatment and progress records, and periodic assessment of the quality and appropriateness of the care provided.

R432-100-22. Radiology Services.

(1)(a) The licensee shall provide an organized radiology department offering services that are in accordance with the needs and size of the institution.

(b) A person appointed and authorized by the hospital administrator shall direct the radiology services.

(c)(i) A member of the medical staff shall provide medical direction of the department.

(ii) If a radiologist is not the medical director of the radiology services, the licensee shall retain the services of a radiologist.

(iii) If a radiologist provides services on less than a full-time basis, the time commitment shall allow the radiologist to complete the necessary functions to meet the radiological needs of the patients and the medical staff.

(d) The radiologist shall:

(i) assure the availability of information regarding the purpose and yield of radiological procedures and the risks of radiation;

(ii) develop technique charts that include part, thickness, exposure factors, focal film distances, and either a grid or screen technique;

and

(iii) maintain a quality control program that minimizes unnecessary duplication of radiographic studies and maximizes the quality of diagnostic information available.

(e) The licensee shall ensure at least one licensed radiologic technologist is on duty or available as needed.

(f) Only a member of the medical staff or other person authorized by the hospital shall authorize the performance of diagnostic radiology services.

(g) If the licensee provides radiation oncology services, the following shall apply:

(i) physicians and staff who provide radiation oncology services have delineated privileges; and

(ii) the medical director of the radiation oncology services is a physician member of the medical staff who is qualified by education and experience in radiation oncology.

(2)(a) The licensee shall integrate radiologic medical with the hospital patient record.

(b) Any request for radiologic services shall contain the reasons for the examinations.

(c) The licensee shall file authenticated reports of these examinations in the patient's medical record as soon as possible.

(d) The licensee shall keep radiological film in accordance with hospital policy.

(e) If requested by the attending physician and if the quality of the radiograph permits, the radiology department may officially enter the interpretations of the radiologic examinations performed outside of the hospital in the patient's medical record.

(f)(i) The licensee shall file radiotherapy summaries as follows:

(A) documented in the medical record of the patient receiving radiotherapy for treatment or palliation of a malignancy and reflect the histologically substantiated diagnosis, unless otherwise justified;

(B) in the patient's medical record; and

(C) forwarded to the referring physician.

(ii) The licensee may additionally file radiotherapy summaries in the radiotherapy department.

R432-100-23. Laboratory and Pathology Services.

(1)(a) The licensee shall provide laboratory and pathology services that are in accordance with the needs and size of the institution.

(b) A person appointed and authorized by the hospital administrator shall provide administrative direction of laboratory and pathology services.

NOTICES OF CHANGES IN PROPOSED RULES

(c) A member of the medical staff shall provide medical direction of laboratory and pathology services.

(2) Laboratory and pathology services shall make inspection reports, as described in 42 U.S.C. 263a, the Clinical Laboratory Improvement Amendments of 1988, as required for construction plan review in Section R432-4-7 available for department review.

(3) Laboratories certified by the US Centers for Medicare and Medicaid Services (CMS)-approved accrediting agency are in compliance with this section and the licensee shall ensure any accrediting agency inspection reports are available for department review.

R432-100-24. Blood Services.

(1)(a) The licensee's blood service shall establish and maintain an appropriate blood inventory in the hospital, have immediate access to community blood services or other institutions, or have an up-to-date list of donors, equipment, and trained personnel to draw and process blood.

(b) The licensee shall collect, store, and handle blood or blood components in such a manner that they maintain potency and safety.

(c) The licensee shall properly process, test, and label blood or blood components.

(2) The licensee shall ensure any donor center, transfusion service, or blood bank is accredited as follows:

(a) hospital blood banks and donor centers are accredited by the FDA; or

(b) hospital transfusion services are certified by CMS or any accrediting organization approved by CMS.

(3) The licensee shall ensure that results of the accrediting organization survey are available for department review.

R432-100-25. Pharmacy Services.

(1)(a) The pharmacy of a licensee currently accredited and conforming to the standards of the Joint Commission is determined to be in compliance with this section.

(b) If a licensee is not accredited by the Joint Commission, then the licensee's pharmacy services shall comply with the requirements in this section.

(2) A licensed pharmacist shall direct the pharmacy department and service.

(3) The licensee shall employ personnel in keeping with the size and activity of the department and service.

(4) If the licensee uses only a drug room and the size of the hospital does not warrant a full-time pharmacist, a consultant pharmacist may be employed.

(5) The pharmacist is responsible for developing, supervising, and coordinating the activities of the pharmacy.

(6) The licensee shall provide access to emergency pharmaceutical services.

(7) The licensee shall ensure the pharmacist is trained in the specific functions and scope of the hospital pharmacy.

(8) The licensee shall provide facilities for the safe storage, preparation, safeguarding, and dispensing of drugs and ensure:

(a) a current toxicology reference, and other references as needed for effective pharmacy operation and professional information, are available;

(b) double-locked storage is provided for any controlled substance and electronically controlled storage of a narcotic is permitted if the hospital uses automated dispensing technology;

(c) any floor-stock is kept in a secure area in the patient care unit;

(d) any room-temperature medication is stored in a room where the temperature is maintained between 59 and 80 degrees Fahrenheit (F); and

(e) any refrigerated medication is stored in a refrigerator where the temperature is maintained between 36 and 46 degrees F.

(9) The licensee shall maintain records of the transactions of the pharmacy and medication storage unit and coordinate with other hospital records.

(10)(a) In accordance with Section R156-17b-605, the licensee shall:

(i) maintain a recorded and signed floor-stock controlled substance count once per shift; or

(ii) use automated dispensing technology.

(b) A licensee that uses automated dispensing technology shall implement a system for accounting of controlled substances dispensed by the automated dispensing system.

(c) The record shall list the name of the patient receiving the controlled substance, the date, type of substance, dosage, and signature of the person administering the substance.

(11)(a) The director of the pharmaceutical department or service shall develop written policies and procedures, in coordination with the medical staff, that pertain to the intra-hospital drug distribution system and the safe administration of drugs.

(b) Medical staff shall administer drugs that are provided to floor units in accordance with hospital policies and procedures.

(c) The medical staff, in coordination with the pharmacist, shall establish standard stop orders for medications not specifically prescribed in regard to time or number of doses.

(d) The pharmacist shall have full responsibility for dispensing of drugs.

(e) The licensee shall ensure there is a policy stating who may have access to the pharmacy or drug room when the pharmacist is not available.

(f) The licensee shall ensure there is a documentation system for the accounting and replacement of drugs, including narcotics, to the emergency department.

(g) The licensee shall ensure medication errors and adverse drug reactions are reported immediately in accordance with written procedures including notification of the practitioner who ordered the drug.

R432-100-26. Social Services.

- (1)(a) If a licensee provides an organized social services department, a qualified social worker shall direct the social work services.
- (b) If a licensee does not have a full or part-time qualified social worker, the administrator shall designate an employee to coordinate and assure that social work services are provided to patients.
- (c) The licensee shall ensure the social worker, or designee, is knowledgeable about community agencies, institutions, and other resources.
- (2) If a licensee does not provide an organized social services department, the licensee shall obtain consultation from a qualified social worker to provide social work services.
- (3) The licensee shall orient the staff to help the patient make the best use of available inpatient, outpatient, extended care, home health, and hospice services.
- (4) The licensee shall integrate social services with other departments and services of the hospital.

R432-100-27. Psychiatric Services.

- (1)(a) If the licensee provides psychiatric services, the licensee shall ensure the services are integrated with other departments or services of the hospital according to the nature, extent, and scope of service provided.
- (b) If the licensee does not provide psychiatric services, the licensee shall have procedures to transfer patients to a facility that can provide the necessary psychiatric services.
- (c) A person appointed and authorized by the hospital administrator shall provide administrative direction of psychiatric services.
- (d) A qualified physician who is a member of the medical staff shall define in writing and provide medical direction of psychiatric services.
- (e) Psychiatric services shall comply with:
 - (i) Section R432-101-13, Patient Security;
 - (ii) Section R432-101-14, Special Treatment Procedure;
 - (iii) Section R432-101-17, Admission and Discharge;
 - (iv) Section R432-101-20, Inpatient Services;
 - (v) Section R432-101-21, Adolescent or Child Treatment Program;
 - (vi) Section R432-101-22, Residential Treatment Services;
 - (vii) Section R432-101-23, Physical Restraints, Seclusion, and Behavior Management;
 - (viii) Section R432-101-24, Involuntary Medication Administration; and
 - (ix) Section R432-101-35, Penalties.
- (2) If outreach services are ordered by a physician as part of the plan of care or hospital discharge plan, the outreach services may be provided in a clinic, physician's office, or the patient's home.

R432-100-28. Substance Use Disorder Rehabilitation Services.

- (1)(a) A licensee may provide inpatient or outpatient substance use disorder rehabilitation services. A licensee that provides substance use disorder rehabilitation services shall staff the hospital to meet the needs of the patients or clients.
- (b) An individual appointed and authorized by the hospital administrator shall provide administrative direction.
- (c) A qualified physician who is a member of the medical staff shall provide and define, in writing, medical direction.
- (d) The licensee shall ensure nursing services are under the direction of a full-time registered nurse.
- (e) The licensee shall ensure substance use disorder counseling is under the direction of a licensed mental health therapist.
- (f) A licensed substance use disorder counselor may serve as the primary therapist under the direction of an individual licensed under Title 58, Chapter 60, Mental Health Professional Practice Act.
- (g) An interdisciplinary team including the physician, registered nurse, licensed mental health therapist, and substance use disorder counselor is responsible for program and treatment services. The patient or client may be included as a member of the interdisciplinary team.
- (2) The licensee shall ensure that substance use disorder rehabilitation services include:
 - (a) a referral process where a counselor may refer any client or patient to public or private agencies for substance rehabilitation, and employment and a social assessment;
 - (b) comprehensive assessment that is documented and includes a physical examination, a psychiatric and psychosocial assessment, and a social assessment;
 - (c) detoxification care, available for the systematic reduction or elimination of a toxic agent in the body by use of rest, fluids, medication, counseling, or nursing care;
 - (d) educational, employment, or other counseling, available as needed;
 - (e) individual, group, or family counseling; and
 - (f) treatment services coordinated with other hospital and community services to assure continuity of care through discharge planning and aftercare referrals.
- (3) The licensee shall maintain the confidentiality of medical records of substance use disorder patients and clients according to the federal guidelines in 42 CFR 2 (2024).
- (4) The medical director or designee may direct the residential treatment services. Residential treatment services shall comply with Section R432-101-22.

NOTICES OF CHANGES IN PROPOSED RULES

R432-100-29. Outpatient Services.

- (1) The licensee shall integrate outpatient care services with other departments or services of the hospital according to the nature, extent, and scope of services provided.
- (2) Outpatient care shall meet the same standards of care that apply to inpatient care.
- (3) Outpatient care includes hospital owned outpatient services and satellite services.

R432-100-30. Respite Services.

- (1)(a) A remote-rural general acute licensee with a federal swing-bed designation may provide respite services to provide intermittent, time-limited care to give a primary caretaker relief from the demands of caring for an individual.
- (b) The licensee may only provide respite care services if the licensee complies with this section.
- (c) If the licensee provides respite care to an individual for longer than 14 consecutive days, the licensee shall admit the individual as an inpatient and is subject to the requirements of this rule applicable to non-respite inpatient admissions.
- (2) The licensee may provide respite services at an hourly rate or daily rate.
- (3) The licensee shall coordinate the delivery of respite services with the recipient of services, case manager, if one exists, and the family member or primary caretaker.
- (4) The licensee shall document the individual's response to the respite placement and coordinate with provider agencies to ensure an uninterrupted service delivery program.
- (5) The licensee shall complete:
 - (a) a Level 1 pre-admission screening upon the person's admission for respite services; and
 - (b) a service agreement that will serve as the plan of care and identifies:
 - (i) diet orders;
 - (ii) need for assistance for activities of daily living;
 - (iii) physician treatment orders; and
 - (iv) prescribed medications.
- (6) The licensee shall have written policies and procedures that are available to staff regarding the respite care patients to include:
 - (a) behavior management interventions;
 - (b) handling patient funds;
 - (c) medication administration;
 - (d) notification of a responsible person in the event of an emergency;
 - (e) philosophy of respite services;
 - (f) post-service summary;
 - (g) service agreement and admission criteria; and
 - (h) training and in-service requirements for employees.
- (7) The licensee shall provide a copy of the resident rights to the patient upon admission.
- (8) The licensee shall maintain a record for each patient who receives respite services that includes:
 - (a) a service agreement;
 - (b) a post-service summary;
 - (c) any accident and injury report;
 - (d) demographic information and patient identification data;
 - (e) nursing notes;
 - (f) physician treatment orders; and
 - (g) records made by staff regarding daily care of the patient in-service.
- (9) If a patient has an advanced directive, the licensee shall file a copy of the directive in the record and inform staff.
- (10) The licensee shall ensure that retention and storage of records complies with this rule.
- (11) The licensee shall provide for confidentiality and release of information in accordance with this rule.

R432-100-31. Pet Therapy.

- (1) If a licensee utilizes pet therapy, household pets such as a dog, cat, bird, fish, or hamster, may be permitted if:
 - (a) a licensee with a bird has procedures in place that protect patients, staff, and visitors from psittacosis;
 - (b) any pet is clean and disease free;
 - (c) a pet that is kept at the hospital, or is a frequent visitor, has current vaccinations, including rabies, as recommended by a licensed veterinarian;
 - (d) a pet that is not confined is kept under leash control or voice control;
 - (e) a small pet is kept in an appropriate enclosure; and
 - (f) the immediate environment of the pet is clean.
- (2) A licensee that permits a pet to remain overnight shall have policies and procedures for the care, housing and feeding, and proper storage of pet food and supplies.
- (3) The licensee may not permit a pet in any area where the pet's presence would create a significant health or safety hazard or nuisance to others.

- (4) The licensee may not permit a pet in food preparation and storage areas.
- (5) Any individual caring for a pet may not have patient care or food handling responsibilities.

R432-100-32. Dietary Service.

(1)(a) The licensee shall ensure that there is an organized dietary department under the supervision of a certified dietitian or a qualified individual who, by education or specialized training and experience, is knowledgeable in food service management. If the latter is head of the department, the individual shall retain a registered dietitian on a full-time, regular part-time, or consulting basis.

(b) A person whose qualifications, authority, responsibilities, and duties are approved by the administrator shall provide direction of the dietary service. The director shall have the administrative responsibility for the dietary service.

(c) If the services of a certified dietitian are used on less than a full-time basis, the time commitment shall permit performance of necessary functions to meet the dietary needs of the patients.

(d) The licensee shall ensure there are food service personnel to perform any necessary functions.

(2) If dietetic services are provided by an outside provider, the outside provider shall comply with the standards of this section.

(3)(a) The dietary department personnel shall provide a current diet manual, approved by the dietary department and the medical staff, to be available to dietary, medical, and nursing personnel.

(b) The dietary department personnel shall meet the food and nutritional needs of patients, including therapeutic diets, in accordance with the orders of the physician responsible for the care of the patient, or if delegated by the physician, the orders of a qualified registered dietitian in consultation with the physician, as authorized by the medical staff and in accordance with facility policy.

(c) Dietary department personnel shall write regular menus and modifications for basic therapeutic diets at least one week in advance and posted in the kitchen.

(d) The menus shall provide for a variety of foods served in adequate amounts at each meal.

(e) The dietary department shall serve at least three meals daily with not more than a 14-hour span between the evening meal and breakfast. If a substantial evening snack is offered, a 16-hour time span is permitted.

(f) The dietary department shall provide a source of non-neutral exchanged water for use in preparation of no sodium meals, snacks, and beverages.

(4)(a) The dietary department personnel shall comply with Rule R392-100.

(b) The licensee shall ensure that the dietary facilities and equipment comply with federal, state, and local sanitation and safety laws and rules.

(c) The licensee shall control traffic of unauthorized individuals through food preparation areas.

(5) The licensee shall maintain written reports of inspections by state or local health departments on file at the hospital and available for department review.

(6) The dietitian or authorized designee is responsible for documenting nutritional information in the patient's medical record.

(7) The licensee shall ensure that any dietary orders are transmitted in writing to the dietary department.

R432-100-33. Telehealth Services.

(1) If a licensee participates in telehealth, it shall develop and implement policies governing the practice of telehealth in accordance with the scope and practice of the hospital and in accordance with Section 26B-4-704.

(2) The licensee's telehealth policies shall address security, access, and retention of telemetric data.

(3) The licensee's telehealth policies shall define the privileging of physicians and allied health professionals who participate in telehealth.

R432-100-34. Medical Records.

(1)(a) The licensee shall establish a medical records department or service that is responsible for the administration, custody, and maintenance of medical records.

(b) The hospital administrator shall establish administrative direction of the medical records department and in accordance with the organizational structure and policies of the hospital.

(c) The licensee shall retain the technical services of either a registered health information administrator or a registered health information technician through employment or consultation. If retained by consultation, the individual shall visit at least quarterly and document visits through written reports to the hospital administrator.

(2)(a) The licensee shall provide secure storage, controlled access, prompt retrieval, and equipment and facilities to review medical records.

(b) The licensee shall ensure medical records are available for use or review by:

(i) authorized hospital personnel and agents;

(ii) department representatives to determine compliance with licensing rules;

(iii) members of the medical and professional staff; and

(iv) people authorized by the patient through a consent form.

(c) Medical records may be stored in multiple locations if the record can be retrieved or accessed in a reasonable period.

(d) If computer terminals are utilized for patient charting, the licensee shall have policies governing access and identification codes, security, and information retention.

NOTICES OF CHANGES IN PROPOSED RULES

(e) The licensee shall index a hospital medical record according to diagnosis, procedure, demographic information, and physician or licensed health practitioner and ensure the index is current within six months following discharge of the patient.

(f) Original medical records are the property of the licensee and may not be removed from the control of the licensee or the licensee's agent as defined by policy, except by court order or subpoena.

(g) The licensee shall manage medical records for individuals who have received or requested admission to an alcohol or drug program in accordance with 42 CFR 2.

(3)(a) The licensee shall ensure that medical record entries are legible, complete, authenticated, and dated by the person responsible for ordering the service, providing, or evaluating the service, or making the entry. The author shall review prepared transcriptions of dictated reports, evaluations, and consultations before authentication.

(b) The authentication may include written signatures, computer key, or other methods approved by the governing body and medical staff to identify the name and discipline of the person making the entry.

(c) Use of computer key or other methods to identify the author of a medical record entry may not be assignable or delegated to another person.

(d) The licensee shall maintain a current list of individuals approved to use the methods of authentication. Hospital policy shall identify sanctions for the unauthorized or improper use of computer codes.

(e) Qualified personnel shall accept and transcribe verbal orders for the care and treatment of the patient and authenticate them within 30 days of the patient's discharge.

(4) The licensee shall ensure:

(a) if a licensee ceases operation, the licensee shall provide secure, safe storage, and prompt retrieval of any medical records, patient indexes, and discharges for the period specified in Subsection (4)(b);

(b) medical records are kept for at least seven years and medical records of minors are kept until the age of 18 plus four years, but in no case less than seven years;

(c) medical records are organized according to hospital policy;

(d) medical records are reviewed at least quarterly for completeness, accuracy, and adherence to hospital policy;

(e) records of discharged patients are collected, assembled, reviewed for completeness, and authenticated within 30 days of the patient's discharge;

(f) the licensee may destroy medical records after keeping them for the minimum period, and before destroying medical records, the licensee shall notify the public by publishing a notice in a newspaper of statewide distribution a minimum of once per week for three consecutive weeks to allow a former patient to access their records; and

(g) The licensee shall permanently keep a master patient or person index that shall include:

(i) the admission and discharge dates;

(ii) the date of birth;

(iii) the medical record number;

(iv) the name of each attending physician; and

(v) the patient name.

(5) The licensee may arrange for storage of medical records with another hospital, or an approved medical record storage facility, or may return patient medical records to the attending physician if the physician is still in the community.

(6) The licensee shall establish and maintain a complete medical record for each patient admitted, or who receives hospital services. Emergency and outpatient medical records shall contain documentation of the service provided and other pertinent information in accordance with hospital policy.

(7) The licensee shall ensure that each medical record contains:

(a) a discharge summary including outcome of hospitalization, disposition of case with an autopsy report when indicated, or provisions for follow-up;

(b) admitting, secondary, and primary diagnoses;

(c) documentation of complications, hospital-acquired infections, and unfavorable reactions to medications, treatments, and anesthesia;

(d) documentation that the facility requested of each admitted person whether the person has initiated an advance health care directive, as described in Title 75A, Chapter 3, Health Care Decisions;

(e)(i) initial or admitting medical history, physical, and other examinations or evaluations; or

(ii) if updated to include changes that reflect the patient's current status, recent histories and examinations;

(f) patient identification and demographic information to include at least the patient's name, address, date of birth, sex, and emergency contact information;

(g) properly executed informed consent documents for any procedures and treatments ordered for, and received by, the patient;

(h) practitioner orders, nursing notes, reports of treatment, medication records, laboratory and radiological reports, vital signs, and other information that documents the patient condition and status; and

(i) results of consultative evaluations and findings by individuals involved in the care of the patient.

(8) A medical record of a deceased patient shall contain a completed Inquiry of Anatomical Gift form or a modified hospital death form that has been approved by the department, as required by Title 26B, Chapter 8, Part 3, Revised Uniform Anatomical Gift Act.

(9) A medical record of a surgical patient shall contain:

- (a) a pre-operative history and physical examination;
- (b) an anesthesia report including dosage and duration of any anesthetic and pertinent events during the induction, maintenance, and emergence from anesthesia;
- (c) an operative report describing a description of findings;
- (d) assistants written or dictated by the surgeon within 24 hours after the operation;
- (e) surgeon's diagnosis;
- (f) the name of the primary surgeon;
- (g) the post-operative diagnosis;
- (h) the specimen removed; and
- (i) the technical procedures used.
- (10) A medical record of an obstetrical patient shall contain:
 - (a) a discharge summary for complicated deliveries or final progress note for uncomplicated deliveries;
 - (b) a relevant family history;
 - (c) a serological test for syphilis;
 - (d) a pre-natal examination;
 - (e) the anesthesia or analgesia record;
 - (f) the length of labor and type of delivery with related notes; and
 - (g) the Rh status and immune globulin administration when indicated.
- (11) A medical record of a newborn infant shall contain the following documentation in addition to the requirements for obstetrical medical records:
 - (a) a record of the physical examination completed at birth and discharge, record of ophthalmic prophylaxis, and the identification number of the newborn screening kit;
 - (b) a summary of the delivery room care;
 - (c) the gender;
 - (d) the number, character, and consistency of stools;
 - (e) the period of gestation;
 - (f) any reaction after birth;
 - (g) the temperature and weight;
 - (h) the authorization by the parents, state agency, or court authority if the infant is discharged to any person other than the infant's parents;
 - (i) the date and hour of birth;
 - (j) the record and results of the newborn hearing screening according to Section R398-2-6;
 - (k) the time of first urination; and
 - (l)(i) a copy of the parent's delivery room record.
 - (ii) In an adoption case where the identity of the parent is confidential, the licensee shall include and access the parent's record according to hospital policy.
- (12) The licensee shall integrate an emergency department patient medical record into the hospital medical record, that includes:
 - (a) a diagnosis;
 - (b) disposition and discharge instructions;
 - (c) emergency care given to the patient before arrival;
 - (d) history and physical findings;
 - (e) lab and x-ray reports;
 - (f) record of treatment; and
 - (g) time and means of arrival.
- (13) A medical-social services patient record shall include:
 - (a) any cooperative activities with community agencies;
 - (b) a medical-social or psychosocial study of a referred inpatient and outpatient;
 - (c) an environmental investigation for an attending physician;
 - (d) social therapy and rehabilitation of the patient; and
 - (e) the financial status of the patient.
- (14) A medical record of a patient receiving rehabilitation therapy shall include:
 - (a) a problem list;
 - (b) a written plan of care appropriate to the diagnosis and condition; and
 - (c) short and long term goals.
- (15) The medical records department shall maintain records, reports, and documentation of admissions, discharges, and the number of autopsies performed.
- (16)(a) The medical records department shall maintain vital statistic registries for births, deaths, and the number of operations performed.
 - (b) The medical records department shall report vital statistics data in accordance with Title 26B, Chapter 8, Part I, Vital Statistics.

NOTICES OF CHANGES IN PROPOSED RULES

R432-100-35. Central Supply Services.

- (1) The licensee shall ensure a central supply service supervisor is qualified for the position by education, training, and experience.
- (2)(a) The licensee shall provide central service space and equipment for the cleaning, disinfecting, packaging, sterilizing, storing, and distribution of medical and surgical patient care supplies.
 - (b) The licensee shall ensure the hospital central service area provides:
 - (i) a decontamination area that is separated by a barrier or divider to allow the receiving, cleaning, and disinfection functions to be performed separately from other central service functions;
 - (ii) a linen assembly or pack-making area that has ventilation to control lint and is separated from the general sterilization and processing area; and
 - (iii) a sterilization area that contains hospital sterilizers with approved controls and safety features and the licensee ensures:
 - (A) if a gas sterilizer is used, the gas sterilizer is inspected, maintained, and operated in accordance with the manufacturer's recommendations;
 - (B) the accuracy of the sterilizers' performance is checked by a method that includes a permanent record of each run; and
 - (C) the sterilizers are tested by biological monitors at least weekly.
 - (3) The licensee shall separate the storage area into sterile and non-sterile areas and ensure:
 - (a) outside shipping cartons are not stored in the storage area;
 - (b) the storage area has temperature and humidity controls; and
 - (c) the storage area is free of excessive moisture and dust.
 - (4) Staff shall wipe countertops and tables with a broad spectrum disinfectant during each shift that the central service area is staffed.
 - (5) Staff shall issue and launder any apparel worn in central supply according to hospital policy.

R432-100-36. Laundry Service.

- (1) A person whose qualifications, authority, responsibilities, and duties are approved by the administrator shall direct the laundry service.
- (2)(a) A licensee using a commercial linen service shall require written assurance from the commercial service that standards in Subsection (2) are maintained.
 - (b) Clean linen shall remain completely packaged and protected from contamination until received by the licensee.
 - (c) The use of a commercial linen service does not relieve the licensee from its quality improvement responsibilities.
 - (3) A licensee that maintains an in-house laundry service shall provide equipment, supplies, and staff to meet the needs of the patients and shall ensure:
 - (a) soiled linen is collected in a manner to minimize cross-contamination as follows:
 - (i) containers are properly closed as filled and before further transport;
 - (ii) employees handling soiled linen wear protective clothing that is removed before leaving the soiled work area;
 - (iii) handwashing is required after handling soiled linen and before handling clean items;
 - (iv) soiled linen is sorted only in a sorting area; and
 - (v) soiled linen is transported separately from clean linen; and
 - (b) the licensee maintains a supply of clean linen as follows:
 - (i) clean linen is covered during transport;
 - (ii) clean linen is handled and stored in a manner to minimize contamination from surface contact or airborne deposition; and
 - (iii) clean linen is stored in enclosed closet areas or carts.
 - (4) The licensee shall launder employee scrubs that are worn in the following areas:
 - (a) surgical areas; and
 - (b) other areas as required by 29 CFR 1910.264 (1978).
 - (5) If hospital employee scrubs are designated as uniforms that may be worn to and from work, the licensee shall develop and implement policies and procedures defining the scope and usage of scrubs as uniforms including hospital storage of employee scrubs, and hospital-provided scrubs in the event of contamination.

R432-100-37. Housekeeping Services.

- (1) The licensee shall provide housekeeping services to maintain a clean, safe, sanitary, and healthy environment in the hospital.
- (2) If the licensee contracts for housekeeping services with an outside service, the licensee shall secure a signed and dated agreement that details the services provided.
- (3) The licensee shall provide safe and secure storage of cleaners and chemicals and keep cleaners and chemicals stored in areas that may be accessible to patients secure in accordance with hospital policy.
- (4) The licensee shall ensure that storage and supplies in each area of the hospital are stored at least four inches off the floor, and at least 18 inches below the lowest portion of the sprinkler system.
- (5) Personnel engaged in housekeeping or laundry services may not be engaged simultaneously in food service or patient care.
- (6) If personnel work in food or direct patient care services, the licensee shall establish and follow a hospital policy to govern the transition from housekeeping services to patient care.

R432-100-38. Maintenance Services.

(1)(a) The licensee shall provide maintenance services to ensure that hospital equipment and grounds are maintained in a clean and sanitary condition and in a state of good repair for the safety and well-being of patients, staff, and visitors.

(b) The administrator shall employ a person qualified by experience and training to oversee hospital maintenance.

(c) If the licensee contracts for maintenance services, the licensee shall secure a signed and dated agreement that details the services provided.

(d) The licensee shall ensure a pest-control program is conducted to ensure the hospital is free from any vermin or rodent.

(e) The licensee shall maintain each entrance, exit, step, ramp, and outside walkway in a safe condition regarding snow, ice, and other hazards.

(2) The licensee shall test, calibrate, and maintain any patient care equipment in accordance with the specifications from the manufacturer and make testing frequency and calibration documentation, whether conducted internally or by an outside agency, available for department review.

(3) The licensee shall ensure hot water at public and patient faucets is delivered between 105 to 120 degrees F.

R432-100-39. Emergency Operations Plan.

(1) The licensee shall have an emergency operations plan for the maintenance of a safe environment in the event of an emergency or disaster that overwhelms the facility.

(2) The administrator or designee is responsible for the development of the plan, coordinated with applicable state and local emergency response partners and agencies. The plan shall:

(a) address delivery of essential care and services to hospital occupants utilizing crisis standards of care when staff is reduced by an emergency;

(b) address delivery of essential care and services when additional persons are present at the hospital during an emergency;

(c) address planning, mitigation, response, and recovery for:

(i) emergency communications;

(ii) patient clinical and supportive activities;

(iii) safety and security;

(iv) staff responsibilities;

(v) resources and assets; and

(vi) utility management;

(d) address risks and threats identified in the licensee's annual hazard vulnerability analysis;

(e) be in writing and made available to any hospital staff;

(f) be reviewed and updated as necessary and be available for review by the department;

(g) delineate individuals who will be in charge in the event of any significant emergency;

(h) delineate the person with decision-making authority to activate the emergency operations plan;

(i) have an evacuation plan; and

(j) include readily available lists of emergency partners with multiple contact options, emergency contact lists are updated and maintained regularly by the licensee.

(3) The hospital administrator and the board shall approve the emergency operations plan.

(4) The licensee shall document any emergency incidents and responses.

(5) The licensee shall hold disaster drills or exercises twice yearly according to threats identified in the facility's annual hazard vulnerability analysis.

(6) The licensee shall have a fire emergency evacuation plan written in consultation with qualified fire safety personnel. This plan may be included in the facility's emergency operations plan.

(7) The licensee shall post evacuation routes posted in prominent locations throughout the hospital.

(8) The licensee shall document fire drills and ensure fire drill documentation is in accordance with Rule R710-4.

(9)(a) A licensee may exceed the licensed capacity by up to 20% in response to any incident that overwhelms the facility.

(b) A hospital that exceeds the licensed capacity under this provision shall notify the department within 72 hours of exceeding the licensed capacity.

(c) The licensee shall seek department approval to exceed 20% above licensed capacity.

(d) The department may direct that the licensee reduce the patient census to the licensed capacity at any time.

R432-100-40. Penalties.

Any person who violates this rule may be subject to the penalties in Rule R380-600 and Title 26B, Chapter 2, Part 7, Penalties and Investigations.

KEY: health care facilities

Date of Last Change: ~~2025~~2026

Notice of Continuation: August 22, 2025

Authorizing, and Implemented or Interpreted Law: 26B-1-202; 26B-2-202; 26B-2-203

NOTICE OF SUBSTANTIVE CHANGE

TYPE OF FILING: CPR (Change in Proposed Rule)		
Rule or section number:	R432-950	Filing ID: 57643
Date of previous publication (only for CPRs):	12/01/2025	

Agency Information

1. Title catchline:	Health and Human Services, Health Care Facility Licensing	
Building:	Multi-Agency State Office Building	
Street address:	195 N. 950 W	
City, state:	Salt Lake City, UT	
Mailing address:	PO Box 142003	
City, state and zip:	Salt Lake City, UT 84114-2003	
Contact persons:		
Name:	Phone:	Email:
Kamille Sheikh	385-227-1290	kamillesheikh@utah.gov
Mariah Noble	385-214-1150	mariahnoble@utah.gov
Please address questions regarding information on this notice to the persons listed above.		

General Information

2. Rule or section catchline:
R432-950. Mammography Quality Assurance
4. Purpose of the new rule or reason for the change:
The purpose of this change in proposed rule (CPR) is to add clarifying language about medical professional supervision for any screening mammography completed at a mobile unit, regulated by this rule and the Office of Licensing (OL), under the Department of Health and Human Services (department). The original rule amendment included multiple updates from HB 146 from the 2025 General Session. Based on a review by department leadership, it was determined that clarifying language was needed to ensure flexibility for any screening mammography completed at a mobile until, particularly in rural areas of Utah.
5. Summary of the new rule or change:
This CPR changes the section title of Section R432-950-3 to "Scope" to prevent a duplicative section title with Section R432-950-5 and adds clarifying language about medical professional supervisory requirements for any screening mammography completed at a mobile unit under Subsection R432-950-7(1)(d). This CPR also makes style and formatting changes to align with phrasing in other department rules. (EDITOR'S NOTE: The original proposed amendment upon which this change in proposed rule (CPR) was based was published in the December 1, 2025, issue of the Utah State Bulletin, on page 140. Underlining in the rule below indicates text that has been added since the publication of the proposed rule mentioned above; strike-out indicates text that has been deleted. You must view the CPR and the proposed amendment together to understand all of the changes that will be enforceable should the agency make this rule effective.)

Fiscal Information

6. Provide an estimate and written explanation of the aggregate anticipated cost or savings to:
A. State budget:
This change in proposed rule (CPR) is not anticipated to result in any measurable cost or saving to the state budget, as the OL already regulates any facility providing mammography services under this rule.

The CPR does not add any new procedure for any licensing review by OL and updates a duplicative section title and adds clarifying language to medical supervision requirements for any screening mammography completed at a mobile unit, which will provide OL staff, facilities, and the public with clarity about the required medical professional supervision for any screening mammography completed at a mobile unit.

B. Local governments:

This CPR is not anticipated to impact local governments' revenues or expenditures as OL already regulates any facility providing mammography services under this rule for basic health and safety requirements and not local governments. There will be no change in local business licensing or any other item with which local government is involved.

The CPR does not add any new procedure for any licensing review by OL and updates a duplicative section title and adds clarifying language to medical supervision requirements for any screening mammography completed at a mobile unit, which will provide OL staff, facilities, and the public with clarity about the required medical professional supervision for any screening mammography completed at a mobile unit.

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

This CPR is not anticipated to result in a cost or savings for small businesses as OL already regulates any facility providing mammography services under this rule for basic health and safety requirements, including small businesses.

The CPR does not add any new procedure for any licensing review by OL and updates a duplicative section title and adds clarifying language to medical supervision requirements for any screening mammography completed at a mobile unit, which will provide OL staff, facilities, and the public with clarity about the required medical professional supervision for any screening mammography completed at a mobile unit.

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

This CPR is not anticipated to result in a cost or savings for non-small businesses as OL already regulates any facility providing mammography services under this rule for basic health and safety requirements, including non-small businesses.

The CPR does not add any new procedure for any licensing review by OL and updates a duplicative section title and adds clarifying language to medical supervision requirements for any screening mammography completed at a mobile unit, which will provide OL staff, facilities, and the public with clarity about the required medical professional supervision for any screening mammography completed at a mobile unit.

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 CPR is not anticipated to result in a cost or savings for persons other than small businesses, non-small businesses, state, or local government, including nonprofit entities, as OL already regulates any facility providing mammography services under this rule for basic health and safety requirements, which may include any health facility operated by persons other than small businesses, non-small businesses, state, or local government entities, including any non-profit entity.

The CPR does not add any new procedure for any licensing review by OL and updates a duplicative section title and adds clarifying language to medical supervision requirements for any screening mammography completed at a mobile unit, which will provide OL staff, facilities, and the public with clarity about the required medical professional supervision for any screening mammography completed at a mobile unit.

F. Compliance costs for affected persons:

Affected persons would be the small businesses, non-small businesses, and persons other than small businesses, non-small businesses, state, or local government entities, including nonprofit entities, providing mammography services under this rule.

Additionally, OL, as the regulatory body for health and safety standards for any facility providing mammography services under this rule for basic health and safety requirements, is affected by this CPR.

NOTICES OF CHANGES IN PROPOSED RULES

Health facilities providing mammography services under this rule are already regulated by OL for basic health and safety standards, and there is no anticipated compliance cost associated with this CPR for affected persons.

This CPR does not add any new procedure for any licensing review by OL and updates a duplicative section title and adds clarifying language to medical supervision requirements for any screening mammography completed at a mobile unit, which will provide OL staff, facilities, and the public with clarity about the required medical professional supervision for any screening mammography completed at a mobile unit.

G. Regulatory Impact Summary Table (This table includes only fiscal impacts the agency was able to measure. If the agency could not estimate an impact, it is excluded from this table but described in boxes A through F.)

Regulatory Impact Summary Table					
Fiscal Cost	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
Total Fiscal Cost	\$0	\$0	\$0	\$0	\$0
Fiscal Benefits	FY2026	FY2027	FY2028	FY2029	FY2030
State Budget	\$0	\$0	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0	\$0	\$0
Total Fiscal Benefits	\$0	\$0	\$0	\$0	\$0
Net Fiscal Benefits	\$0	\$0	\$0	\$0	\$0

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 S. Gruber, has reviewed and approved this regulatory impact analysis.

Citation Information

7. 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-2-602	42 U.S.C. 263b	21 CFR 900.12(c)(2)
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Public Notice Information

9. The public may submit written or oral comments to the agency identified in box 1.

A. Comments will be accepted until:	05/15/2026
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10. This rule change MAY become effective on: 05/22/2026

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

Agency head or designee and title:	Tracy S. Gruber, Executive Director	Date:	03/29/2026
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R432. Health and Human Services, Health Care Facility Licensing.**R432-950. Mammography Quality Assurance.****R432-950-1. Authority and Purpose.**

- (1) Section 26B-2-602 authorizes this rule.
- (2) This rule establishes quality assurance standards and accountability for each facility performing screening or diagnostic mammography.

R432-950-2. Definitions.

Terms used in this rule are defined in Rules R380-600 and R432-1. Additionally:

- (1) "Diagnostic mammography" means performing a mammogram on a woman suspected of having breast cancer.
- (2) "Facility" means:
 - (a) the same as defined in Rule R432-1; and
 - (b) includes any of the following entities that is applying for, or has received, a certification from the Office of Licensing (OL) and conducts breast cancer screening or diagnosis through the operation of equipment to produce or initially interpret a mammogram, process film, or view conditions for interpretation:
 - (i) a clinic;
 - (ii) a hospital;
 - (iii) a mobile unit;
 - (iv) a radiology practice;
 - (v) an office of a physician;
 - (vi) an outpatient department; or
 - (vii) any other facility that conducts breast cancer screening or diagnosis.
- (3) "Image quality" means the overall clarity and detail of an x-ray, including spatial resolution or resolving power, sharpness, and contrast.
- (4) "Mammogram" means a radiographic image of the breast.
- (5) "Mammogram unit" means an x-ray system designed specifically for breast imaging, providing optimum imaging geometry, a device for breast compression, and low dose exposure that can produce high quality, reproducible images.
- (6) "Mammography" means radiography of the breast to diagnose breast cancer.
- (7) "Phantom" means an artificial test object simulating the average composition of and various structures within the breast.
- (8) "Physician supervisor" means a physician with an unrestricted license under Title 58, Chapter 67, Utah Medical Practice Act or Title 58, Chapter 68, Utah Osteopathic Medical Practice Act, who is acting within the scope of the practice of medicine.
- (9) "Screening mammography" means a standard readable two-view per breast low dose radiographic examination to detect unsuspected breast cancer using specifically designed equipment dedicated to mammography.
- (10) "Quality assurance" means a program designed to achieve the desired degree or grade of care, including evaluation and educational components to identify and correct problems in interpreting and obtaining mammogram.
- (11) "Quality control" means the process of testing and maintaining the highest possible standards of equipment performance and acquisition of radiographic images.

R432-950-3. ~~Compliance~~Scope.

Each facility shall comply with:

- (1) Rule R380-600;
- (2) this rule; and
- (3) 42 U.S.C. 263b.

R432-950-4. Quality Assurance.

- (1) Each facility shall conduct quality assurance to ensure the operation and the services provided are in accordance with this rule.
- (2) The facility shall correct any deficiency identified by the American College of Radiology (ACR) or state inspection.
- (3) The facility shall evaluate each required correction for a systems change to update the facility's plan for maintaining quality assurance.

R432-950-5. Compliance.

- (1) A facility shall comply with any applicable federal, state, and local law and regulation pertaining to radiological and mammography services.
- (2) The facility shall maintain documentation showing compliance with any applicable federal, state and local law and regulation pertaining to radiological and mammography services, including:
 - (a) certification of the facility;
 - (b) documentation that the facility has been approved by the ACR; and
 - (c) licensure or certification of personnel.

NOTICES OF CHANGES IN PROPOSED RULES

(3) Upon receipt of any survey result of the ACR or any accrediting organization, the facility shall submit copies of the certificate, the survey report, and any recommendation to ~~the~~OL.

R432-950-6. Facility Oversight.

- (1) Each facility is responsible for the overall quality of the mammography conducted.
- (2) The facility shall have enough qualified staff available, either on staff or through arrangement, to meet patient needs relating to mammography, including:
 - (a) a designated physician supervisor who meets the requirements for a qualified physician specified by the Department of Commerce;
 - (b) a medical physicist who:
 - (i) is certified by the American Board of Radiology in Radiological Physics or Diagnostic Radiological Physics; or
 - (ii) meets the requirements of a qualified expert, as defined in Section R313-16-215, or mammography imaging medical physicist, as specified by the Department of Environmental Quality in accordance with Section R313-28-140; and
 - (c) one or more radiologic technologists who meet the requirements specified by the Department of Commerce in accordance with Section 58-54-302.

R432-950-7. Physician, Physicist, and Radiologic Technologist Requirements.

- (1)(a) A physician interpreting mammograms or supervising mammography shall provide documentation to ~~the~~OL upon request that verifies compliance with the Department of Commerce minimum qualifications specified by Section 58-67-301 and 21 CFR 900.12(c)(2) (2025).
 - (b) A qualified physician shall interpret the results of each mammogram.
 - (c) A qualified physician shall directly supervise on-site any diagnostic mammography~~[-on site]~~.
 - ~~(d) A qualified physician may directly supervise on-site any screening mammography performed at a mobile unit.~~
- (2)(a) A radiologic technologist shall:
 - (i) complete on-the-job training in mammography under the supervision of a qualified physician or the supervising radiologic technologist;
 - (ii) be competent in breast positioning and compression as determined by a qualified physician of mammogram films taken by the radiologic technologist;
 - (iii) be knowledgeable, according to the radiologic technologist's supervisor, in facility policies regarding:
 - (A) quality control;
 - (B) radiation protection;
 - (C) radiation safety; and
 - (D) technical factors; and
 - (iv) meet minimum qualifications described in Subsection R432-950-6(2)(c); and
 - (v) receive continuous supervision and feedback on image quality from the qualified physician.
- (b) The facility shall provide documentation to ~~the~~OL upon request verifying that the radiologic technologist meets the requirements in Subsection (2)(a).
- (3) The facility shall ensure the medical physicist is:
 - (a) certified in an acceptable specialty by one of the bodies approved by the FDA to certify medical physicists; or
 - (b) licensed or approved by the state to conduct evaluations of mammography equipment as required by state law.

R432-950-8. Personnel Requirements.

- (1) The facility shall document that new staff orientation and ongoing in-service training is based on current written facility policies and procedures.
- (2) The facility shall ensure any on-duty personnel has access to the facility's written policies and procedures.
- (3) The facility shall implement a standardized orientation program for each employment position, including the time required to complete training.
- (4) The facility shall develop and implement a written in-service training program that identifies the topics and frequency of training, including an annual review of facility policies and procedures.
- (5) The facility shall maintain personnel records documenting that each employee is qualified and competent to perform respective duties and responsibilities through:
 - (a) appropriate licensure or certification;
 - (b) continuing education;
 - (c) experience;
 - (d) ongoing in-service training; and
 - (e) orientation.
- (6) The facility shall keep personnel records for terminated employees for a minimum of four years after the termination date.

R432-950-9. Equipment Standards.

- (1) The facility shall ensure each mammogram unit is designed specifically for mammography and has a compression device and the capability for placement of a grid.
- (2) The facility shall maintain written policies and procedures for operating mammography equipment.
- (3) The facility must ensure each mammogram unit is registered with the Utah Department of Environmental Quality, in accordance with Section R313-16-230, before initiating operation.

R432-950-10. Safety Standards.

- (1) The facility shall maintain:
 - (a) documentation that each employee has been trained on safety standards for radiation;
 - (b) documentation that the mammogram unit is safe and that proper radiation safety practices are being followed; and
 - (c) policy and procedure manuals and logs for equipment and quality control.
- (2)(a) Each facility shall implement a quality control program for:
 - (i) equipment;
 - (ii) film processors approved by the Department of Environmental Quality; and
 - (iii) mammogram unit performance.
- (b) Each facility shall maintain stated objectives achieved by procedures comparable to objectives and procedures in the ACR 2018 Digital Mammography Quality Control Manual, Revised 2nd Edition, May 2020, incorporated by reference in this rule.
- (c) The facility shall maintain documentation that the quality control program complies with ACR quality controls for mammography or the equivalent.
- (d) Each ACR-accredited mammography program facility shall document compliance with the mammogram unit quality control requirements in this section.

R432-950-11. Technical Specifications for Mammography.

- (1) Each facility shall have a phantom available for use in the facility's ongoing quality control program.
- (2)(a) The facility shall evaluate image quality at least monthly using a phantom that produces measurements satisfactory to the supervising physician.
- (b) The facility's evaluation of image quality shall include clinical images for:
 - (i) artifact;
 - (ii) compression;
 - (iii) contrast;
 - (iv) exam identification;
 - (v) exposure level;
 - (vi) noise;
 - (vii) positioning; and
 - (viii) resolution.

R432-950-12. Physician Supervisor Responsibility.

- (1) A physician supervisor shall oversee the quality control program of the facility and verify that:
 - (a) each requirement of this rule is met;
 - (b) equipment is performing properly;
 - (c) the equipment and facility personnel meet applicable federal, state, and local licensure and registration requirements;
 - (d) any facility policy and procedure manual is reviewed at least annually; and
 - (e) safe operating procedures are used to protect each facility personnel and patient.
- (2) The physician shall annually document oversight activities for the quality control of the mammography service.

R432-950-13. Mammography Records.

- (1)(a) Each facility shall maintain a medical record for each patient who receives a screening or diagnostic mammography.
- (b) The facility shall provide for the filing, safe storage, and accessibility of medical records and ensure that each medical record is:
 - (i) protected against loss, defacement, tampering, fire, and flooding;
 - (ii) protected against access by any unauthorized individual; and
 - (iii) readily available upon the request of:
 - (A) any person authorized by written consent;
 - (B) any authorized representative of the department; or
 - (C) the attending physician.
- (2)(a) The facility shall establish a system to ensure each patient's mammogram is accessible for clinical follow-up when requested.
- (b)(i) Within 14 business days of receiving a request for information from an individual responsible for subsequent medical care of the patient, the facility shall send a copy of the mammogram and other appropriate information to the requesting individual.
- (ii) Medical information may be released only upon the written consent of the patient or the patient's legal representative.

NOTICES OF CHANGES IN PROPOSED RULES

(3) The facility shall try to obtain a previous mammogram for each patient if the previous mammogram is necessary for a physician to interpret the current exam.

(4)(a) The interpreting physician shall prepare and sign a written report of the interpretation of the results of the screening mammogram.

(b) The written report shall include a description of any detected abnormality and each recommendation for a subsequent follow-up study.

(c) The interpreting physician shall complete the report as soon as reasonably possible.

(d) The interpreting physician or designee shall document and communicate the results of the report to the referring physician or designated representative by any method that verifies receipt of the report.

(e) The interpreting physician or designee shall notify each patient who does not have a referring physician of the results of the report in language that is easily understood.

(5) The interpreting physician or designee shall document and communicate the results of each diagnostic report that has a high probability, or suspicion, of breast cancer to the referring physician or the designated representative by any method that verifies receipt of the information.

(6)(a) If the report in Subsection (5) is for a patient who does not have a referring physician, the results of that report shall be communicated in-person using language that is easily understood.

(b) The report shall state whether the patient needs to consult with a physician.

(c) The interpreting physician or designee shall try to make follow-up contact with the patient to determine whether that patient has consulted a physician for follow-up care.

(d) The interpreting physician or designee shall document in the patient's medical record each attempt to communicate the results to the patient.

(7) The facility shall keep the original and subsequent mammograms for at least five years from the date of a procedure.

R432-950-14. Education Requirements.

(1) Each patient has the right to be treated with dignity and given privacy during the examination.

(2) The facility shall establish an education system to ensure that each patient receives information on:

(a) the importance of the screening mammography to ongoing health;

(b) the process required to obtain the mammogram; and

(c) the purpose of the mammogram and how the mammogram is used to screen for breast cancer.

(3) The facility shall provide a written notification, based on the mammography report summary, to each patient, about breast tissue density information, in accordance with 21 CFR 900.12(c)(2).

R432-950-15. Collecting and Reporting Data.

(1)(a) The facility shall establish a system for collecting and periodic reporting of mammography examinations and clinical follow-up.

(b) Clinical follow-up data shall include the follow-up on the disposition of positive mammographic findings and the correlation of the surgical biopsy results with mammogram reports.

(c) The facility shall maintain records correlating any positive mammographic findings to biopsies done and the number of cancers detected.

(d) The facility shall report the results of the outcomes annually to ~~the~~JOL in a format provided by ~~the~~JOL.

(e) The report shall include at least the:

(i) number and names of any patients with positive mammographic findings lost to follow-up;

(ii) number of patients receiving screening mammograms;

(iii) total number of patients diagnosed with breast cancer based on a screening mammogram; and

(iv) total number of patients recommended for biopsy based on a screening mammogram.

(2) ~~The~~JOL shall provide each reporting facility, on a schedule determined by ~~the~~JOL, summary statistical reports that permit each facility to compare results to statewide and other comparative statistics.

R432-950-16. State Certification.

(1) Rule R380-600 applies to each applicant for a certificate or certificate holder for mammography services unless otherwise noted in this section.

(2) In addition to requirements in Section R380-600-4 to apply for certification, an applicant shall submit to ~~the~~JOL:

(a) verification of licensure or certification of required personnel; and

(b) verification of participation and quality control by the ACR for monitoring mammography services in the facility.

(3) Certification periods are 24 months and expire at midnight 24 months from the date of issuance.

R432-950-17. Inspections.

~~The~~JOL may conduct periodic validation inspections of any facility accredited by the ACR to determine compliance with state requirements.

R432-950-18. Penalties.

(1) Each facility shall ensure compliance with this rule.

(2) Any person who violates this rule may be subject to the penalties in Rule R380-600 and Title 26B, Chapter 2, Part 7, Penalties and Investigations.

KEY: health care facilities, mammography

Date of Last Change: [~~2025~~2026]

Notice of Continuation: August 13, 2021

Authorizing, and Implemented or Interpreted Law: 26B-2-202; 26B-2-602; 42 U.S.C. 263b; 21 CFR 900.12(c)(2)

End of the Notices of Changes in 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. 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.

NOTICE OF FIVE-YEAR REVIEW AND STATEMENT OF CONTINUATION

Rule number:	R525-8	Filing ID: 57544
Effective date:	03/25/2026	

Agency Information

1. Title catchline:	Health and Human Services, Substance Abuse and Mental Health, State Hospital	
Building:	Cannon Health Building	
Street address:	288 N 1460 W	
City, state:	Salt Lake City, UT	
Mailing address:	288 N 1460 W	
City, state and zip:	Salt Lake City, UT 84116	
Contact persons:		
Name:	Phone:	Email:
Thomas Dunford	801-538-4181	tdunford@utah.gov
Mariah Noble	385-214-1150	mariahnoble@utah.gov
Please address questions regarding information on this notice to the persons listed above.		

General Information

2. Rule catchline:	
R525-8. Forensic Mental Health Facility	
3. Statutory provisions that authorize or require this rule and an explanation of those particular statutory provisions:	
Subsection 26B-1-202(2)(a)	Subsection 26B-1-202(2)(a) allows the Department of Health and Human Services (department) to adopt rules as the department may consider necessary or desirable for providing health and social services to the people of Utah.
Subsection 26B-5-371(2)	Subsection 26B-5-371(2)(c) requires the department to make rules providing for the allocation of beds to the categories of populations accommodated in the Utah State Hospital forensic mental health facility for treatment, described in Subsection 26B-5-371(2)(a).
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 comments have been received since the last five-year review of this rule.	

<p>5. A reasoned justification for continuation of this rule, including reasons why the agency disagrees with comments in opposition to this rule, if any:</p> <p>This rule is necessary to meet statutory requirements and ensure the proper allocation of beds to individuals with mental illness or disabilities who are committed to the State Hospital forensic mental health facility until they are deemed appropriate for placement with the Utah Department of Corrections. Therefore, this rule should be continued.</p> <p>As there were no comments in opposition to this rule, the department has not responded to any such comment.</p>
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Agency Authorization Information

Agency head or designee and title:	Tracy S. Gruber, Executive Director	Date:	03/25/2026
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NOTICE OF FIVE-YEAR REVIEW AND STATEMENT OF CONTINUATION

Rule number:	R643-870	Filing ID: 51556
Effective date:	03/27/2026	

Agency Information

1. Title catchline:	Natural Resources; Oil, Gas and Mining; Abandoned Mine Reclamation		
Building:	Department of Natural Resources		
Street address:	1594 W North Temple, Suite 1210		
City, state:	Salt Lake City, UT 84114		
Contact persons:			
Name:	Phone:	Email:	
Natasha Ballif	801-589-5486	natashaballif@utah.gov	
Please address questions regarding information on this notice to the persons listed above.			

General Information

2. Rule catchline:	R643-870. Abandoned Mine Reclamation Regulation Definitions		
3. Statutory provisions that authorize or require this rule and an explanation of those particular statutory provisions:			
Section 40-10-2	This section grants the Board of Oil, Gas and Mining the necessary authority in regards to regulation of reclamation operations.		
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 comments have been received since the last five-year review.		
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 establishes the definitions used throughout the Title R643 rules and is essential to continue for administering the Abandoned Mine Reclamation program. Therefore, this rule should be continued.			

Agency Authorization Information

Agency head or designee and title:	Mick Thomas, Director	Date:	03/27/2026
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NOTICE OF FIVE-YEAR REVIEW AND STATEMENT OF CONTINUATION

Rule number:	R643-872	Filing ID: 51558
Effective date:	03/27/2026	

Agency Information

1. Title catchline:	Natural Resources; Oil, Gas and Mining; Abandoned Mine Reclamation		
Building:	Department of Natural Resources		
Street address:	1594 W North Temple, Suite 1210		
City, state:	Salt Lake City, UT 84114		
Contact persons:			
Name:	Phone:	Email:	
Natasha Ballif	801-589-5486	natashaballif@utah.gov	

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

General Information

2. Rule catchline:	
R643-872. Abandoned Mine Reclamation Fund	
3. Statutory provisions that authorize or require this rule and an explanation of those particular statutory provisions:	
Section 40-10-2	This section grants the Board of Oil, Gas and Mining the necessary authority in regards to regulation of reclamation operations.
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 comments have been received since the last five-year review.	
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 necessary as it establishes the general responsibilities for administration of Abandoned Mine Land Reclamation Programs and procedures for the Abandoned Mine Reclamation Fund to finance such programs. Therefore, this rule should be continued.	

Agency Authorization Information

Agency head or designee and title:	Mick Thomas, Director	Date:	03/27/2026
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NOTICE OF FIVE-YEAR REVIEW AND STATEMENT OF CONTINUATION

Rule number:	R643-874	Filing ID: 51561
Effective date:	03/27/2026	

Agency Information

1. Title catchline:	Natural Resources; Oil, Gas and Mining; Abandoned Mine Reclamation		
Building:	Department of Natural Resources		
Street address:	1594 W North Temple, Suite 1210		

FIVE-YEAR NOTICES OF REVIEW AND STATEMENTS OF CONTINUATION

City, state:	Salt Lake City, UT 84114	
Contact persons:		
Name:	Phone:	Email:
Natasha Ballif	801-589-5486	natashaballif@utah.gov
Please address questions regarding information on this notice to the persons listed above.		

General Information

2. Rule catchline:	
R643-874. General Reclamation Requirements	
3. Statutory provisions that authorize or require this rule and an explanation of those particular statutory provisions:	
Section 40-10-2	This section grants the Board of Oil, Gas and Mining the necessary authority in regards to regulation of reclamation operations.
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 comments have been received since the last five-year review.	
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 necessary as it establishes land and water eligibility requirements, reclamation objectives and priorities, and reclamation contractor responsibility. Therefore, this rule should be continued.	

Agency Authorization Information

Agency head or designee and title:	Mick Thomas, Director	Date:	03/27/2026
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NOTICE OF FIVE-YEAR REVIEW AND STATEMENT OF CONTINUATION

Rule number:	R643-875	Filing ID: 51565
Effective date:	03/27/2026	

Agency Information

1. Title catchline:	Natural Resources; Oil, Gas and Mining; Abandoned Mine Reclamation	
Building:	Department of Natural Resources	
Street address:	1594 W North Temple, Suite 1210	
City, state:	Salt Lake City, UT 84114	
Contact persons:		
Name:	Phone:	Email:
Natasha Ballif	801-589-5486	natashaballif@utah.gov
Please address questions regarding information on this notice to the persons listed above.		

General Information

2. Rule catchline:	
R643-875. Noncoal Reclamation	
3. Statutory provisions that authorize or require this rule and an explanation of those particular statutory provisions:	
Section 40-10-2	This section grants the Board of Oil, Gas and Mining the necessary authority in regards to regulation of reclamation operations.

FIVE-YEAR NOTICES OF REVIEW AND STATEMENTS OF CONTINUATION

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 comments have been received since the last five-year review.

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 necessary as it establishes land and water eligibility requirements for noncoal reclamation. Therefore, this rule should be continued.

Agency Authorization Information

Agency head or designee and title:	Mick Thomas, Director	Date:	03/27/2026
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NOTICE OF FIVE-YEAR REVIEW AND STATEMENT OF CONTINUATION

Rule number:	R643-877	Filing ID:	51559
Effective date:	03/27/2026		

Agency Information

1. Title catchline:	Natural Resources; Oil, Gas and Mining; Abandoned Mine Reclamation		
Building:	Department of Natural Resources		
Street address:	1594 W North Temple, Suite 1210		
City, state:	Salt Lake City, UT 84114		
Contact persons:			
Name:	Phone:	Email:	
Natasha Ballif	801-589-5486	natashaballif@utah.gov	

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

General Information

2. Rule catchline:
R643-877. Rights of Entry

3. Statutory provisions that authorize or require this rule and an explanation of those particular statutory provisions:

Section 40-10-2	This section grants the Board of Oil, Gas and Mining the necessary authority in regards to regulation of reclamation operations.
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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 comments have been received since the last five-year review.

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 necessary as it establishes procedures for entry upon lands or property by the Division of Oil, Gas and Mining; Abandoned Mine Reclamation for reclamation purposes. Therefore, this rule should be continued.

Agency Authorization Information

Agency head or designee and title:	Mick Thomas, Director	Date:	03/27/2026
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NOTICE OF FIVE-YEAR REVIEW AND STATEMENT OF CONTINUATION		
Rule number:	R643-879	Filing ID: 51568
Effective date:	03/27/2026	

Agency Information

1. Title catchline:	Natural Resources; Oil, Gas and Mining; Abandoned Mine Reclamation	
Building:	Department of Natural Resources	
Street address:	1594 W North Temple, Suite 1210	
City, state:	Salt Lake City, UT 84114	
Contact persons:		
Name:	Phone:	Email:
Natasha Ballif	801-589-5486	natashaballif@utah.gov
Please address questions regarding information on this notice to the persons listed above.		

General Information

2. Rule catchline:	
R643-879. Acquisition, Management, and Disposition of Lands and Water	
3. Statutory provisions that authorize or require this rule and an explanation of those particular statutory provisions:	
Section 40-10-2	This section grants the Board of Oil, Gas and Mining the necessary authority in regards to regulation of reclamation operations.
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 comments have been received since the last five-year review.	
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 necessary as it establishes procedures for acquisition of eligible land and water resources for emergency and reclamation purposes by the Division of Oil, Gas and Mining; Abandoned Mine Reclamation under an approved Reclamation Program. Therefore, this rule should be continued.	

Agency Authorization Information

Agency head or designee and title:	Mick Thomas, Director	Date:	03/27/2026
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NOTICE OF FIVE-YEAR REVIEW AND STATEMENT OF CONTINUATION		
Rule number:	R643-882	Filing ID: 51564
Effective date:	03/27/2026	

Agency Information

1. Title catchline:	Natural Resources; Oil, Gas and Mining; Abandoned Mine Reclamation	
Building:	Department of Natural Resources	
Street address:	1594 W North Temple, Suite 1210	
City, state:	Salt Lake City, UT 84114	
Contact persons:		
Name:	Phone:	Email:
Natasha Ballif	801-589-5486	natashaballif@utah.gov

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

General Information

2. Rule catchline:	
R643-882. Reclamation on Private Land	
3. Statutory provisions that authorize or require this rule and an explanation of those particular statutory provisions:	
Section 40-10-2	This section grants the Board of Oil, Gas and Mining the necessary authority in regards to regulation of reclamation operations.
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 comments have been received since the last five-year review.	
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 necessary as it authorizes reclamation on private land and establishes procedures for recovery of the cost of reclamation activities conducted on privately owned land by the Division of Oil, Gas and Mining; Abandoned Mine Reclamation. Therefore, this rule should be continued.	

Agency Authorization Information

Agency head or designee and title:	Mick Thomas, Director	Date:	03/27/2026
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NOTICE OF FIVE-YEAR REVIEW AND STATEMENT OF CONTINUATION

Rule number:	R643-884	Filing ID:	51566
Effective date:	03/27/2026		

Agency Information

1. Title catchline:	Natural Resources; Oil, Gas and Mining; Abandoned Mine Reclamation		
Building:	Department of Natural Resources		
Street address:	1594 W North Temple, Suite 1210		
City, state:	Salt Lake City, UT 84114		
Contact persons:			
Name:	Phone:	Email:	
Natasha Ballif	801-589-5486	natashaballif@utah.gov	

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

General Information

2. Rule catchline:	
R643-884. State Reclamation Plan	
3. Statutory provisions that authorize or require this rule and an explanation of those particular statutory provisions:	
Section 40-10-2	This section grants the Board of Oil, Gas and Mining the necessary authority in regards to regulation of reclamation operations.

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 comments have been received since the last five-year review.

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 necessary as it establishes the procedures and requirements for the preparation, submission, and approval of the Reclamation Plan. Therefore, this rule should be continued.

Agency Authorization Information

Agency head or designee and title:	Mick Thomas, Director	Date:	03/27/2026
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NOTICE OF FIVE-YEAR REVIEW AND STATEMENT OF CONTINUATION

Rule number:	R643-886	Filing ID:	51567
Effective date:	03/27/2026		

Agency Information

1. Title catchline:	Natural Resources; Oil, Gas and Mining; Abandoned Mine Reclamation		
Building:	Department of Natural Resources		
Street address:	1594 W North Temple, Suite 1210		
City, state:	Salt Lake City, UT 84114		
Contact persons:			
Name:	Phone:	Email:	
Natasha Ballif	801-589-5486	natashaballif@utah.gov	

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

General Information

2. Rule catchline:
R643-886. State Reclamation Grants

3. Statutory provisions that authorize or require this rule and an explanation of those particular statutory provisions:

Section 40-10-2	This section grants the Board of Oil, Gas and Mining the necessary authority in regards to regulation of reclamation operations.
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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 comments have been received since the last five-year review.

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 necessary as it sets forth procedures for grants to the Division of Oil, Gas and Mining; Abandoned Mine Reclamation for the reclamation of eligible lands and water and other activities necessary to carry out the plan as approved. Therefore, this rule should be continued.

Agency Authorization Information

Agency head or designee and title:	Mick Thomas, Director	Date:	03/27/2026
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NOTICE OF FIVE-YEAR REVIEW AND STATEMENT OF CONTINUATION		
Rule number:	R671-402	Filing ID: 51828
Effective date:	03/23/2026	

Agency Information

1. Title catchline:	Pardons (Board of), Administration	
Street address:	448 E Winchester St, #300	
City, state:	Murray, UT 84107	
Contact persons:		
Name:	Phone:	Email:
Jennifer Yim	801-261-6464	jmyim@utah.gov
Robert Steed	801-366-0216	robertesteed@agutah.gov
Zarah Borja	385-910-3215	zborja@agutah.gov
Please address questions regarding information on this notice to the persons listed above.		

General Information

2. Rule catchline:	
R671-402. Special Conditions of Parole	
3. Statutory provisions that authorize or require this rule and an explanation of those particular statutory provisions:	
Subsection 63G-3-201(2)	This section provides the procedural requirement that policies be adopted as formal rules.
Subsection 63G-3-201(3)	This section provides that the rules be filed, published, and adopted through the Administrative Rulemaking Act.
Subsection 77-27-9(5)	This subsection authorizes the Board to determine and impose conditions of parole and require compliance with those conditions as part of release.
Section 77-27-6.1	This section primarily governs procedures and considerations in the parole process. It helps define the process and factors involved in parole and how the Board conducts its decision-making.
Section 77-27-9	This section gives the Board power to create parole conditions and develop general categories or standard conditions.
Section 77-27-10	This section gives the Board authority to supervise and enforce compliance, making it practical to apply uniform conditions across parolees.
Section 77-27-11	This section gives legal effect and enforceability to whatever conditions the Board sets.
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 have been received during and since the last five-year review.	
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 fully up-to-date and required to meet the Board's statutory and constitutional hearing duties. Therefore, this rule should be continued.	

Agency Authorization Information

Agency head or designee and title:	Blake Hills, Chair	Date:	03/23/2026
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NOTICE OF FIVE-YEAR REVIEW AND STATEMENT OF CONTINUATION

Rule number:	R708-46	Filing ID:	55804
Effective date:	03/17/2026		

Agency Information

1. Title catchline:	Public Safety, Driver License		
Mailing address:	PO Box 144501		
City, state and zip:	Salt Lake City, UT 84114-4501		
Contact persons:			
Name:	Phone:	Email:	
Kim Gibb	801-556-8198	kgibb@utah.gov	
Tara Zamora	801-964-4483	tarazamora@utah.gov	
Britani Flores	801-884-8313	bflores@utah.gov	
Please address questions regarding information on this notice to the persons listed above.			

General Information

2. Rule catchline:	
R708-46. Knowledge Test in Individual's Preferred Language	
3. Statutory provisions that authorize or require this rule and an explanation of those particular statutory provisions:	
Section 53-3-206	This section requires the Driver License Division (division) to make rules establishing a process for individual's to take the written knowledge test in their preferred language.
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 comments have been received in 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 is required by statute, and is necessary in order for the division to establish a method and process to examine individual's in their preferred language. Therefore, this rule should be continued.	

Agency Authorization Information

Agency head or designee and title:	Jimmy Higgs, Division Director	Date:	03/17/2026
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NOTICE OF FIVE-YEAR REVIEW AND STATEMENT OF CONTINUATION

Rule number:	R850-12	Filing ID:	53308
Effective date:	03/24/2026		

Agency Information

1. Title catchline:	School and Institutional Trust Lands, Administration		
Building:	102 Tower		

FIVE-YEAR NOTICES OF REVIEW AND STATEMENTS OF CONTINUATION

Street address:	102 S 200 E, #600	
City, state:	Salt Lake City, UT	
Mailing address:	102 S 200 E, #600	
City, state and zip:	Salt Lake City, UT 84111	
Contact persons:		
Name:	Phone:	Email:
Mike Johnson	801-538-5180	mjohnson@utah.gov
Lisa Wells	801-538-5154	lisawells@utah.gov
Please address questions regarding information on this notice to the persons listed above.		

General Information

2. Rule catchline:	
R850-12. Prohibited and Restricted Uses of Trust Lands	
3. Statutory provisions that authorize or require this rule and an explanation of those particular statutory provisions:	
Subsection 53C-1-302(1)	The statute states the management of Trust Lands is through procedures and rules. Rule R850-12 gives the School and Institutional Trust Lands Administration (agency) the authority to manage the lands for the beneficiaries and prohibits certain activities on the lands.
Subsection 53C-2-301(1)	The statute gives a general explanation of the illegal activities on trust lands. This rule explains in detail activities that are prohibited on Trust Lands.
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 have been received by the agency about this rule since the new rule was enacted.	
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 purpose of this rule is to provide parameters as to what activities are prohibited or restricted on trust lands. It helps both the public and agency staff to know how trust lands may be used. Therefore, this rule should be continued.	

Agency Authorization Information

Agency head or designee and title:	Michelle McConkie, Director	Date:	03/24/2026
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NOTICE OF FIVE-YEAR REVIEW AND STATEMENT OF CONTINUATION

Rule number:	R916-1	Filing ID: 57738
Effective date:	03/21/2026	

Agency Information

1. Title catchline:	Transportation, Operations, Construction
Building:	Calvin Rampton
Street address:	4501 S 2700 W
City, state:	Taylorsville, UT
Mailing address:	PO Box 148455
City, state and zip:	Salt Lake City, UT 84114-8455

FIVE-YEAR NOTICES OF REVIEW AND STATEMENTS OF CONTINUATION

Contact persons:		
Name:	Phone:	Email:
Leif Elder	801-580-8296	lelder@utah.gov
Marlene Galindo	801-965-4026	mgalindo1@utah.gov
James Godin	801-573-7181	jamesjgodin@agutah.gov
Lori Edwards	385-341-3414	loriedwards@agutah.gov
Please address questions regarding information on this notice to the persons listed above.		

General Information

2. Rule catchline:	
R916-1. Advertising and Awarding Construction Contracts	
3. Statutory provisions that authorize or require this rule and an explanation of those particular statutory provisions:	
Section 72-1-201	This gives the Department of Transportation (department) general rulemaking authority.
Section 72-6-107	This requires the department to establish procedures for hearing evidence that a region within the department violated certain provisions of the Construction, Maintenance, and Operations Act and administering sanctions for those violations.
Section 63G-6a-107.7	This gives the department rulemaking authority for procurement processes.
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 comments have been reviewed 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:	
The department has recently repealed and reenacted this rule and that repeal and reenactment is currently undergoing the administrative rulemaking process, awaiting to be codified. Therefore, this rule should be continued.	

Agency Authorization Information

Agency head or designee and title:	Carlos M. Bracerias, PE, Executive Director	Date:	03/20/2026
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NOTICE OF FIVE-YEAR REVIEW AND STATEMENT OF CONTINUATION

Rule number:	R916-2	Filing ID: 57739
Effective date:	03/21/2026	

Agency Information

1. Title catchline:	Transportation, Operations, Construction	
Building:	Calvin Rampton	
Street address:	4501 S 2700 W	
City, state:	Taylorsville, UT	
Mailing address:	PO Box 148455	
City, state and zip:	Salt Lake City, UT 84114-8455	
Contact persons:		
Name:	Phone:	Email:
Leif Elder	801-580-8296	lelder@utah.gov

FIVE-YEAR NOTICES OF REVIEW AND STATEMENTS OF CONTINUATION

Marlene Galindo	801-965-4026	mgalindo1@utah.gov
James Godin	801-573-7181	jamesjgodin@agutah.gov
Lori Edwards	385-341-3414	loriedwards@agutah.gov
Please address questions regarding information on this notice to the persons listed above.		

General Information

2. Rule catchline:	
R916-2. Prequalification of Contractors	
3. Statutory provisions that authorize or require this rule and an explanation of those particular statutory provisions:	
Section 72-1-201	This gives the Department of Transportation (department) general rulemaking authority.
Section 63G-6a-107.7	This gives the department rulemaking authority for procurement processes.
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 comments have been reviewed 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:	
The department has recently repealed and reenacted this rule and that repeal and reenactment is currently undergoing the administrative rulemaking process, awaiting to be codified. Therefore, this rule should be continued.	

Agency Authorization Information

Agency head or designee and title:	Carlos M. Braceras, PE, Executive Director	Date:	03/20/2026
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NOTICE OF FIVE-YEAR REVIEW AND STATEMENT OF CONTINUATION

Rule number:	R926-9	Filing ID: 52142
Effective date:	03/21/2026	

Agency Information

1. Title catchline:	Transportation, Program Development	
Building:	Calvin Rampton	
Street address:	4501 S 2700 W	
City, state:	Taylorsville, UT	
Mailing address:	PO Box 148455	
City, state and zip:	Salt Lake City, UT 84114-8455	
Contact persons:		
Name:	Phone:	Email:
Leif Elder	801-580-8296	lelder@utah.gov
Marlene Galindo	801-965-4026	mgalindo1@utah.gov
James Godin	801-573-7181	jamesjgodin@agutah.gov
Lori Edwards	385-341-3414	loriedwards@agutah.gov
Please address questions regarding information on this notice to the persons listed above.		

General Information

2. Rule catchline:	
R926-9. Establishment, Designation and Operation of Tollways	
3. Statutory provisions that authorize or require this rule and an explanation of those particular statutory provisions:	
Section 72-6-118	This section requires the Department of Transportation (department) and commission to make rules for establishing and operating tollways on state highways, as well as setting the amount of any toll imposed or collected.
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 comments have been received 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:	
The statute still requires this rule and the department finds it necessary to keep it in place. Therefore, this rule should be continued.	

Agency Authorization Information

Agency head or designee and title:	Carlos M. Braceras, PE, Executive Director	Date:	03/20/2026
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NOTICE OF FIVE-YEAR REVIEW AND STATEMENT OF CONTINUATION

Rule number:	R940-1	Filing ID: 57686
Effective date:	03/21/2026	

Agency Information

1. Title catchline:	Transportation Commission, Administration	
Building:	Calvin Rampton	
Street address:	4501 S 2700 W	
City, state:	Taylorsville, UT	
Mailing address:	PO Box 148455	
City, state and zip:	Salt Lake City, UT 84114-8455	
Contact persons:		
Name:	Phone:	Email:
Leif Elder	801-580-8296	lelder@utah.gov
Marlene Galindo	801-965-4026	mgalindo1@utah.gov
James Godin	801-573-7181	jamesjgodin@agutah.gov
Lori Edwards	385-341-3414	loriedwards@agutah.gov
Please address questions regarding information on this notice to the persons listed above.		

General Information

2. Rule catchline:	
R940-1. Establishment of Toll Rates	
3. Statutory provisions that authorize or require this rule and an explanation of those particular statutory provisions:	
Section 72-2-120	This section creates the Tollway Special Revenue Fund.

FIVE-YEAR NOTICES OF REVIEW AND STATEMENTS OF CONTINUATION

Section 72-6-118	This section requires the Transportation Commission (commission) to make rules for establishing and operating tollways on highways.
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 comments have been received 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:	
The statute still requires this rule and the commission finds it necessary to keep this rule in place. Therefore, this rule should be continued.	

Agency Authorization Information

Agency head or designee and title:	Carlos M. Braceras, PE, Executive Director	Date:	03/20/2026
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NOTICE OF FIVE-YEAR REVIEW AND STATEMENT OF CONTINUATION

Rule number:	R940-7	Filing ID: 52163
Effective date:	03/21/2026	

Agency Information

1. Title catchline:	Transportation Commission, Administration	
Building:	Calvin Rampton	
Street address:	4501 S 2700 W	
City, state:	Taylorsville, UT	
Mailing address:	PO Box 148455	
City, state and zip:	Salt Lake City, UT 84114-8455	
Contact persons:		
Name:	Phone:	Email:
Leif Elder	801-580-8296	lelder@utah.gov
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Please address questions regarding information on this notice to the persons listed above.

General Information

2. Rule catchline:	
R940-7. Marda Dillree Corridor Preservation Fund	
3. Statutory provisions that authorize or require this rule and an explanation of those particular statutory provisions:	
Subsection 72-2-117(6)(f)	This subsection requires the Transportation Commission (commission) to make rules for awarding money, applying money, and repaying money under the Mardee Dillree Corridor Preservation Fund.
Subsection 72-2-117(9)(a)	This subsection requires the commission to make rules establishing a transportation corridor preservation advisory council.

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 comments have been received 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:

The statute still requires this rule and the commission finds it necessary to keep this rule in place. Therefore, this rule should be continued.

Agency Authorization Information

Agency head or designee and title:	Carlos M. Braceras, PE, Executive Director	Date:	03/20/2026
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End of the Five-Year Notices of Review and Statements of Continuation Section

NOTICES OF RULE EFFECTIVE DATES

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.

Agriculture and Food

Plant Industry

No. 57769 (Amendment) R68-11: Quarantine Pertaining to the Emerald Ash Borer

Published: 02/01/2026

Effective: 04/06/2026

No. 57771 (Repeal and Reenact) R68-14: Quarantine Pertaining to Spongy Moth - *Lymantria Dispar*

Published: 02/15/2026

Effective: 04/06/2026

No. 57768 (Repeal and Reenact) R68-18: Quarantine Pertaining to Karnal Bunt

Published: 02/01/2026

Effective: 04/06/2026

Commerce

Professional Licensing

No. 57787 (Amendment) R156-46b: Division Utah Administrative Procedures Act Rule

Published: 02/15/2026

Effective: 03/24/2026

No. 57745 (Amendment) R156-55a: Utah Construction Trades Licensing Act Rule

Published: 02/15/2026

Effective: 03/30/2026

No. 57633 (Amendment) R156-56: Building Inspector and Factory Built Housing Licensing Act Rule

Published: 12/01/2025

Effective: 03/30/2026

No. 57657 (Amendment) R156-61: Psychologist Licensing Act Rule

Published: 12/01/2025

Effective: 03/30/2026

No. 57657 (Change in Proposed Rule) R156-61: Psychologist Licensing Act Rule

Published: 02/15/2026

Effective: 03/30/2026

Real Estate

No. 57786 (Amendment) R162-2c: Utah Residential Mortgage Practices and Licensing Rules
Published: 02/15/2026
Effective: 03/24/2026

Education

Administration

No. 57795 (Amendment) R277-324: Paraprofessional/Paraeducator Programs, Assignments, and Qualifications
Published: 03/01/2026
Effective: 04/07/2026

No. 57796 (Amendment) R277-479: Funding for Charter School Students With Disabilities on an IEP
Published: 03/01/2026
Effective: 04/07/2026

No. 57797 (Amendment) R277-700: The Elementary and Secondary School General Core
Published: 03/01/2026
Effective: 04/07/2026

No. 57798 (Amendment) R277-717: High School Course Grading Requirements
Published: 03/01/2026
Effective: 04/07/2026

No. 57799 (Amendment) R277-929: State Council on Military Children
Published: 03/01/2026
Effective: 04/07/2026

Environmental Quality

Waste Management and Radiation Control, Waste Management

No. 57803 (Amendment) R315-101: Cleanup Action and Risk-Based Closure Standards
Published: 03/01/2026
Effective: 04/16/2026

Governor

Economic Opportunity

No. 57788 (New Rule) R357-48: Affordable Housing Infrastructure Grant Rule
Published: 02/15/2026
Effective: 03/27/2026

Health and Human Services

Administration

No. 57746 (New Rule) R380-90: Accounting and Protection of Federal Benefits for Minor Beneficiaries in Custody
Published: 01/15/2026
Effective: 03/16/2026

Integrated Healthcare

No. 57699 (Amendment) R414-42: Telehealth
Published: 12/15/2025
Effective: 03/25/2026

Transportation

Motor Carrier

No. 57758 (Amendment) R909-2: Utah Size and Weight Rule
Published: 02/01/2026
Effective: 03/16/2026

NOTICES OF RULE EFFECTIVE DATES

Operations, Construction

No. 57738 (Repeal and Reenact) R916-1: Advertising and Awarding Construction Contracts

Published: 01/15/2026

Effective: 03/16/2026

No. 57739 (Repeal and Reenact) R916-2: Prequalification of Contractors

Published: 01/15/2026

Effective: 03/16/2026

No. 57744 (Repeal) R916-3: Design Build Contracts

Published: 01/15/2026

Effective: 03/16/2026

No. 57742 (Repeal) R916-4: Construction Manager/General Contractor and Progressive Construction Manager/General Contractor Contracts

Published: 01/15/2026

Effective: 03/16/2026

Transportation Commission

Administration

No. 57686 (Amendment) R940-1: Establishment of Toll Rates

Published: 12/15/2025

Effective: 03/16/2026

End of the Notices of Rule Effective Dates Section