

⊕ Chapter 50  
Community Care Licensing

Article

[1. Licensing Process. \(7 AAC 50.005 - 7 AAC 50.060\)](#)

[2. Administration. \(7 AAC 50.100 - 7 AAC 50.140\)](#)

[3. Personnel. \(7 AAC 50.200 - 7 AAC 50.250\)](#)

[4. Admission and Discharge. \(7 AAC 50.300 - 7 AAC 50.340\)](#)

[5. Care and Services. \(7 AAC 50.400 - 7 AAC 50.460\)](#)

[6. Environment. \(7 AAC 50.500 - 7 AAC 50.540\)](#)

[7. Specializations. \(7 AAC 50.600 - 7 AAC 50.650\)](#)

[8. Maternity Homes. \(7 AAC 50.700 - 7 AAC 50.790\)](#)

[9. Residential Pyschiatric Treatment Centers. \(7 AAC 50.800 - 7 AAC 50.885\)](#)

[10. Miscellaneous Provisions. \(7 AAC 50.990 - 7 AAC 50.990\)](#)

⊕ **Editor's note:** The provisions of this chapter, effective 1/1/96, and distributed in Register 136, constitute a completely new and comprehensive scheme of regulations for the licensing, operation, and department supervision of child care facilities, residential child care facilities, and foster homes. The changes are the result of the enactment of ch. 124, SLA 1994, which completely rewrote [AS 47.35](#) effective January 1, 1996. These new provisions replace former 7 AAC 50.001 - 7 AAC 50.999. The history line at the end of each new section does not reflect the history of those replaced provisions before 1/1/96, nor is the section numbering for the new provisions related to the numbering before that date. Provisions that, before Register 136, appeared at 7 AAC 50.900 - 7 AAC 50.999 were relocated as of Register 136, to appear as 7 AAC [53.900](#) - 7 AAC [53.999](#).

As of Register 154 (July 2000), the provisions of 7 AAC [50](#) relating to child care facility licensing were relocated by the regulations attorney under [AS 44.62.125](#) (b)(6) to 4 AAC [62](#) in accordance with ch. 58, SLA 1999. The regulations attorney made certain technical edits in some of the remaining sections of the chapter to reflect the transfer.

---

**⊕ Article 1**  
**Licensing Process**

Section

[5. Applicability.](#)

[10. Exemptions from licensure requirements.](#)

[15. Voluntary licensure; no license issued for certain exempt facilities.](#)

[20. Implementation.](#)

[25. Timeframes.](#)

[30. Application for license.](#)

[35. Application for foster home license.](#)

[40. Inspections and evaluations by organizations or individuals.](#)

[45. \(Deleted\).](#)

[50. Provisional foster home license issued under emergency conditions.](#)

[55. Variances for foster care by relatives.](#)

[60. Self-monitoring reports.](#)

**⊕ 7 AAC 50.005. Applicability**

⊕ (a) The provisions of this chapter apply to foster homes, and residential child care facilities licensed or required to be licensed under [AS 47.10.310](#) and 47.10.392; [AS 47.35.015](#) ; or [AS 47.80.140](#) . To the extent practicable, the requirements set out in this chapter apply generally to both facility types. However, where necessary or appropriate, various specific requirements set out in this chapter apply to less than both types of facilities and, in some cases, to less than both kinds of facilities of a particular type, depending on certain factors, such as the type or size of facility and whether the facility has any employees.

(b) The provisions of a section apply to both facility types regulated under this chapter, unless the section denotes applicability to a specific facility type. When less than both facility types are addressed in a section, the first subsection or paragraph of the section will include the full name of each specific facility type regulated under the section. Further subsections or paragraphs may employ abbreviated terms such as "center," "home," or "facility" to refer to the facility type, rather than the full name of the facility type.

(c) In the event of conflict between a generally applicable requirement and a specific requirement applicable to a particular type or size of facility, the requirement specifically applicable to the facility type or size applies.

(d) Deleted 7/1/2000.

**⊕ History: Eff. 1/1/96, Register 136**

✚ **Authority:** [AS 44.29.020](#) [AS 47.35.010](#)

✚ **7 AAC 50.010. Exemptions from licensure requirements**

✚ (a) In addition to those persons who are exempt from the requirements of this chapter under [AS 47.35.015](#), the following persons are exempt from the licensure requirements of [AS 47.35.005](#) - 47.35.900:

- (1) a person caring for a child in the child's own home, whether related to the child or not;
- (2) a person designated by a foster parent for the supervision of a child during the planned or emergency absence of the foster parent for a period of no more than 21 days;
- (3) a person operating a residential child care facility on a United States Department of Defense installation or on a federal reserve;
- (4) a person licensed as an assisted living home under [AS 47.33](#) who admits a child for care depending on an evaluation of
  - (A) the number, ages, needs, and characteristics of children that the facility intends to admit for care;
  - (B) the physical accommodations, staff qualifications, plan for supervision, and health and safety provisions; and
  - (C) the proposed length of stay of children in the program; and
- (5) a person providing boarding care exclusively for children 16 years of age and older if
  - (A) each parent of a child has agreed to the placement of the child in a home selected by the school in which the child is enrolled; and
  - (B) the person providing the boarding care has, for each child in care, an authorization for emergency medical care.
- (b) Deleted 7/1/2000.
- (c) The division will, in its discretion and on a case by case basis, grant an exemption from the requirements of this chapter to a person providing supervised transition living or supervised apartment living for children age 16 or older depending upon an evaluation of
  - (1) the number, ages, needs, and characteristics of children the person intends to serve;
  - (2) admission criteria and reevaluation criteria that will be used to determine readiness and continuing capacity of a child for self-sufficiency;
  - (3) the physical accommodations, staff qualifications, and plan for supervision;
  - (4) proposed length of stay in the program; and
  - (5) how the person represents the program and support services the person will provide as demonstrated in brochures and other materials that are available to the child and to the public.

⊕ **History:** Eff. 1/1/96, Register 136; am 3/1/98, Register 145

⊕ **Authority:** [AS 44.29.020](#) [AS 47.35.010](#) [AS 47.35.015](#)

⊕ **7 AAC 50.015. Voluntary licensure; no license issued for certain exempt facilities**

⊕ The division will not issue a license to facilities that are exempt under [AS 47.35.015](#) (b)(3), (b)(5), or (c)(1) - (3).

⊕ **History:** Eff. 1/1/96, Register 136; am 3/1/98, Register 145

⊕ **Authority:** [AS 44.29.020](#) [AS 47.35.010](#)

⊕ **7 AAC 50.020. Implementation**

⊕ (a) Unless extended by the division in its discretion, a facility licensed before March 1, 1998 has until September 1, 1998 or the date by which its license must be renewed or converted from provisional to biennial status, whichever is sooner, in which to make any changes to the physical environment of the facility or obtain any new documentation required under this chapter.

(b) The licensing representative will not assess compliance with the requirements of this chapter by a facility licensed before March 1, 1998 until the facility's license is renewed or converted from provisional to biennial status, or until an investigation of an allegation of noncompliance with a requirement of [AS 47.35](#) or this chapter, whichever occurs first.

⊕ **History:** Eff. 1/1/96, Register 136; am 3/1/98, Register 145

⊕ **Authority:** [AS 44.29.020](#) [AS 47.35.010](#)

⊕ **7 AAC 50.025. Timeframes**

⊕ (a) A self-monitoring report by a facility under [AS 47.35.043](#) must be submitted by the first anniversary date of the agency's biennial license.

(b) The following timeframes apply to review for compliance with [AS 47.35](#) or this chapter or other action by the licensing representative under [AS 47.35](#) or this chapter:

(1) review for completeness of an application for a license or a request for a variance and notification to the applicant of omissions or additional information required - 10 days after the receipt of application or request;

(2) inspection and investigation of an application for an initial license - 90 days after the receipt of a completed application;

(3) inspection and investigation of an application for renewal of a biennial license - 90 days after the receipt of a completed application;

(4) except as provided in (c) of this section, a request for an amended license - within 20 days after receipt of a request for an amended license;

(5) except as provided in (c) of this section, a notification of change needing an amended license - within 20 days after receipt of a notice under [AS 47.35.047](#) or 7 AAC [50.140](#) (a) or (b), if the division determines that a notice would necessitate an amended license.

(c) The licensing representative may extend the timeframes specified in (b)(4) and (5) of this section, if the licensing representative determines that a longer period is required to obtain additional information and evaluate the effect of the request or notification.

✚ **History:** Eff. 1/1/96, Register 136; am 1/1/2001, Register 156

✚ **Authority:** [AS 44.29.020](#) [AS 47.35.010](#)

✚ **7 AAC 50.030. Application for license**

✚ (a) If an orientation and pre-service training program is available in the community, the licensing representative may require an applicant for a license to operate a facility under this chapter to attend the program. If the applicant does not complete any required program, the licensing representative shall suspend processing the application, until the requirement is met.

(b) An applicant for a license to operate a facility under this chapter shall

(1) submit the application on forms provided by the division, including the release forms specified in (4) of this subsection;

(2) comply with statutes and regulations setting out division procedures;

(3) initiate the application in the name of the individual or legal entity responsible for the operation of the agency; and

(4) submit release forms completed by the administrator or candidate to be the administrator of a facility, foster parent, all individuals, age 16 and older, living in the home of the applicant, and any individual, age 16 and older who resides in any part of the facility, if that individual has direct access from the individual's residence to the part of the facility where child care is provided; the release forms shall authorize the licensing representative to

(A) review criminal justice information;

(B) review protective service records; in this subparagraph, "protective services records" means records of the department developed under the authority of AS 47.10; 47.14; and 47.17;

(C) review licensing records;

(D) request a health, probation, or mental health evaluation, if considered necessary by the division to evaluate whether the individual meets the requirements of [AS 47.35](#) and this chapter; and

(E) share this information with the applicant for a license or licensee, to the extent permitted by state or federal law.

(c) An application for a license to operate a facility must contain the following items, as applicable to each type of facility:

(1) information required by [AS 47.35.017](#) (b);

- (2) a copy of enabling legislation, charter, partnership agreement, constitution, or articles of incorporation for the applicant, if the applicant is a legal entity;
  - (3) the phone number and electronic mail address, if any, of the facility and of the applicant, including each person who has an ownership or management interest in the facility;
  - (4) the name, address, phone number, electronic mail address, if any, and title of the chief executive officer of the unit or subunit of government, if the applicant is a government unit;
  - (5) names, phone numbers, electronic mail addresses, if any, and mailing addresses of four references for the applicant;
  - (6) fingerprint cards for persons required to submit them under [AS 47.35.017](#) (b) and 7 AAC [50.210\(g\)](#) ;
  - (7) ages of children to be cared for;
  - (8) a request for a variance of this chapter, if applicable;
  - (9) any specializations for which approval is sought under 7 AAC [50.600](#) - 7 AAC [50.650](#) of this chapter;
  - (10) water test results, if applicable;
  - (11) information for parent referral and placement agencies;
  - (12) the plan of operation for the facility, including an organization chart, staffing and other plans, policies, rules, program descriptions, schedules, forms, evaluation criteria, and similar material required by [AS 47.35](#) and this chapter;
  - (13) information requested by the child placement agency funding the facility, such as race of a foster parent; and
  - (14) other information required by the division on the application to enable the division to determine if the applicant meets the requirements of [AS 47.35](#) and this chapter.
- (d) An applicant for a provisional or a biennial license under [AS 47.35](#) shall provide the information specified under (c) of this section as applicable to the type of facility.
- (e) An application for a license must include a signed declaration by the applicant, or by a person authorized to submit the application on behalf of an applicant that is not an individual, certifying that the contents of the application and the information provided with it are true, accurate, and complete.
- (f) An application is not complete unless it provides all of the information required by [AS 47.35.017](#) (b) and this section, unless it is an application for biennial renewal of a license. If the application is an application for biennial renewal of a license, only the attachments to the application for the license that require updating must be submitted with the application for renewal.
- (g) In this section, "management interest" includes membership on a governing board or body of the agency.

✚ **History:** Eff. 1/1/96, Register 136; am 3/1/98, Register 145; am 1/1/2001, Register 156

✚ **Authority:** [AS 44.29.020](#) [AS 47.35.010](#) [AS 47.35.017](#)

✚ **7 AAC 50.035. Application for foster home license**

✚ In applying for a foster home license, if the household is headed by two adults who act as head of the household, both adults must apply for the license.

✚ **History:** Eff. 1/1/96, Register 136

✚ **Authority:** [AS 44.29.020](#) [AS 47.35.010](#)

✚ **7 AAC 50.040. Inspections and evaluations by organizations or individuals**

✚ (a) The division will, in its discretion, enter into an agreement authorizing an individual or a private or government organization to inspect and evaluate applicants for a license or renewal of a license under this chapter and to monitor facility operations if the division determines that the individual or organization is qualified under [AS 47.35](#) and this chapter to do so. The agreement may authorize a local organization or individual to

(1) obtain a completed licensing application or renewal application from the applicant;

(2) inspect and evaluate the proposed facility;

(3) request sanitation and environmental or fire safety inspections from authorities if inspections are required by applicable regulations or considered necessary by the individual or organization;

(4) submit the application, licensing evaluation, and all related reports to the nearest division office; and

(5) provide ongoing monitoring.

(b) An organization or individual authorized under (a) of this section may recommend that a license be issued, renewed, denied, or revoked. However, the final decision will be made by the division. The division will inform the organization or individual of its decision.

(c) An organization or individual authorized to act under (a) of this section shall immediately report to the division any noncompliance with a requirement of [AS 47.35](#) or this chapter that might cause risk to the life or safety of a child in care. The division will evaluate the report and, if the division determines that an investigation is warranted, will develop a coordinated plan for the investigation or delegate the investigation to the individual or organization.

(d) The division will, in its discretion, withdraw the agreement entered under (a) of this section after 30 days notice to the individual or agency if the division determines that the inspections and evaluations of the individual or agency do not adequately reduce risk of harm to the children in care.

(e) The division will, in its discretion, enter into an agreement authorizing an individual or a private or government agency to evaluate whether individuals meet the caregiver qualifications established under 7 AAC [50.210](#) and 7 AAC [50.220](#) in order to develop a list of qualified substitute caregivers available in a community.

✚ **History:** Eff. 1/1/96, Register 136

✚ **Authority:** [AS 44.29.020](#) [AS 47.35.010](#)

✚ **7 AAC 50.045. Delegation and withdrawal of authority to license child care facilities**

✚ Deleted 7/1/2000.

✚ **History:** Eff. 1/1/96, Register 136; am 3/1/98, Register 145

✚ **7 AAC 50.050. Provisional foster home license issued under emergency conditions**

✚ (a) The division will, in its discretion, issue a provisional foster home license to an applicant if a child must be placed immediately and the division determines that it is in the child's best interest to place the child in the applicant's home. The division will issue the provisional license whether or not the application is complete, so long as the division is able to determine from the information provided, and any further investigation, that the applicant meets minimal requirements to protect the health, safety, and well-being of the child. A provisional license issued under this subsection is valid for 90 days unless the division specifies a shorter period.

(b) As soon as possible after issuance of a provisional foster home license under (a), the applicant shall submit to the licensing representative a completed initial application as required by 7 AAC [50.030](#). A provisional license issued after review and evaluation of the completed application is valid for the remainder of a one year period from the date on which the provisional license under (a) of this section was issued.

✚ **History:** Eff. 1/1/96, Register 136; am 3/1/98, Register 145

✚ **Authority:** [AS 44.29.020](#) [AS 47.35.010](#) [AS 47.35.023](#)

✚ **7 AAC 50.055. Variances for foster care by relatives**

✚ (a) Except as provided in (c) of this section, the licensing representative may apply the abbreviated procedure in (b) of this section to grant a variance for a requirement contained in this chapter for a foster home headed by a relative of a child. This procedure applies only for the specific relative child or children. If a different relative or a non-relative child is to be received in the home, any variance granted under this section must be reviewed and approved by the division under [AS 47.35.027](#) .

(b) In evaluating a relative applicant for a license or in the reevaluation of a licensed foster home for a relative child, the licensing representative will discuss with the applicant and document any recommended variance from a requirement. The supervisor will review the evaluation to ensure the health, safety, and well-being of the child is protected and, if approved, will forward the license for issuance under regular procedures.

(c) A variance from a requirement that might pose a risk to the child's safety or well-being will be considered by the division under procedures in [AS 47.35.027](#) .

✚ **History:** Eff. 1/1/96, Register 136

✚ **Authority:** [AS 44.29.020](#) [AS 47.35.010](#) [AS 47.35.027](#)

✚ **7 AAC 50.060. Self-monitoring reports**

✚ The annual self-monitoring report required by [AS 47.35.043](#) provides the licensee's assessment of its compliance with the health, safety, staffing, and program requirements of [AS 47.35](#) and this chapter. The report must be submitted on a form provided by the division.

✚ **History:** Eff. 1/1/96, Register 136; am 3/1/98, Register 145

✚ Authority: [AS 44.29.020](#) [AS 47.35.010](#) [AS 47.35.043](#)

---

## ⊕ Article 2 Administration

Section

[100. Responsibilities of a governing body in residential child care facilities.](#)

[110. Administrator or foster parent.](#)

[120. Facility operation and management.](#)

[130. Records.](#)

[140. Reports.](#)

### ⊕ 7 AAC 50.100. Responsibilities of a governing body in residential child care facilities

⊕ (a) In a residential child care facility that is governed by a board or other body, the board or other body shall

(1) determine policy for the operation and management of the facility that meets the requirements of [AS 47.35](#) and this chapter and provide for implementation of that policy by an administrator;

(2) adopt a job description clearly describing the administrator's role and responsibilities;

(3) appoint an individual who is qualified under 7 AAC [50.200](#) as administrator, charged with the active management of the facility, and annually evaluate the administrator's performance;

(4) approve the annual budget of anticipated income and expenses to provide the services described in its statement of purpose and approve or take corrective action on financial audit reports;

(5) conduct at least three meetings each year and maintain minutes of all meetings; and

(6) provide for orientation to new board members and biennial training for all board members on the role and responsibilities of a board member.

(b) If a facility is not governed by a board or other body, policy for the operation and management of the facility shall be determined by the operator of the facility, or by the administrator if the authority to determine policy is delegated to the administrator by the operator. Implementation of the policies of the facility is the responsibility of the administrator.

⊕ **History:** Eff. 1/1/96, Register 136; am 3/1/98, Register 145

⊕ **Authority:** [AS 44.29.020](#) [AS 47.35.010](#)

### ⊕ 7 AAC 50.110. Administrator or foster parent

⊕ (a) A facility, other than a foster home, shall designate an administrator who is qualified under 7 AAC [50.200](#). The administrator may be the same person who owns or is otherwise legally responsible for operating the facility.

(b) Unless the administrator has an on-site adult caregiver or associate administrator who has responsibility for the facility in the administrator's absence and who meets the age and college credit requirements of 7 AAC [50.200\(a\)](#) and (e), the administrator of a residential child care facility shall be on-site at the facility at least one half of the time that the facility is providing care between the hours of 6:00 a.m. and 10:00 p.m.

(c) An individual may not act as the administrator for more than two facilities unless each facility has an on-site adult caregiver or associate administrator who has responsibility for the facility in the administrator's absence and who meets the age and college credit requirements of 7 AAC [50.200\(a\)](#) and (e).

(d) A facility with one or more employees shall designate an adult caregiver or associate administrator to act on behalf of the administrator or foster parent in the absence of the administrator or the foster parent from the facility. If the administrator is absent for a period exceeding three consecutive weeks, the facility shall designate an adult caregiver or associate administrator who meets the requirements of 7 AAC [50.200](#) to act on behalf of the administrator. In a residential child care facility, if the administrator cannot be reached by phone during any absences, the facility shall designate an adult caregiver or associate administrator who meets the requirements of 7 AAC [50.200](#) to act on behalf of the administrator.

✚ **History:** Eff. 1/1/96, Register 136; am 3/1/98, Register 145; am 1/1/2001, Register 156

✚ **Authority:** [AS 44.29.020](#) [AS 47.35.010](#)

✚ **7 AAC 50.120. Facility operation and management**

✚ (a) A residential child care facility shall adopt personnel policies that are given to employees, contractors, and volunteers at the time they start work with children. The personnel policies must include, as applicable,

- (1) personnel qualifications;
- (2) the job description applicable to the employee, contractor, or volunteer;
- (3) for employees and contractors
  - (A) procedures for annual evaluation; and
  - (B) a performance evaluation within six months of employment.

(b) A facility with one or more employees, contractors, or regular volunteers shall either directly or by delegation to the administrator or foster parent

- (1) provide for screening, scheduling, and supervising of all employees, volunteers, and others who provide services in the facility;
- (2) remove an employee, contractor, or volunteer from contact with children when the administrator has reason to believe that the employee, contractor, or volunteer has physically or sexually abused a child or furnished a child with alcohol or a controlled substance; and
- (3) remove an employee, contractor, or volunteer from contact with children when the administrator has reason to believe that the employee, contractor, or volunteer is in violation of 7 AAC [50.210\(c\)](#) (2), (3), or (5); and

(4) ensure that an employee's, contractor's, or volunteer's ability to perform assigned duties is not impaired by alcohol or controlled substances while in contact with children or while performing other job responsibilities.

(c) If the division requests a facility to remove an employee, contractor, or volunteer from contact with children on the grounds set out in (b)(2) and (b)(3) of this section, the division will inform the employee, contractor, or volunteer of the grounds for removal and provide the employee, contractor, or volunteer with an opportunity to bring to the division's attention any facts that the employee, contractor, or volunteer believes pertinent to the matter. The division will, in its discretion, excuse or delay notification to the employee, contractor, or volunteer if the division determines, in its discretion, that notification may put children at risk of harm or compromise a police investigation. The division will not provide the employee, contractor, or volunteer with any information that is confidential under law or that may put children at risk of harm or compromise a police investigation.

(d) A residential child care facility shall adopt and compile facility policies, procedures, program descriptions, and forms, as applicable, into an operational manual that must be made available to employees, contractors, and volunteers and to the licensing representative upon request.

(e) A facility's practices and the practices of the facility employees, contractors, or volunteers shall conform to statutes, this chapter, and the facility's policies.

⊕ **History:** Eff. 1/1/96, Register 136; am 3/1/98, Register 145; am 1/1/2001, Register 156

⊕ **Authority:** [AS 44.29.020](#) [AS 47.35.010](#)

⊕ **7 AAC 50.130. Records**

⊕ (a) A facility shall

(1) establish written records necessary to demonstrate compliance with the applicable requirements of [AS 47.35](#) and this chapter;

(2) retain records demonstrating compliance for at least three years from the record's creation; and

(3) permit a licensing representative to review records, including personnel and evaluation records and applicable portions of board or other governing body minutes, to determine compliance with [AS 47.35](#) and this chapter.

(b) A facility shall maintain records on forms prescribed by the division unless the facility uses alternate forms that contain the essential elements of the prescribed forms.

(c) A full time care facility shall make and retain a record for each child so that

(1) entries are dated and identify the individual making the entries; and

(2) the records are retained as follows:

(A) in a foster home - returned to the agency upon discharge from the facility; and

(B) in a residential child care facility - for at least seven years after the child reaches the age of majority.

(d) A facility shall maintain confidentiality of information about a child and the child's family. A facility caring for a child who is in state custody shall comply with the requirements of 7 AAC [54.010](#) - 7 AAC [54.150](#), 7 AAC [54.300](#) - 7 AAC [54.390](#), and 7 AAC [54.900](#). A facility may not disclose information, including photographs, concerning a child in state custody if disclosure is inconsistent with the child's plan of care or treatment plan or violates a federal or state statute or regulation.

(e) A facility shall maintain personnel records for employees, contractors, and volunteers. For employees, these records shall include starting and ending dates, application materials, annual and interim performance evaluations, orientation and training documentation, personnel action memoranda of commendation or reprimand, and similar items. For regular volunteers, records may be limited to starting and ending dates, application materials, and an evaluation notation. For occasional volunteers, records may be limited to starting and ending dates.

✚ **History:** Eff. 1/1/96, Register 136; am 3/1/98, Register 145; am 1/1/2001, Register 156

✚ **Authority:** [AS 44.29.020](#) [AS 47.35.010](#) [AS 47.35.039](#) [AS 47.35.110](#)

✚ **7 AAC 50.140. Reports**

✚ (a) In addition to the notice of changes required by [AS 47.35.047](#) , a facility shall report the following planned changes to the licensing representative as soon as possible, but not later than 30 days before they are expected to occur:

- (1) change in the individual operating the facility, including marriage or divorce of a foster parent;
- (2) change in the name of the individual operating the facility;
- (3) change in the name of the facility;
- (4) change of administrator;
- (5) change in the age or sex of the children served;
- (6) deletion or addition of a specialization under 7 AAC [50.600](#) - 7 AAC [50.650](#);
- (7) addition of an adult member to the licensee's household for 45 days or longer.

(b) A facility shall immediately report the following occurrences in the facility to the licensing representative:

- (1) death of a child while in care;
- (2) except for situations described in (c) of this section, serious injury or illness of a child while in care requiring attention by medical personnel outside of the facility;
- (3) fire or other disaster affecting the facility;
- (4) an unplanned change in an item listed in (a) of this section;
- (5) a planned or emergency absence of a foster parent exceeding 72 hours and confirmation or revision of the plan for supervision of children by a responsible adult during the absence of the foster parent.

(c) With prior approval of the division, a facility regularly serving medically-fragile children need not make the report required by (b)(2) of this section.

(d) A full time care facility shall immediately report the following incidents involving a child in care to the child's placing worker:

- (1) death of a child in care;
- (2) attempted or threatened suicide by a child in care;
- (3) life-threatening illness or hospitalization of a child in care, unless the child is a medically-fragile child;
- (4) unapproved absence for more than 10 hours by a child in care;
- (5) the direct admission of a runaway child to a shelter home or to a residential child care facility with a specialization in serving runaway children.

(e) A full time care facility shall report the following to the child's placing worker no later than the first working day that it is known:

- (1) pregnancy of a child in care;
  - (2) severe distress or depression of a child in care;
  - (3) non-emergency medical care requiring consent from the child's parent; in this paragraph "non-emergency medical care" includes surgery, anesthesia, and the administration of psychotropic medication, or another drug prescribed for mental illness or behavioral problems;
  - (4) violation of a condition of probation by a child in care, if applicable;
  - (5) allegations of criminal conduct by a child in care.
- (f) If a child in a full time care facility has no placing worker, the facility shall give the reports required in (d) and (e) of this section to the division.

⊕ **History:** Eff. 1/1/96, Register 136; am 3/1/98, Register 145; am 1/1/2001, Register 156

⊕ **Authority:** [AS 44.29.020](#) [AS 47.10.142](#) [AS 47.35.010](#)

---

**⊕ Article 3  
Personnel**

Section

[200. Qualifications of administrator.](#)

[210. Qualifications and responsibilities of persons having regular contact with children in a facility.](#)

[220. Caregiver age requirements and additional qualifications for adolescent caregivers.](#)

[230. Additional staff qualifications in residential child care facilities.](#)

[240. Supervision of employees.](#)

[250. Orientation and training.](#)

**⊕ 7 AAC 50.200. Qualifications of administrator**

⊕ (a) The administrator of a residential child care facility or a foster parent must be an individual who is at least 21 years of age.

(b) An administrator or foster parent must be of good character and reputation, have an understanding of the development of children, the ability to care for children, positive experience with working with persons of different cultures, and the skills to work with children, family members, division staff, community agencies, and, if applicable, staff of the facility.

(c) The administrator of a residential child care facility must have management and supervisory skills necessary to plan and evaluate programs, select and supervise personnel, and handle finances. In this subsection, "select and supervise personnel" includes the delegation of responsibility and motivation of staff.

(d) The administrator of a residential child care facility must have at least 60 semester hours of college credit or an associate degree in a human services field. College credit in management will substitute for 30 of the 60 required hours. In addition, an administrator of a residential child care facility must have a minimum of four years of increasingly responsible supervisory and administrative experience in a child welfare agency or other setting that serves children, adolescents, or both, with at least one year of experience in a residential setting.

(e) In addition to the requirements of this section, an administrator must meet the personnel qualifications set out in 7 AAC [50.210](#).

(f) The designated administrator shall submit to the licensing representative the names, addresses, and telephone numbers of four individuals, at least three of whom are unrelated by blood or marriage to the designated administrator, who can provide references attesting to the designated administrator's good character, reputation, interpersonal, and professional skills.

(g) The licensing representative will assess the qualifications of the designated administrator. If the review shows that the person is not qualified under this section and 7 AAC [50.210](#), the licensing representative will inform the agency that the individual may not serve as an administrator and that the agency's license is subject to denial or revocation unless a qualified administrator is designated within 30 days of receipt of notice by the agency.

⊕ **History:** Eff. 1/1/96, Register 136; am 3/1/98, Register 145; am 1/1/2001, Register 156

⊕ **Authority:** [AS 44.29.020](#) [AS 47.35.010](#)

⊕ **7 AAC 50.210. Qualifications and responsibilities of persons having regular contact with children in a facility**

⊕ (a) An adult having regular contact with children in a facility and a caregiver of any age must be a responsible individual of reputable character who exercises sound judgment.

(b) A caregiver in a full time care facility must have the capacity to deal with frustration and conflict and the ability to work with children who, because of the children's background and experience, might express themselves negatively toward the caregiver.

(c) An individual may not work, volunteer, or reside in the part of the facility where child care is provided or in any other part of the facility with direct access to the part of the facility where child care is provided if the individual

(1) is the alleged perpetrator of an incident of child abuse or neglect in which the division found the evidence available substantiates the allegation;

(2) has a physical, health, mental health, or behavioral problem to an extent that the problem poses a significant risk to the health, safety, or well-being of children in care;

(3) has a domestic violence or alcohol or other substance abuse problem to an extent that the problem is likely to be detrimental to the health, safety, or well-being of children in care;

(4) was the subject of prior adverse licensing action of the kind described at [AS 47.35.120](#) (b)(5) - (7); or

(5) was at any time under indictment, charged by information or complaint, or convicted for the following laws or similar laws of another jurisdiction:

(A) offenses against the family and vulnerable adults under AS 11.51;

(B) perjury under [AS 11.56.200](#) ;

(C) offenses included in the definition of "serious offense" under [AS 12.62.900](#) .

(d) A facility may and the division will, in its discretion, require that an individual having regular contact with children in a facility provide an evaluation from a probation, health, or mental health professional affirming that the individual is free from problems that are likely detrimental to the health, safety, or well-being of a child in the facility.

(e) A person having regular contact with children in a facility may not abuse a child or engage in any exploitive or sexual act with a child. An adult having regular contact with children in a facility may not have a romantic relationship with a child.

(f) The division will review its child protection records and previous licensing records and criminal justice information with respect to the designated administrator or foster parent, all adult members of the licensee's household, and any adult residing in any part of the facility, if that adult has direct access from the adult's residence to the part of the facility where child care is provided.

(g) Each administrator or foster parent in a full time care facility, all adult members of the licensee's household, and any adult residing in any part of the facility, if that adult has direct access from the adult's residence to the part of the facility where child care is provided shall submit two fingerprint cards to the licensing representative. However, if fingerprint rolling acceptable to the Department of Public Safety is not available in the person's community, the fingerprint cards must be submitted when adequate fingerprint rolling becomes available or when the person next visits a community with adequate fingerprint rolling. The licensing representative will use the fingerprint cards to obtain the results of a criminal justice information search on the individual from the Department of Public Safety. In addition, the licensing representative will review criminal justice information, as defined in [AS 12.62.900](#) , including

(1) past conviction information;

(2) current offender information; and

(3) non-conviction information.

(h) Deleted 7/1/2000.

(i) A caregiver in a residential child care facility must have received a high school diploma or obtained a general educational development diploma.

(j) A caregiver must be able to

(1) support behavior of children with positive guidance and set clear and consistent limits to promote the children's ability for self discipline;

(2) provide children with a variety of age-appropriate learning and social experiences;

(3) prevent exposure of children to high risk, including exposure to physical hazards and encounters with persons or animals known to be a danger;

(4) use strategies to prevent aggressive behavior and to deescalate volatile situations; and

(5) act as a positive role model for children.

(k) A facility with one or more employees, contractors, or regular volunteers shall obtain a completed application for employment from each person hired as an employee or contractor, or accepted as a regular volunteer. The completed application for employment or work must provide the information necessary to determine whether the applicant has the qualifications required under this section. In addition, the facility shall obtain at least three positive written references on a prospective employee or contractor, at least two of which are from persons unrelated to the applicant, and at least one positive reference on a prospective regular volunteer before the employee, contractor, or regular volunteer is allowed to have contact with children. An occasional volunteer and a member of the licensee's household are exempt from the application and reference requirements. A reference must

(1) be received directly by the facility from the individual making the reference;

(2) attest to the person's ability to work successfully with children, act as a positive role model for children, and meet the requirements of this section; and

(3) if taken by telephone, be recorded immediately by written notes, signed by the individual taking the reference, and dated.

(l) In this section,

(1) "adult member of the licensee's household" means a person 18 years or older who remains or intends to remain in the facility for more than 45 days, but does not include

(A) a person 18 or 19 years of age who is in the custody of the state; or

(B) who is a runaway sheltered in a facility or an adult client of a maternity home;

(2) "child abuse or neglect" has the same meaning as in [AS 47.17.290](#) ;

(3) "indictment" includes presentment or charging by information;

(4) "person having regular contact with children in a facility" means a caregiver, a member of the licensee's household, and a person residing in any part of the facility, if that person has direct access from the person's residence to the part of the facility where child care is provided.

⊕ **History:** Eff. 1/1/96, Register 136; am 3/1/98, Register 145; am 1/1/2001, Register 156

⊕ **Authority:** [AS 44.29.020](#) [AS 47.35.010](#)

⊕ **7 AAC 50.220. Caregiver age requirements and additional qualifications for adolescent caregivers**

⊕ (a) Deleted 7/1/2000.

(b) In a full time care facility caring for children

(1) in which the oldest child in care is under age 15, a caregiver must be at least 18 years old; and

(2) in which the oldest child in care is age 15 or older, a caregiver must be at least 21 years old.

(c) A baby-sitter providing care in a foster home during the short absence of a foster parent must be at least 14 years old and mature enough to handle common emergencies. A baby sitter is exempt from 7 AAC [50.210](#), except (a), (d), and (e). In this subsection "short absence" means no more than six hours.

⊕ **History:** Eff. 1/1/96, Register 136; am 3/1/98, Register 145

⊕ **Authority:** [AS 44.29.020](#) [AS 47.35.010](#)

⊕ **7 AAC 50.230. Additional staff qualifications in residential child care facilities**

⊕ (a) Deleted 7/1/2000.

(b) A residential child care facility shall designate an associate administrator for each separate building housing children. The associate administrator must have 30 semester hours of college credit in a human services field.

⊕ **History:** Eff. 1/1/96, Register 136; am 3/1/98, Register 145

⊕ **Authority:** [AS 44.29.020](#) [AS 47.35.010](#)

⊕ **7 AAC 50.240. Supervision of employees**

⊕ (a) A facility with one or more employees or contractors shall ensure that an inexperienced caregiver is monitored by an experienced caregiver until the inexperienced caregiver is able to safeguard the health and safety of the children in care.

(b) A residential child care facility with one or more employees or contractors shall establish and maintain conferences at least monthly between the supervisor and caregivers regarding needs and treatment plans of specific children in care and techniques or procedures to meet each child's needs and to implement each child's treatment plan.

(c) If a residential child care facility with one or more employees or contractors does not have a supervisory or administrative individual qualified to supervise mental health professionals, the facility shall contract or otherwise arrange for supervision of mental health activity.

⊕ **History:** Eff. 1/1/96, Register 136; am 3/1/98, Register 145; am 1/1/2001, Register 156

⊕ **Authority:** [AS 44.29.020](#) [AS 47.35.010](#)

⊕ **7 AAC 50.250. Orientation and training**

⊕ (a) A facility with one or more employees or contractors shall provide an orientation to each caregiver that includes

- (1) the facility's policies and procedures, including responsibilities of the caregiver;
- (2) satisfying special needs of specific children, where appropriate; and
- (3) emergency procedures and health and safety measures.

(b) The orientation required in (a) of this section must begin at the time of employment or work and be completed within the succeeding eight weeks.

(c) Training hours required in this section are clock hours and may include any training that is relevant to the caregiver's primary job responsibilities. A facility may count informal training that increases caregiver skills. Documentation must include the date, subject, method of training, and the name of the person who conducted the training.

(d) A residential child care facility shall have on duty at all times at least one caregiver with a valid first aid and cardiopulmonary resuscitation (CPR) certification, unless the courses for these certifications are not regularly available in the community in which the facility is located. If certification courses are not regularly available, the facility shall enroll one or more employees in the first available first aid and CPR certification course offered in the community. A certified emergency medical or trauma technician on duty satisfies the requirements of this subsection. Caregivers of young children shall enroll in infant and child (pediatric) first aid and CPR in communities where infant and child first aid and CPR are regularly available.

(e) A residential child care facility shall ensure that each caregiver, other than a volunteer, receives a minimum of 15 hours of training a year. The 15 hours must be in addition to

- (1) orientation required by (a) of this section; and

(2) training in CPR and first aid required by (d) of this section.

(f) Deleted 7/1/2000.

(g) A foster parent in a one-parent foster home shall complete a minimum of 10 hours of training annually. Foster parents in a two-parent foster home shall complete a minimum of 15 hours of training annually that may be shared between the two foster parents. However, each foster parent in a two-parent foster home and each other caregiver in a foster home shall complete a minimum of five hours of training annually. Training hours must be in addition to orientation required by (a) of this section.

(h) A residential child care facility where passive physical restraint might be used shall ensure that a caregiver is trained in passive restraining techniques before being allowed to passively restrain any child in care.

(i) A caregiver may count orientation and pre-service training hours required under 7 AAC [50.030\(a\)](#) that exceed six hours toward caregiver training hours required under (e) - (g) of this section.

⊕ **History:** Eff. 1/1/96, Register 136; am 3/1/98, Register 145; am 1/1/2001, Register 156

⊕ **Authority:** [AS 44.29.020](#) [AS 47.35.010](#) [AS 47.35.037](#)

---

⊕ Article 4  
Admission and Discharge

Section

[300. Admission.](#)

[310. \(Deleted\).](#)

[320. Admission in residential child care facilities.](#)

[330. Assessment and treatment plan in residential child care facilities.](#)

[340. Discharge in full time care facilities.](#)

⊕ **7 AAC 50.300. Admission**

⊕ (a) A facility shall

(1) at or before a child's admission to the facility, obtain emergency information on a child, if known, from the child's parent or placement worker, including

(A) information about the child's drug or other allergies;

(B) information about any medication the child is taking or medical treatment the child requires; and

(C) for a child to be admitted

(i) deleted 7/1/2000;

(ii) to a full time care facility, an authorization for the emergency medical or surgical care for the child; and

(2) maintain the information on a form provided by the division.

(b) A facility may not admit a child when the child's admission would place the facility outside of the conditions on the facility's license.

(c) A facility may not admit an adult for care unless the placement worker for each child in care and the facility develop plans of care that

(1) ensure the health and safety of children in care as well as the adult seeking services; and

(2) are approved by the licensing representative.

(d) A foster home may not admit a child for day care, except on approval of a variance under [AS 47.35.027](#) that ensures

(1) any applicable fire code is met; and

(2) the needs of foster children are primary.

(e) A foster home may admit a child from only one agency unless the licensing representative for that agency has given prior approval for the placement of a child from another agency.

(f) At or before a child's admission to a foster home, a foster parent shall sign a foster care agreement containing the conditions relating to the care of the child that are specified by the child placement agency and the rate to be paid for care.

(g) At or before a child's admission to a foster home, a foster parent shall collaborate with the child's placement worker and parent, when appropriate, in developing and implementing a plan of care for the child, including addressing

(1) reasonable accommodations for a child with special needs; and

(2) independent living skills for a child age 16 or older.

(h) Deleted 7/1/2000.

(i) At or before a child with significant medical needs is admitted to a facility, the facility shall collaborate with the child's placement worker and parent, when applicable, in developing and implementing a plan of care for the child, including addressing the facility's plan for ensuring licensed medical personnel are available to perform the prescribed services.

(j) A facility shall review information provided about a child under (g) or (h) and (i) of this section and 7 AAC [50.320\(c\)](#) in order to determine whether the facility can satisfy the child's needs. If, after reviewing that information and the application, the facility determines it can satisfy the child's needs, the facility may admit the child. If the facility has reason to believe that, even with reasonable accommodation, the facility cannot meet the needs of the child, the facility may deny admission to the child.

⊕ **History:** Eff. 1/1/96, Register 136; am 3/1/98, Register 145

⊕ **Authority:** [AS 44.29.020](#) [AS 47.35.010](#)

⊕ **7 AAC 50.310. Admission in child care facilities**

⊕ Deleted 7/1/2000.

⊕ **History:** Eff. 1/1/96, Register 136; am 3/1/98, Register 145

⊕ **7 AAC 50.320. Admission in residential child care facilities**

⊕ (a) A residential child care facility shall set out its admission policies and criteria in writing and keep the writing current as policies and criteria are revised. The admission policies and criteria must include

(1) a description of the

(A) age range and sex of children served; and

(B) kinds of individual or family problems dealt with;

(2) a fee schedule, including any additional charges not covered in the basic service fee; and

(3) procedures relating to admission.

(b) A facility that operates a treatment program shall also describe, medical, or behavioral problems that the facility's program is designed to serve.

(c) Before admitting a child for care, a facility shall review application materials that include

(1) reasons for referral;

(2) the immediate and long-range goals of care or treatment;

(3) a social history that includes a description of the child's family and relationships with family members and other persons significant to the child;

(4) a description of the child's behavior, including both appropriate and maladaptive behavior;

(5) health information on the child required by 7 AAC [50.455\(b\)](#) ;

(6) the child's developmental history, including the child's social and personal development and current level of functioning;

(7) the child's school history, including current educational level, special achievements, any school problems, and the child's IEP, 504 plan, or IHP, if there is one; and

(8) the history of any other placements away from the child's own home, including the reasons for the placement.

(d) A facility may not admit

(1) a child younger than six years of age, except in a facility licensed to provide emergency shelter care;

(2) a child who requires continuous nursing or medical care; or

(3) a child who has been determined by a mental health professional's evaluation to be a danger to self or others, unless the requirements of (e) of this section are satisfied.

(e) A child whose history or behavior indicates that the child may be a danger to self or others may be admitted to a residential child care facility if

(1) the facility provides security to prevent harm to the child or others; and

(2) before admission, the child is evaluated by a mental health professional and a plan of care to prevent harm to the child or others is developed and approved by that mental health professional.

(f) At or before a child's admission, a facility must have an agreement with the child placement agency or placing parent that is signed by the parties and that includes or attaches the following:

(1) specified conditions relating to the care of the child and the rate to be paid for the child's care;

(2) the authorization for emergency medical care required by 7 AAC [50.300\(a\)](#) (1)(C)(ii);

(3) a determination of case management responsibilities so that all resources and services can be effectively coordinated;

(4) a description or list of services that will be provided by the facility and a description or list of services that will be provided by the child placement agency or parent;

(5) a description of the amount and frequency of contact for treatment planning that the facility shall have with the child's family and the child's placement worker;

(6) a plan for sharing information on the child with the child's placement worker or placing parent;

(7) a description of the facility's participation in the ongoing evaluation of the child's needs and progress;

(8) the designation of responsibility for working with the child's parent;

(9) visiting plans for the child's parent and family;

(10) the facility's plan for meeting the child's immediate and specific needs identified under (g) of this section;

(11) a description of the provision for treatment plan reviews;

(12) the financial plan for payment of care and other applicable fees;

(13) a provision for notification of significant events regarding the child and the notification required by 7 AAC [50.140](#) to the child's parent or the child's placement worker, if any;

(14) a description of the plans for the child's education and religious participation;

(15) consent forms signed by the person or placement agency responsible for the child;

(16) anticipated discharge plans, including the date of discharge; and

(17) designation of responsibility for services after discharge from the facility.

(g) At or before a child's admission, a facility shall identify any immediate and specific needs, including therapeutic or medical needs, that will not be met by established program services, and the facility's plan for meeting those needs.

(h) At the time of a child's admission, a facility shall make a complete inventory of the child's personal possessions and clothing.

(i) A facility that accepts children from other states shall comply with [AS 47.70](#) (Interstate Compact on the Placement of Children).

⊕ **History:** Eff. 1/1/96, Register 136; am 3/1/98, Register 145

⊕ **Authority:** [AS 44.29.020](#) [AS 47.35.010](#)

⊕ **7 AAC 50.330. Assessment and treatment plan in residential child care facilities**

⊕ (a) A residential child care facility shall observe and assess each child admitted and develop an initial treatment plan within 15 days after a child's admission. The treatment plan shall be completed within 30 days following the child's admission.

(b) The plan specified in (a) of this section must include

(1) the findings of an on-site evaluation of the child;

(2) an identification of the child's specific needs that are in addition to the child's needs for food, clothing, shelter, routine care, and supervision, including physical, medical, familial, educational, social, emotional, and behavioral needs;

(3) an assessment of the child's and family's strengths, weaknesses, and needs;

(4) clearly stated goals, specific treatment objectives, techniques, or activities, time frames, and task assignments to meet the needs of the child and the child's family, where appropriate, in the following areas:

(A) care, education, health, religion, culture, and community activities;

(B) specialized services as required to meet the child's specific needs;

(C) group living experience planned individually for the child;

(D) individualized, family, or group counseling;

(E) the family's involvement in the planning and carrying out of the plan;

(F) the estimated length of stay, preliminary plans for discharge, and conditions under which the family will be reunited, if applicable; and

(G) the date for the first or next review of progress toward goals;

(5) tasks and resources to be provided by the facility, placement worker, child, family members, and other community resources, and the time frames necessary to achieve objectives;

(6) initial discussions of post discharge plans; and

(7) the method to be used for evaluating the child's progress and the progress of family members toward objectives and time frames for the periodic review.

(c) A facility shall invite the child, the child's parent, placement worker, therapist, and school representative to participate as members of a treatment team and to assist in the development of the treatment plan and all subsequent revisions.

(d) A facility shall inform each staff member working with the child about the child's treatment plan, results of plan reviews, and updates and any changes in goals, objectives, techniques, or procedures. A facility shall ensure that staff who work with a child follow and implement the child's treatment plan.

(e) A facility shall review each child's plan at least every three months. This review must include

(1) an evaluation of the progress toward meeting identified specific needs and goals;

(2) identification of any new specific needs and goals determined since the plan was developed or last reviewed and strategies to meet the specific needs and goals; and

(3) an update of the child's estimated length of stay and plans for the child's discharge, if changed.

(f) A facility shall document in the child's record the reasons for retaining the child in the facility if, since the treatment plan was developed or last reviewed, a child shows limited progress toward achieving goals and objectives.

(g) A facility shall give a copy of a child's treatment plan or summary, plan review and updated plan, or summary of the review and updated plan to the child, if appropriate, and to the child's parent and placement worker. If the plan or update is not shared with the child, the child's record must reflect satisfactory justification for this decision, such as the child's mental capacity.

✚ **History:** Eff. 1/1/96, Register 136; am 3/1/98, Register 145

✚ **Authority:** [AS 44.29.020](#) [AS 47.35.010](#)

✚ **7 AAC 50.340. Discharge in full time care facilities**

✚ (a) A residential child care facility must have a discharge policy that describes both regular discharge procedures and emergency discharge procedures, including reasonable accommodations that may be made to prevent an emergency discharge.

(b) A residential child care facility shall prepare a discharge summary and attachments that include

(1) a summary of services provided, an assessment of goal achievement, and identification of child and family needs that remain to be met;

(2) the child's medical and other records required by 7 AAC [50.455\(f\)](#) ;

(3) recommendations for the child and the child's family following discharge from the facility, including provisions for aftercare and referrals;

(4) the date and reasons for discharge, the name, address, telephone number, and relationship of the person or agency to whom the child is being discharged, except that a runaway child age 16 or older may be discharged to the child's self; and

(5) an inventory of the child's personal possessions and clothing at discharge.

(c) A residential child care facility shall prepare the discharge summary required under (b) of this section no later than seven days before a regular discharge and shall submit a copy to the placement worker or parent and to the child, if appropriate. Any changes in the discharge summary that occur following the preparation of the summary may be submitted as an addendum within seven days after discharge. If the discharge was an emergency discharge, the summary must be completed within seven days of the discharge and include the circumstances leading to the emergency discharge.

(d) A facility shall limit emergency discharge to situations where the health or safety of a child or other children would be endangered by the child's continued residence at the facility.

(e) A facility shall provide suitable clothing and send all of the child's money and personal possessions with the child upon discharge. Suitable clothing includes at least three complete sets of clean and seasonable

attire, one warm coat or insulated jacket, one pair of shoes in good repair and appropriate to the season, and one pair of gloves and one hat. For an infant, two or more warm blankets may replace the outerwear in the suitable clothing list.

(f) When a child is discharged from a facility, the facility shall send all of the child's personally significant records, including the child's mental health, medical, dental, treatment, immunization, school records, report cards, photos, and drawings, with the child when the child leaves the facility; the records are sent through the child's placement worker.

⊕ **History:** Eff. 1/1/96, Register 136; am 3/1/98, Register 145

⊕ **Authority:** [AS 44.29.020](#) [AS 47.35.010](#)

---

**⊕ Article 5  
Care and Services**

Section

[400. Supervision of children.](#)

[405. \(Deleted\).](#)

[410. Supervision of children; child-to-caregiver ratios in residential child care facilities.](#)

[415. Supervision of children in foster homes.](#)

[420. \(Deleted\).](#)

[425. Program in residential child care facilities.](#)

[430. Program in foster homes.](#)

[435. Behavior guidance.](#)

[440. Medication.](#) (repealed and readopted)

[445. Reducing the spread of disease.](#) (repealed and readopted)

[450. \(Deleted\).](#)

[455. Health in full time care facilities.](#)

[460. Nutrition.](#)

**⊕ 7 AAC 50.400. Supervision of children**

⊕ (a) A facility shall ensure that the children in its care will receive responsible supervision appropriate to their age and developmental needs. A facility shall provide for creation of a staffing plan, where applicable, and a plan for supervision of children. In a foster home the plan of supervision must include supervision of children by a responsible person during an absence of the foster parent.

(b) Deleted 7/1/2000.

(c) Deleted 7/1/2000.

(d) A residential child care facility shall maintain caregiver and child attendance records that reflect the time caregivers are present and children are in care.

(e) A caregiver in a residential child care facility may participate in duties other than direct care of children and be counted toward the caregiver-to-child ratios required under this chapter so long as the caregiver remains on duty and the caregiver's primary responsibility continues to be the direct care and supervision of children. However, facility staff counted toward caregiver-to-child ratio requirements must be awake at all times during which they are counted unless there are five or fewer children in care during nighttime care.

(f) A foster home shall designate an adult who is available to assist in case of serious illness, accident, or other emergency. If this adult assists only in emergency situations, caregiver qualifications set out in 7 AAC [50.210](#) are not required.

(g) A facility shall prevent exposure of children to individuals, animals, and situations known to be a danger. A facility may not expose a child to high-risk activities or hazards such as

(1) use of an infant walker;

(2) a young child walking along a river edge or riding an all-terrain vehicle or snowmobile; or

(3) a child of any age riding an all-terrain vehicle with only three wheels, boating without a personal flotation device or in dangerous water conditions, or participating in an airborne activity such as hang gliding.

(h) Deleted 7/1/2000.

(i) A full time care facility shall request the child's placement worker to obtain advance permission from the child's parent, for a child to participate in risk activities that are not usual for the community and to participate in other activities of moderate risk, such as operation of a vehicle, participation in contact sports or adventure activities or in a foster home, handling of a firearm.

✚ **History:** Eff. 1/1/96, Register 136; am 3/1/98, Register 145

✚ **Authority:** [AS 44.29.020](#) [AS 47.35.010](#)

✚ **7 AAC 50.405. Supervision of children; child-to-caregiver ratios in child care facilities**

✚ Deleted 7/1/2000.

✚ **History:** Eff. 1/1/96, Register 136; am 3/1/98, Register 145

✚ **7 AAC 50.410. Supervision of children; child-to-caregiver ratios in residential child care facilities**

✚ (a) A caregiver shall be on duty in a residential child care facility whenever one or more children are present.

(b) Except as provided in (c) of this section, the caregiver-to-child ratio in a facility must be as follows:

(1) one caregiver for every six children during any time children are awake and engaged in activity outside their sleeping quarters; and

(2) one caregiver for every 12 children during sleeping hours.

(c) The caregiver-to-child ratio when there are infants or toddlers in care must be one caregiver for every

(1) three infants and toddlers in care during waking hours; and

(2) five infants and toddlers in care during sleeping hours.

(d) The administrator may be counted as a caregiver for the purposes of (b) and (c) of this section only if the facility serves 12 or fewer children.

✚ **History:** Eff. 1/1/96, Register 136; am 3/1/98, Register 145

✚ **Authority:** [AS 44.29.020](#) [AS 47.35.010](#)

✚ **7 AAC 50.415. Supervision of children in foster homes**

✚ (a) During the first year of foster care experience by a foster home, no more than two children of any age who are unrelated to the foster parent may be cared for. After one year of foster care experience by a foster home, the number of children in care may be increased.

(b) Except as provided in (c) and (e) of this section, no more than six children may reside in a foster home. Of the six, no more than

(1) two children under 30 months of age are permitted; and

(2) three children of any age who are unrelated to the foster parent are permitted after the first year of foster care experience by the foster home.

(c) No more than eight children may reside in a foster group home. Of the eight,

(1) no more than two children under 30 months of age are permitted; and

(2) except as provided in (a) of this section, up to eight children who are unrelated to the foster parent are permitted.

(d) In a foster group home, if more than six children are in care, one foster parent must generally be available in the home.

(e) The division will establish the number of children for whom a foster home and a foster group home is licensed on an case by case basis and may license a home for fewer than the maximum number of children permitted in (b) or (c) of this section. The division may approve a variance under [AS 47.35.027](#) to increase the number of children in care beyond the number permitted in (b) of this section for a period of up to 30 days instead of requiring a foster group home license.

(f) A foster parent may not allow a child in care to be absent from the foster home for periods of 72 hours or longer unless the absence is approved by the child's placement worker.

(g) A foster parent shall request the child's placement worker to obtain advance permission from the person responsible for the child 14 days in advance of any planned trips for a child in care outside of the state.

(h) A foster parent shall obtain advance approval from the child's placement worker for planned in-state trips for a child in care for more than 72 hours duration.

✚ **History:** Eff. 1/1/96, Register 136; am 3/1/98, Register 145

✚ **Authority:** [AS 44.29.020](#) [AS 47.35.010](#)

✚ **7 AAC 50.420. Program in child care facilities**

⊕ Deleted 7/1/2000.

⊕ **History: Eff. 1/1/96, Register 136; am 3/1/98, Register 145**

⊕ **7 AAC 50.425. Program in residential child care facilities**

⊕ (a) A residential child care facility shall describe in writing the ways its program will provide treatment, structure, and daily activities designed to promote the individual physical, social, intellectual, spiritual, and emotional development of the children in the facility. The description must address the requirements of this section and also include provisions and policy relating to the applicable requirements of 7 AAC [50.435](#), 7 AAC [50.440](#), 7 AAC [50.445](#), 7 AAC [50.455](#), 7 AAC [50.460](#), and any specialization of the facility under 7 AAC [50.600](#) - 7 AAC [50.650](#).

(b) A facility shall plan routines and activities appropriate to the children's age and development in a manner that

(1) ensures

(A) consistency through communication between caregivers on different shifts regarding activities and special needs or problems of children;

(B) involvement of children in decision-making regarding the routines and activities of their living group; and

(C) the accommodation of an individual child's treatment plan; and

(2) includes

(A) routines to meet the children's basic daily needs;

(B) experiences or training to facilitate independent living, including social skills, family life, personal hygiene, human sexuality, care of clothing and personal belongings, health and nutrition, and money management;

(C) opportunities for religious education and attendance at religious services, group, individual, or family counseling, and attendance at ethnic or cultural events compatible with the child's treatment plan; a facility shall recognize, encourage, and support the religious beliefs, ethnic and cultural heritage, and language of a child's birth parent; however, a facility shall respect the preference of a child nine years of age or older;

(D) opportunities for group, individual, or family counseling within or outside the facility; and

(E) opportunities for indoor and outdoor leisure and recreational experiences.

(c) A facility must have a vehicle or other means of transportation to transport children.

(d) A facility shall recognize the importance of family and cultural ties to a child's self-esteem and shall encourage interaction between the child and the child's family or cultural group whenever possible. A facility shall

(1) have a policy regarding visiting and other forms of communication with family, friends, and others significant to the child; and

(2) obtain advance approval from a child's parent or from the placement worker for an absence of the child from the facility

(A) 14 days before a trip outside of the state; or

(B) for a period of 72 hours or longer.

(e) A facility shall provide for the privacy of each child whenever possible by

(1) maintaining doors on sleeping areas and bathroom enclosures, unless there is a clear, clinical justification for their removal;

(2) assigning children who need extra sleep, have sleep disturbances, or need extra privacy to one or two person rooms;

(3) requiring personnel to make themselves known before entering a child's room, except when doing bed checks when children are sleeping;

(4) prohibiting body or strip searches, except a child may be searched if there is cause to believe a weapon or contraband may be found and the facility has a personal search policy approved by the licensing representative;

(5) prohibiting search of a child's room, except, if there is cause to believe that a weapon or contraband may be found, a search of a child's room may be conducted in the presence of the child or another caregiver;

(6) prohibiting the use of surveillance cameras or listening devices for routine observation of children in bedrooms or bathrooms; however, motion detectors or surveillance cameras in behavior-management rooms, hallways, or common living areas are permitted;

(7) prohibiting personnel from opening a child's parcels or letters, except, if the child is incapable of doing so or the caregiver suspects the contents to be a weapon or contraband, a child's parcels or letters may be opened if another caregiver is present;

(8) prohibiting personnel from reading a child's letters, except, if the child is incapable of doing so, the child's letters may be read to the child if another caregiver is present; and

(9) providing privacy for phone conversations and visitation, unless monitoring of calls or visits is specified in the treatment plan.

(f) A facility shall ensure that a child in care receives education to meet the child's needs. A facility shall actively support a child's learning through techniques such as encouragement, quiet time, a space to do homework, reinforcement for learning, study, and homework and, when necessary, furnishing special materials, tutoring, and career counseling.

(g) A facility with shift workers shall maintain daily log notes in which on duty staff shall comment on the activities and events of the day for each child in care. A facility shall observe, assess, and record the progress of each child toward meeting objectives in the child's treatment plan a minimum of once a week.

(h) A facility shall provide each child with the child's own clean, well fitting, attractive, seasonal clothing appropriate to age, sex, and individual needs and comparable in quality, quantity, and appearance to that worn by other children in the community.

(i) A facility shall allow a child to bring and acquire personal belongings consistent with the child's space, comfort, and safety. However, a facility may require a child to verify ownership of belongings in the child's possession.

(j) A facility may use chores to give a child the opportunity to learn responsibility, but may not use chore assignments as an unpaid substitution for adult staff. The facility shall make chore assignments only in accordance with the age and ability of the child.

(k) A facility shall permit a child to receive the child's own money, whether through an allowance, child's fund, opportunities for paid work, or other source. A facility

(1) shall consider money earned or money received as a gift, allowance, or from some other source as the child's personal property and shall not permit a caregiver or other resident of the facility to spend the child's money, except at the request of the child;

(2) may place limitations on the amount of money a child may possess or to which the child may have unencumbered access, if the limitations are in the child's best interest;

(3) shall maintain a separate accounting system for children's funds that are maintained by the facility; and

(4) shall assist a child who maintains funds in excess of \$200 in establishing a personal bank account.

(l) If a child exhibits signs of danger to self or to others, a facility shall either obtain professional services not available from facility staff or make arrangements to discharge the child. If the facility chooses to obtain professional services for the child, the facility shall have the child evaluated by a mental health professional, develop a specific plan of care to prevent harm to the child or others, submit the plan of care to the mental health professional for the professional's review and approval, and implement the plan only with the professional's approval.

(m) A facility that provides services for emotionally disturbed children must have mental health resources available on both an ongoing and emergency basis and shall show evidence of access to these resources.

(n) A facility that provides services for children with alcohol or drug dependence must have alcohol or drug treatment resources available on both an ongoing and emergency basis and shall show evidence of access to these resources.

(o) A child may not be involved in an activity related to fund raising or publicity for a facility without the prior written consent of the child, the child's parent, and the child's placement worker.

(p) Upon a child's discharge a facility shall provide services to assist the child in making a successful transition back to the community or family. The services provided may include transmitting medical, school, and other records to the appropriate agencies and serving as a resource to former residents for emotional and other support following discharge.

✚ **History:** Eff. 1/1/96, Register 136; am 3/1/98, Register 145; am 6/21/2001, Register 158

✚ **Authority:** [AS 44.29.020](#) [AS 47.35.010](#)

✚ **7 AAC 50.430. Program in foster homes**

✚ (a) A foster parent shall demonstrate respect for the foster child's own family and shall work with the foster child's family members as indicated in the child's plan of care.

(b) A foster parent shall recognize, encourage, and support the religious beliefs, ethnic and cultural heritage, and language of a child's birth parents and shall respect the expressed religious preference of the birth parents for their child. However, a foster parent shall respect the preference of a foster child nine years of age or older. A foster parent shall, within reason, arrange transportation to religious services or ethnic and cultural events that, based upon the child's background, are appropriate for the child.

(c) A foster parent shall provide structure and daily activities designed to promote the individual physical, social, intellectual, spiritual, and emotional development and good health habits of a child in care. Satisfactory compliance with this subsection requires that, for young children, the requirements of former 7 AAC 50.420(a)(1) - (a)(6) and (b) in effect as of 6/30/2000, are met, except that the schedule and activity plan need not be written.

(d) A foster parent shall treat foster children equitably with the foster parent's own children.

(e) A foster parent shall give a child in foster care the opportunity to learn responsibility for chores appropriate to the child's age, health, and ability. A foster parent shall ensure that the chores are shared equitably with other children in the foster home and do not interfere with school, health, and necessary recreation.

(f) A foster parent shall consider money earned or money received as a gift, allowance, or from some other source as the foster child's personal property and shall assist a child who maintains funds in excess of \$200 in establishing a personal bank account. No member of a foster home may borrow or spend money acquired by the foster child.

(g) A foster parent may place limitations on the amount of money a child may possess or to which the child may have unencumbered access if the limitations are in the child's best interest.

(h) A foster parent shall allow the foster child to bring and acquire personal belongings and shall send all personal clothing and belongings in use at the time and any clothing that the foster child will grow into with the child when the child leaves the foster home.

(i) A foster parent shall provide each foster child with the child's own clean, well fitting, attractive, seasonal clothing appropriate to age, sex, and individual needs and comparable in quality, quantity, and appearance to that worn by other children in the community.

(j) A foster parent, in conjunction with the foster child's own parents, when appropriate, shall take part in the selection and arrangements for education appropriate for the child's age, abilities, and plan of care.

(k) Repealed 3/1/98.

✚ **History:** Eff. 1/1/96, Register 136; am 3/1/98, Register 145

✚ **Authority:** [AS 44.29.020](#) [AS 47.35.010](#)

✚ **7 AAC 50.435. Behavior guidance**

✚ (a) A facility shall help a child to develop age appropriate patterns of behavior that foster constructive relationships and increasing ability to deal with everyday life.

(b) A facility shall provide for positive reinforcement, redirection, and the setting of realistic expectations and clear and consistent limits.

(c) A facility may not use discipline or a behavior management technique that is cruel, humiliating, or otherwise damaging to the child.

(d) A child in care may not be

(1) removed from the other children for more than 10 minutes if the child is a young child, except as provided in (e) of this section;

(2) disciplined in association with food or rest;

(3) punished for bedwetting or actions in regard to toileting or toilet training;

(4) subjected to discipline administered by another child;

(5) deprived of family contacts, mail, clothing, medical care, therapeutic activities designated in the child's plan of care, or contact with the child's placement worker or legal representative;

(6) subjected to verbal abuse, to derogatory remarks about the child or members of the child's family, or to threats to expel the child from the facility;

(7) placed in a locked room;

(8) physically restrained, except when necessary to protect a young child from accident, to protect persons on the premises from physical injury, or to protect property from serious damage; and then only passive physical restraint may be used;

(9) mechanically restrained, except for a protective device such as a seatbelt; or

(10) chemically restrained, except on the order of a physician and subject to the provisions of [7 AAC 50.440](#).

(e) Deleted 7/1/2000.

(f) Corporal punishment may not be used on a child in care.

(g) A residential child care facility shall set out rules to help children develop self control and conform to acceptable patterns of behavior, and give a copy of the rules to a child upon the child's admission.

(h) A residential child care facility may not isolate a child for more than one hour unless the facility has established an isolation procedure as part of the facility's behavior guidance policy required by [7 AAC 50.425\(a\)](#) that

(1) includes the provisions under (i) of this section;

(2) addresses the provision of (j) of this section, if applicable;

(3) describes the circumstances under which a child may be isolated for more than one hour; and

(4) includes other less restrictive responses to be used before isolation for more than one hour.

(i) A residential child care facility shall document in the child's file the circumstances leading to each incident of physical restraint of a child or isolation of a child exceeding one hour.

(j) A residential child care facility may not isolate a child in a locked room except that, with prior approval of the division, a locked behavior-management room may be used under the following conditions:

(1) the locked behavior-management room must meet the approval of the appropriate municipal or state fire safety authority, must be suicide-resistant, must have break-resistant glass and security screening on its windows, and may not have less space than 50 square feet; and

(2) the facility's policies and procedures regarding the use of its locked behavior-management room must incorporate the following requirements:

(A) the locked behavior-management room may be used only if a child is out of control and is in danger of harming the child's self or others, and the facility staff has exhausted all less restrictive alternatives;

(B) the locked behavior-management room may be used only for the time necessary to change the behavior compelling its use;

(C) the locked behavior-management room may be used only on the order of a professional mental health clinician; the clinician must set out in the order a maximum time limit for initial use of the room for isolation of a particular resident, not to exceed two hours for a child 10 years of age or older, and not to exceed one hour for a child less than 10 years of age; after that initial period the clinician may not continue the isolation of the resident in the locked behavior-management room unless

(i) the clinician executes a separate order for each period of continued isolation, and sets out in that order a maximum time limit not to exceed the applicable initial time limit set out in this subparagraph;

(ii) the clinician makes a face-to-face assessment of the child before executing an order described in (i) of this subparagraph; and

(iii) within any 24-hour period, the resident is kept in isolation, whether continuous or intermittent, for no more than eight hours, if the child is 10 years of age or older, and for no more than four hours, if the child is less than 10 years of age;

(D) no more than one child may be placed in the locked behavior-management room at a time;

(E) a staff member of the facility shall observe the child at intervals of 15 minutes or less and record the observation in a behavior management log;

(F) the behavior management log must include the name of the child, the time of the child's placement in the locked behavior-management room, the name of the staff member responsible for the placement, a description of the specific behavior requiring the use of the locked behavior-management room, and the time of the child's removal from the locked behavior-management room; the behavior management log must be signed by the professional mental health clinician who recommended its use;

(G) for each use in which a child remains in the locked behavior-management room for longer than one hour, the behavior management log must contain hourly supervisory approval and the reasons for the continued use of the locked behavior-management room beyond the first hour;

(H) use of the locked behavior-management room may not exceed the time limit established by the mental health professional;

(I) when a child less than 10 years of age is placed in the locked behavior-management room, a staff member shall be physically present in the room; however, the staff member may move to an area outside and immediately adjacent to the room if

(i) the child's behavior and affect indicate that the removal of the staff member from the room will allow the child to better gain self-control;

(ii) before leaving the room, the staff member ensures that the child is safe; and

(iii) by personal observation, including both sight and sound, the staff member continuously monitors the child from immediately outside the window in the door or outside another window that looks into the room; for purposes of this subparagraph, personal observation does not include staff observation of the child over a video monitor; and

(J) the facility shall ensure that the personal needs of the child placed in the locked behavior-management room are met and that the child has prompt access to washroom and toilet facilities.

⊕ **History:** Eff. 1/1/96, Register 136; am 3/1/98, Register 145; am 6/21/2001, Register 158

⊕ **Authority:** [AS 44.29.020](#) [AS 47.35.010](#)

**7 AAC 50.440. Medications.** A facility subject to this chapter shall also comply with the applicable provisions of 7 AAC 10.1070 regarding medications. (Eff. 1/1/96, Register 136; am 3/1/98, Register 145; am 6/23/2006, Register 178)

**Authority:** AS 44.29.020 AS 47.32.030  
AS 47.32.010

**7 AAC 50.445. Reducing the spread of disease.** To reduce the spread of disease, a facility subject to this chapter shall meet the applicable requirements of 7 AAC 10.1045 (Universal Precautions) and 7 AAC 10.1050 (Caregiver Hygiene). (Eff. 1/1/96, Register 136; am 3/1/98, Register 145; am 6/23/2006, Register 178)

**Authority:** AS 44.29.020 AS 47.32.030 AS 47.32.010

⊕ **7 AAC 50.450. Health in child care facilities**

⊕ Deleted 7/1/2000.

⊕ **History:** Eff. 1/1/96, Register 136; am 3/1/98, Register 145

⊕ **7 AAC 50.455. Health in full time care facilities**

⊕ (a) A full time care facility shall either obtain evidence of immunization as specified in this section for each child in care or initiate immunizations as specified in this section no later than 30 days after the child is in care. A full time care facility shall ensure that each child in care has or is given, in a manner consistent with the timetable prescribed by the department's childhood immunization schedule, immunizations appropriate to the child's age against

(1) diphtheria, tetanus, polio, measles, and rubella;

(2) if the child is less than seven years of age, pertussis; and

(3) beginning July 1, 2001, mumps, hepatitis A, hepatitis B, chicken pox, and *Haemophilus influenzae* type B. If a child has not received all immunizations as provided in the schedule, the facility shall initiate completion of immunizations as rapidly as is medically indicated.

(b) A full time care facility shall obtain health information on each child under care when the child is accepted for care, to the extent possible. In addition to the information required to be obtained by 7 AAC [50.300\(a\)](#), health information to be obtained by the facility must include

(1) the date of the child's last physical examination and the name of the medical provider who conducted it;

(2) a report of any health problems of the child; and

(3) the child's immunization history.

(c) If a child over three years of age has not been under regular medical supervision or has not had a health examination by a licensed physician, physician's assistant, or public health nurse within one year before the child's admission to the full time care facility, a full time care facility shall arrange for an examination to be completed within 30 days in accordance with the early periodic screening, diagnosis, and treatment (EPSDT) schedule set out in 7 AAC [43.452](#) and shall provide continuing medical and dental services according to that schedule. A full time care facility shall arrange for the examination of a child three years of age or younger within 30 days of receiving the child for care, unless the child has had a health examination within three months of admission, and shall provide continuing care according to the EPSDT schedule.

(d) A full time care facility shall ensure that each child in care three years of age or older is given a dental examination by a licensed dentist at least once a year and provided dental treatment as needed.

(e) A full time care facility may not have human immunodeficiency virus and acquired immune deficiency testing done on a child in care.

(f) A full time care facility shall

(1) maintain medical, dental, immunization, and treatment records; and

(2) document any medical or dental care or treatment for which documentation was not provided by the medical or dental provider of service.

(g) A residential child care facility must have a plan for maintaining and promoting the health of children in care that addresses

(1) the prevention of illness, the correction of health defects, and the provision of routine and emergency medical and dental care;

(2) ongoing appraisal of the general health of each child in care;

(3) the care of minor acute illnesses;

(4) action to be taken in the event of medical emergencies; and

(5) administration of medication.

✚ **History: Eff. 1/1/96, Register 136; am 3/1/98, Register 145; am 12/30/2000; Register 156**

✚ **Authority:** [AS 44.29.020](#) [AS 47.35.010](#)

**Editor's note:** Alaska's childhood immunization schedule prescribed by the department's Division of Public Health may be obtained from the Division of Public Health, P.O. Box 110610, 350 Main Street, Room 503, Juneau, Alaska 99811-0610 or any other office of the division in the state.

✚ **7 AAC 50.460. Nutrition**

✚ (a) A facility shall ensure that all snacks and meals meet the child care food program requirements set out in 7 C.F.R. 226.20, revised as of January 1, 1995.

(b) In a residential child care facility, menus, including snacks, must be planned in advance, be posted in an area open to visitors, and reflect actual food served. A residential child care facility providing emergency shelter care is not required to plan menus in advance, but must retain a record of actual food served.

(c) Deleted 7/1/2000.

(d) A residential child care facility providing care for infants shall observe the following requirements for bottle feedings:

(1) bottle feedings may be prepared by the parent or the facility; however, if the facility prepares the bottle feedings, it shall consult with the parent to ensure consistency with the bottle feedings given at home;

(2) an infant must be fed on demand;

(3) a child on bottle feedings

(A) must either be held or fed sitting up or, if unable to sit up, always be held by a caregiver during the feeding; and

(B) may not be permitted to hold or carry its bottle at times other than the feeding; and

(4) bottles may not be propped for a child.

(e) A full time care facility shall attempt to provide ethnic food reflecting the ethnic background of children in care in the facility's menu, including food provided by a child's own family.

(f) A facility shall obtain information concerning any food allergies or special dietary needs of each child and shall plan that child's meals accordingly.

(g) Except for medical reasons, a facility may not deny a meal or snack to a child, force-feed a child, or otherwise coerce a child to eat against the child's will for any reason. Mere encouragement to eat without any element of compulsion is not prohibited.

✚ **History:** Eff. 1/1/96, Register 136; am 3/1/98, Register 145

✚ **Authority:** [AS 44.29.020](#) [AS 47.35.010](#)

**Editor's note:** A copy of the child care food program requirements referred to in 7 AAC [50.460\(a\)](#) may be obtained from the Division of Family and Youth Services, P.O. Box 110630, 350 Main Street, Room 404, Juneau, Alaska 99811-0630, or any other office of the division in the state.

---

---

**⊕ Article 6  
Environment**

Section

[500. Effect of local ordinances.](#)

[510. Life and fire safety.](#) (repealed and readopted)

[520. Environmental health and safety.](#) (repealed and readopted)

[530. Space.](#)

[540. Equipment and supplies.](#)

**⊕ 7 AAC 50.500. Effect of local ordinances**

⊕ A license is issued or denied on the basis of the applicant's compliance with the requirements of [AS 47.35](#) and this chapter. The enforcement of local ordinances, such as zoning regulations and local building codes, is the responsibility of local officials.

⊕ **History:** Eff. 1/1/96, Register 136

⊕ **Authority:** [AS 44.29.020](#) [AS 47.35.010](#)

**7 AAC 50.510. Life and fire safety.** A facility subject to this chapter must also meet the applicable life and fire safety requirements set out in 7 AAC 10.1010. (Eff. 1/1/96, Register 136; am 3/1/98, Register 145; am 6/23/2006, Register 178)

**Authority:** AS 44.29.020 AS 47.32.030 AS 47.32.010

⊕

**7 AAC 50.520. Environmental health and safety.** A facility subject to this chapter must also meet the applicable environmental health and safety standards set out in 7 AAC 10.1000 – 7 AAC 10.1095. (Eff. 1/1/96, Register 136; am 3/1/98, Register 145; am 6/23/2006, Register 178)

**Authority:** AS 44.29.020 AS 47.32.030 AS 47.32.010

**⊕ 7 AAC 50.530. Space**

⊕ (a) A facility must have indoor and outdoor space to accommodate the physical and developmental needs of the children served.

(b) A residential care facility and a foster group home shall provide at least

(1) 35 square feet of usable indoor space per child, exclusive of hallways, bathrooms, storage areas, office space, furnace and laundry rooms, crib space, and any area that children are prevented from using; and

(2) 75 square feet of outdoor recreation space per child for the maximum number of children outside at any one time.

(c) In meeting the space requirements of (b) of this section, if

(1) a residential child care facility is attached to or located in a residence, the facility shall designate space that is exclusive of family living areas; and

(2) outdoor recreation space is not available at a residential child care facility or a foster group home, parks or other outdoor locations that are easily accessible may be used if a plan for transportation to and from and for use of this alternative outdoor location is approved by the licensing representative.

(d) A residential child care facility and a foster group home shall provide at least

(1) 70 square feet per child in a single resident bedroom;

(2) 50 square feet per child in a multi-resident bedroom;

(3) a bedroom ceiling height of at least 6.5 feet if bunk beds are used;

(4) one bedroom for every four children; and

(5) one full bathroom for every six children.

(e) A facility shall ensure that there is space and a specific place for each child to keep the child's own clothing and personal possessions.

(f) A residential child care facility must have storage and work space areas convenient to the area used for child care to meet the following needs:

(1) record storage and administration;

(2) food preparation and service, where applicable;

(3) storage of program materials and resources for staff and parents, where applicable;

(4) storage of repair and maintenance supplies;

(5) rest area and meeting space for staff; and

(6) in a residential child care facility,

(A) meeting space for clients, families, and therapists that affords privacy; and

(B) a communal area that may be used for social visits with friends or family when privacy is not required.

(g) The provisions of (f) of this section do not require that rooms or areas be assigned exclusively to a single function. However, a residential child care facility shall provide sleeping and bathing areas for staff that are separate from the sleeping and bathing areas of children in care.

✚ **History:** Eff. 1/1/96, Register 136; am 3/1/98, Register 145

✚ **Authority:** [AS 44.29.020](#) [AS 47.35.010](#)

✚ **7 AAC 50.540. Equipment and supplies**

✚ (a) A facility shall select equipment and supplies to support facility programs so that the amount, variety, arrangement, and use of materials, toys, and equipment available

(1) are appropriate for the developmental needs of the children in care;

(2) for young children, meet criteria contained in former 7 AAC 50.420(a)(1) - (5), in effect as of 6/30/2000;

(3) are of sufficient quantity to avoid excessive competition and long waits for use by a child; and

(4) when stored, are stored safely and so that at least some of the toys and materials are accessible to children.

(b) Deleted 7/1/2000.

(c) Repealed 3/1/98.

(d) A facility must have a telephone or message phone, unless telephones are not readily available in the community.

(e) Deleted 7/1/2000.

(f) A residential child care facility shall provide each child with

(1) a bed that is substantially constructed;

(2) a clean, odor-free mattress and mattress cover, linens, and covers adequate for the season; and

(3) bath towels, hand towels, washcloths, soap, and other necessary personal hygiene products.

(g) A foster parent shall provide beds, cribs, bedding, and sleeping space for the foster children in the home. A foster parent shall provide foster children with individual beds and cribs, except that young children of the same sex may share a double bed.

✚ **History:** Eff. 1/1/96, Register 136; am 3/1/98, Register 145

✚ **Authority:** [AS 44.29.020](#) [AS 47.35.010](#)

## ⊕ Article 7 Specializations

### Section

[600. Approval of specializations.](#)

[605. \(Deleted\).](#)

[610. Emergency shelter care in full time care facilities.](#)

[615. Emergency shelter care for runaway children in residential child care facilities.](#)

[620. Shelter home care for runaway children.](#)

[625. Wilderness and adventure experiences in residential child care facilities.](#)

[630. Boarding care in foster homes.](#)

[635. Boarding care in residential child care facilities.](#)

[640. Supervised transition living in full time care facilities.](#)

[645. Care for pregnant and parenting adolescents in full time care facilities.](#)

[650. Substance use treatment facilities.](#)

### ⊕ 7 AAC 50.600. Approval of specializations

⊕ To obtain approval by the division of a specialization designation described in 7 AAC [50.605](#) - 7 AAC [50.650](#), a facility must demonstrate its ability to comply with the requirements set out in [AS 47.35](#) and this chapter applicable to that specialization. The division will approve a requested specialization designation if the division determines that the facility is able to satisfy those applicable requirements.

⊕ **History:** Eff. 1/1/96, Register 136

⊕ **Authority:** [AS 44.29.020](#) [AS 47.35.010](#)

⊕ 7 AAC 50.605. Nighttime care in child care facilities

⊕ Deleted 7/1/2000.

⊕ **History: Eff. 1/1/96, Register 136; am 3/1/98, Register 145**

⊕ **7 AAC 50.610. Emergency shelter care in full time care facilities**

⊕ (a) A full time care facility may not accept children for emergency shelter care, including respite care, without an emergency shelter care specialization approved by the division.

(b) A full time care facility may be approved to provide emergency shelter care in combination with regular foster or residential care. A residential care facility shall submit a plan for emergency shelter care to the division for review and approval that

(1) designates the number of beds for each type of care to be provided by the facility; and

(2) identifies how each type of care will be provided by the facility.

(c) Upon admission, a full time care facility shall conduct a brief health review of the child using the division's form 06-9372 (Rev. 10/95) and shall secure any necessary medical or dental treatment needed by the child. Form 06-9372 (Rev. 10/95) is adopted by reference as a part of this subsection.

(d) A foster home that provides emergency shelter care must have one foster parent generally available in the home.

(e) To the extent it provides emergency shelter care, a residential child care facility is exempt from the following provisions:

(1) 7 AAC [50.320\(c\)](#), (e), (f), and (g);

(2) 7 AAC [50.330](#);

(3) 7 AAC [50.340\(e\)](#) ;

(4) 7 AAC [50.425\(a\)](#), (b), (f), (h), (j), (k)(3), (k)(4), (l), (m), and (p); and

(5) 7 AAC [50.455\(b\)](#) (3) and (d).

(f) A residential child care facility shall provide a program to children in emergency shelter care that includes structure and daily activities designed to promote the individual physical, social, intellectual, spiritual, and emotional development and good health habits of a child in care.

(g) A residential child care facility that provides emergency shelter care to young children shall meet the supervision requirements of former 7 AAC 50.400(b)(1) - (3), in effect as of 7/1/2000, for young children.

(h) A residential child care facility providing emergency shelter care shall promote child development by

(1) meeting the requirements of former 7 AAC 50.420(a)(1) - (6) and (b), in effect as of 7/1/2000 for young children; and

(2) ensuring continued school attendance for a school aged child whenever possible, including enrolling the child in a local school as soon as possible when attendance at the child's own school is not appropriate or possible.

(i) A residential child care facility providing only emergency shelter care shall have intake open 24 hours a day, seven days a week and shall have one awake staff member at all times.

(j) A residential child care facility providing emergency shelter care shall make and maintain an individual record for each child admitted for emergency shelter care. The individual record must contain

(1) information obtained upon admission of a child, including

(A) the name, sex, race, and birth date or age of the child;

(B) the name, address, and telephone number of the child's parent or guardian, if known;

(C) the name, address, and telephone number of the person who placed the child;

(D) the reasons for emergency shelter care;

(E) allowed or restricted contact with relatives or other individuals, if available or known;

(F) medical information about the child, including medication, allergies, special treatments, or special diets; and

(G) the anticipated discharge date;

(2) a consent for emergency medical and surgical care; and

(3) an assessment of the child's immediate and specific needs and a brief plan of care; the plan of care must be prepared within five calendar days of admission and must be copied to the child's placement worker; the plan of care must include

(A) short-range goals and tentative long-range goals for the child and the child's family;

(B) plans for family involvement, as appropriate;

(C) the specific services to be provided by the facility and other resources to meet the child's needs; and

(D) the anticipated discharge date.

(k) To the extent it provides emergency shelter care, a residential child care facility may not maintain a child in care for longer than 30 days unless there is documentation in accordance with this subsection that continued care is necessary. Thirty days after admission and every 15 days thereafter an assessment must be completed by facility staff in cooperation with the child's placement worker. The assessment must include

(1) the reasons for continued care;

(2) plans for other placement; and

(3) barriers to other placement and plans to eliminate the barriers.

⊕ **History:** Eff. 1/1/96, Register 136; am 3/1/98, Register 145

✚ **Authority:** [AS 44.29.020](#) [AS 47.35.010](#)

**Editor's note:** The division's form 06-9372 (Rev. 10/95) adopted by reference in 7 AAC 50.610(c) is on file in the office of the lieutenant governor and may be obtained from the Division of Family and Youth Services, P.O. Box 110630, 350 Main Street, Room 404, Juneau, Alaska 99811-0630, or any office of the division.

✚ **7 AAC 50.615. Emergency shelter care for runaway children in residential child care facilities**

✚ (a) In order to be approved as specializing in emergency shelter care for runaway children, a residential child care facility must meet the requirements of 7 AAC [50.610\(a\)](#) - (j) and this section. A facility may not advertise or represent that it specializes in serving runaway children without a specialization in emergency shelter care for runaway children approved by the division.

(b) Upon a runaway child's admission to a facility the facility shall

(1) immediately inform the child seeking assistance of the child's legal rights and responsibilities under [AS 47.10.141](#) - 47.10.142 and [AS 47.10.300](#) - 47.10.399 and of services and assistance available for runaway children from the facility and from governmental and community sources;

(2) attempt to determine why the child is a runaway;

(3) notify the child's parent of the child's physical and emotional condition and the circumstances surrounding the child's admission to the facility as soon as possible, but no later than 48 hours after admission, unless

(A) the facility is notified that the division or the child's placement worker, if any, has already done so;

(B) there is reason to believe that the child has been physically or sexually abused by the child's parent and the division is notified immediately;

(C) there is reason to believe that notifying the child's parent would endanger the life or safety of the child or another person in the facility and the division is notified immediately; or

(D) the child will not divulge the name of the child's parent or the parent cannot be reached after a good faith effort and the division is notified within 48 hours;

(4) notify the division, within 24 hours, of the whereabouts of a child who has been reported by the division to be in state custody or for whom the facility knows there is a court order for the division or a law enforcement agency to take custody of the child; and

(5) obtain, within 48 hours, the consent of the division for a child in state custody to remain in residence at the facility.

(c) A facility must have a program of care for serving runaway children that includes

(1) establishing reunification of a runaway child with the child's family as a primary goal, except when reunification is clearly contrary to the best interests of the child;

(2) offering family mediation services within the first week of the child's residency, unless clearly not appropriate;

(3) assisting a runaway child to consider the child's legal rights and responsibilities, options, and access to services;

(4) determining why a child is a runaway;

(5) identifying a child for whom reunification is not an appropriate goal, and working with the division to develop plans to provide for the care and safety of the child;

(6) looking for symptoms of child abuse or neglect, and immediately reporting suspected cases of child abuse or neglect to the division;

(7) identifying the symptoms of alcohol and drug abuse or dependence, and making referrals of a child that has those symptoms to treatment resources;

(8) providing or assisting in arranging for necessary services for the child, including food, shelter, clothing, medical care, and individual and family counseling; and

(9) providing or arranging for visitation and other forms of communication by the child with the child's family and significant others.

(d) In order to promote reunification of a runaway child with the child's family, a facility may not normally provide shelter for a runaway child for a period exceeding two weeks during the child's stay at the facility.

(e) For a child, including a child in state custody, that is expected to remain in the facility for no more than 45 days, the facility shall, within 10 days of the child's admission, complete an assessment of the child and the child's circumstances that

(1) includes observations of the child while in the facility;

(2) is based in part on a meeting of staff, the child, the child's parent, and other concerned individuals, as available;

(3) includes a review of any materials about the child that the facility has received and the child's health information from the form 06-9372 adopted by reference in 7 AAC [50.610\(c\)](#) ; and

(4) includes a review of the

(A) reasons for the child's admission to the facility and the child's circumstances at the time of admission;

(B) child's significant history, including education, health, and professional evaluations; and

(C) child's family circumstances, including the needs and strengths of the family and the likelihood of successful reunification.

(f) Upon completion of the assessment required by (e) of this section, the facility shall prepare a plan of care based on the assessment that includes

(1) the findings of the assessment;

(2) the goals to be achieved or worked toward for the child and the child's family, including reunification with the family or development of an alternative plan;

(3) a strategy for fostering positive family relationships for the child and the child's family, regardless of whether reunification is the goal of the plan;

(4) a description of the services to be provided by the facility, by the child's parents or agency having custody, from other community resources, and by the department;

(5) plans for family mediation or family involvement, as appropriate;

(6) plans for religious and cultural participation, as appropriate;

(7) plans for education, as appropriate; and

(8) a discharge plan that includes the anticipated date of discharge and the person or agency to whom the child is expected to be discharged, if any.

(g) For a child that is expected to reside in a facility for more than 45 days, the facility shall enter into an agreement between the facility and the parent of the child. The agreement must contain the elements of an agreement specified in 7 AAC [50.320\(f\)](#).

(h) A facility shall discharge a runaway child

(1) after 45 days if the facility has not obtained written consent from the child's parent for the child's residence at the facility for a period exceeding 45 days, unless the child has been placed in state custody;

(2) after 90 days if the facility has not obtained written consent from child's parent or the division for the child's continued residence at the facility for a period exceeding 90 days.

(i) A facility

(1) shall make a good faith effort to reunite a child in care with the child's family, when appropriate;

(2) if reuniting the child with the child's family is not appropriate, shall attempt to find a safe place for the child to stay with a responsible adult;

(3) may discharge a child age 16 or older care to the child's self, when necessary and appropriate; and

(4) shall report a proposed discharge of a runaway child to the child's parent, to the child's placement worker, and to the division at least 12 hours before the discharge if the discharge is to be made to the child's self or to the custody of a person other than the child's parent.

(j) A facility that receives state money in an amount that exceeds one-fourth of the program's costs shall install devices such as door and window alarms to establish the entire facility as semi-secure. In addition,

(1) the devices and installation must meet the approval of the fire safety authority to ensure egress; and

(2) selection and installation of a device may not impede adequate ventilation.

⊕ **History:** Eff. 1/1/96, Register 136; am 3/1/98, Register 145

⊕ **Authority:** [AS 44.29.020](#) [AS 47.05.060](#) [AS 47.10.300](#) [AS 47.10.310](#) (c)(6) [AS 47.10.320](#)

[AS 47.10.392](#) [AS 47.35.010](#)

**Editor's note:** The division's form that is referenced in 7 AAC [50.615\(e\)](#) is form 06-9372 (Rev. 10/95) on file in the office of the lieutenant governor. The form may be obtained from the Division of Family and Youth Services, P.O. Box 110630, 350 Main Street, Room 404, Juneau, Alaska 99811-0630, or any office of the division.

✚ **7 AAC 50.620. Shelter home care for runaway children**

✚ (a) The purpose of a shelter home is to provide a temporary place for a runaway child if there is no practical or peaceful way for the child to return home. The goal is to reunite the child with the child's family, unless that is not appropriate.

(b) A shelter home is exempt from the requirement of collaborating on the plan of care under 7 AAC [50.300\(g\)](#) for a child if the child does not have a placement worker. A shelter home is also exempt from the requirements of

(1) 7 AAC [50.300\(c\)](#) , (d), and (f);

(2) 7 AAC [50.340\(e\)](#) ;

(3) 7 AAC [50.430\(b\)](#) and (i);

(4) 7 AAC [50.455\(a\)](#) , (b)(3), (c), and (d); and

(5) 7 AAC [50.540\(a\)](#) .

(c) A shelter home may only admit runaway children.

(d) A shelter home shall maintain a dated log of each child admitted for care.

(e) A shelter home shall have admission and discharge guidelines and rules for the home. A shelter home may decline admission of a child.

(f) Upon admission of a child, a shelter home shall inform the child seeking assistance of the child's legal rights and responsibilities under [AS 47.10.141](#) - 47.10.142 and 47.10.300 - 47.10.399 and of services and assistance available for runaway children from community sources.

(g) Upon admission of a child, a shelter home shall, on forms provided by the division,

(1) complete a brief health review of the child; and

(2) complete an informal assessment of the needs and problems of the child, including the reasons the child left home, unless an assessment has previously been completed on the child by a placement worker.

(h) A shelter home shall notify the child's parent of the child's physical and emotional condition and the circumstances surrounding the child's admission to the home as soon as possible, but not later than 48 hours after admission, unless

(1) there is reason to believe that the child has been physically or sexually abused by the child's parent and the division is notified immediately;

(2) there is reason to believe that notifying the child's parent would endanger the life or safety of the child or a member of the shelter home's household and the division is notified immediately;

(3) the child will not divulge the name of the child's parent or the parent cannot be reached after a good faith effort and the division is notified within 48 hours;

(4) the child has a placement worker who has previously notified the child's parent;

(5) a shelter home not associated with a private child placement agency has requested the division to notify the child's parent; or

(6) a shelter home associated with a child placement agency has requested the child placement agency to notify the child's parent.

(i) During the first year of shelter care experience by the shelter home, no more than one child of any age who is unrelated to the shelter home parent is permitted in care at any one time. One year of shelter care experience by the shelter home is required before the number of children in care may be increased.

(j) No more than six children may reside in any one shelter home. Of the six children, no more than two children of any age who are unrelated to the shelter home parent are permitted to reside in the shelter home after the first year of shelter care experience.

(k) A shelter home shall attempt to secure needed medical treatment or other needed services for a child in care utilizing community resources known to the shelter home parent.

(l) A shelter home shall refer a child in care and the child's parent, if appropriate, to family mediation resources in the community, if any, unless the shelter home is connected to a child placement agency that offers the mediation services.

(m) A shelter home shall discharge a runaway child in care after seven days unless

(1) the division authorizes a longer period of up to 21 days; or

(2) the parent of the child gives written consent for a specified longer period and authorizes emergency medical and surgical care for the child.

(n) A shelter home

(1) shall make a good faith effort to reunite a child in care with the child's family, when appropriate;

(2) if reuniting the child with the child's family is not appropriate, shall attempt to find a safe place for the child to stay with a responsible adult;

(3) may discharge a child age 16 or older from care to the child's self, when necessary and appropriate; and

(4) shall report a proposed discharge of a runaway child to the child's parent, to the child's placement worker, and to the division at least 12 hours before the discharge if the discharge is to be made to the child's self or to the custody of a person other than the child's parent.

✚ **History:** Eff. 1/1/96, Register 136; am 3/1/98, Register 145

✚ **Authority:** [AS 44.29.020](#) [AS 47.10.300](#) [AS 47.10.392](#) [AS 47.35.010](#)

**⊕ 7 AAC 50.625. Wilderness and adventure experiences in residential child care facilities**

⊕ (a) A residential child care facility may not provide wilderness or adventure experiences for a period longer than four days without a wilderness and adventure experience specialization approved by the division.

(b) A facility must base an experience on a plan that addresses each requirement in this section. A plan for each experience of more than four days' duration must be submitted to the division for review and approval at least thirty days in advance of the experience. A facility shall ensure that each staff member involved in the experience reviews the plan and that a copy of the plan is taken on each experience away from the facility.

(c) A facility shall ensure that the plan required under (b) of this section establishes emergency procedures and injury control procedures for any wilderness or adventure experience the facility conducts. The emergency procedures and injury control procedures must include

(1) the posting of emergency telephone numbers, if telephones are available;

(2) respect for and identification and avoidance of potential weather hazards;

(3) the identification and warning to campers of other potential hazards such as noxious plants, bears and other wild animals, cliffs, mine shafts, and polluted waters; and

(4) the development of contingency plans to deal with fire, natural disasters, lost campers, and other emergencies.

(d) A contingency plan required by (c)(4) of this section must address the following items:

(1) the orientation of children and staff to procedures contained in the plan, including safety precautions and how to prevent dehydration, frostbite, heat exhaustion, hyperthermia, hypothermia, poisoning from plants and animals, sun poisoning, snowblindness, or drowning and procedures relating to transportation to emergency facilities;

(2) the development of a daily itinerary before departure for travel camping, with one copy retained at the facility and, whenever possible, additional copies given to responsible local individuals at each point on the itinerary before departure;

(3) fire drills within 24 hours after setting up camp at a stationary camp;

(4) the means for establishing effective two-way emergency communication no later than 24 hours after the need to communicate arises; and

(5) timely involvement of law enforcement and other external agency assistance, when necessary.

(e) A facility must obtain advance approval from the child's placement worker before a child may participate in an experience under this section. If high risk activities are anticipated, the division will, in its discretion, also require approval from the child's parent. No young child may participate in a wilderness or adventure experience.

(f) A facility may not force or coerce a child to participate in any adventure experience, but may require a child to observe an adventure experience to assist the child in overcoming fears or to foster an interest in participating in a particular activity.

(g) A facility may not allow

- (1) airborne activities including bungee jumping, hang gliding, and parachuting;
- (2) any activities requiring firearms or archery; and
- (3) travel in any water craft across waters known to be a danger or across waters in questionable weather conditions.

(h) A facility shall submit a description to the division and permit an on-site inspection before implementing any of the following high risk adventure activities:

- (1) caving;
- (2) rope initiatives and rock and ice climbing;
- (3) solo camping.

(i) A facility must plan for supervision during a camping experience so that

- (1) the child-to-staff ratios required in 7 AAC [50.410](#) are maintained or increased appropriate to the planned activity;
- (2) a staff member who has at least the equivalent of one year of wilderness and adventure experience is designated to supervise the experience;
- (3) caregivers who supervise specialized or high risk activities in which children participate have demonstrated competency in those activities; these activities include whitewater or sea rafting, kayaking, or canoeing, snow and ice climbing, snow or glacier travel, snowshoeing or downhill skiing, mountaineering, rock climbing, top rope climbing and rappelling, caving, river crossing, solo expeditions, horseback riding, scuba diving, fishing from a boat, and winter camping; this demonstration may include certification from an organization with recognized expertise in the applicable activity or documentation of training or experience in the activity; and
- (4) if applicable, caregivers have received special training necessary to protect the safety and health of children with special needs.

(j) A facility shall take the following general health and safety precautions during a camping experience:

- (1) the facility may not allow children with recent serious emotional or medical problems to participate in a camping experience without the consent of a mental health professional or physician;
- (2) the consent for emergency medical and surgical care for each child required by 7 AAC [50.300\(a\)](#) must be in the possession of the supervising caregiver;
- (3) the facility shall package standard first aid supplies to prevent contamination and must make the first aid supplies available to caregivers enroute to and after arrival at the camp site; and
- (4) at least one staff member accompanying the camping group must be certified in first aid and CPR.

(k) Equipment used in a camp during a camping experience conducted by a facility must be of good quality and maintained in proper working order. In addition,

(1) if firearms are considered necessary in bear country, only staff certified in the use of firearms may carry them; firearms and ammunition must be stored in a locked cabinet or building when not in use in a stationary camp or must be kept in the possession of the supervising caregiver at a temporary campsite;

(2) power equipment and dangerous tools may not be stored, operated, or left unattended without proper safeguards in camping areas and may not be used by children;

(3) water craft must be equipped with United States Coast Guard approved personal flotation devices of types I, II, or III as prescribed for the specific type of craft and number and age of occupants; one flotation device for each person on board the water craft is required; and

(4) tents must be made of fire retardant material.

(l) A facility shall ensure that all water from streams, ponds, lakes, or rivers that is used for drinking, food preparation, and dishwashing is first boiled, filtered, or purified with iodine or tablets specifically designed to purify water.

(m) During a wilderness or adventure experience conducted by a facility, food must be prepared and served in accordance with sound sanitary camping practice. Special care must be taken to choose food for the length and type of camping experience and to consider refrigeration needs and problems of sanitation.

(n) In this section, "wilderness and adventure experience" or "experience" includes activities such as biking, canoeing, kayaking, tubing, caving, hiking, horseback riding, rope initiatives and rock or ice climbing, sailing and boating, solo outings, swimming, water skiing, or camping.

✚ **History:** Eff. 1/1/96, Register 136; am 3/1/98, Register 145

✚ **Authority:** [AS 44.29.020](#) [AS 47.35.010](#)

✚ **7 AAC 50.630. Boarding care in foster homes**

✚ A foster home may provide boarding care only with a boarding care specialization approved by the division. A foster home that provides only boarding care is exempt from the following requirements:

(1) 7 AAC [50.250](#);

(2) 7 AAC [50.300\(c\)](#) , (d), and (g);

(3) 7 AAC [50.340\(e\)](#) ;

(4) 7 AAC [50.415\(f\)](#) - (h);

(5) 7 AAC [50.430\(a\)](#) and (i);

(6) 7 AAC [50.455\(c\)](#) and (d); and

(7) 7 AAC [50.540\(a\)](#) .

✚ **History:** Eff. 1/1/96, Register 136; am 3/1/98, Register 145

✚ **Authority:** [AS 44.29.020](#) [AS 47.35.010](#)

⊕ **7 AAC 50.635. Boarding care in residential child care facilities**

⊕ (a) A residential child care facility may provide boarding care only with a boarding care specialization approved by the division.

(b) A facility that provides only boarding care is exempt from the requirements of:

- (1) 7 AAC [50.240\(b\)](#) and (c);
- (2) 7 AAC [50.250\(e\)](#) ;
- (3) 7 AAC [50.320\(b\)](#) , (c), (f), and (g) - (j);
- (4) 7 AAC [50.330](#);
- (5) 7 AAC [50.340\(b\)](#) - (f);
- (6) 7 AAC [50.400\(d\)](#) and (e);
- (7) 7 AAC [50.410\(b\)](#) - (d);
- (8) 7 AAC [50.425\(a\)](#) , (b), (d), (g), (h), (k), (l) and (p);
- (9) 7 AAC [50.455\(c\)](#) , (d), and (g);
- (10) 7 AAC [50.460\(e\)](#) ; and
- (11) 7 AAC [50.540\(a\)](#) .

(c) At or before admission of a child, a facility that provides boarding care shall provide a copy of its admission policies, the description of behavior expectations and rules required by 7 AAC [50.435\(g\)](#) , and the discharge policy required by 7 AAC [50.340](#) to the child and the child's parent.

(d) A facility that provides boarding care must have a description of lines of authority and other personnel relationships between staff of the facility's educational program and that of the residential living area.

(e) A facility that provides boarding care must maintain a system of routine communication between educational and residential living area personnel. The communication system must be designed to ensure that all involved staff are informed of any of the following about a child:

- (1) significant incidents, changes, or accomplishments;
- (2) behavior requiring staff intervention; and
- (3) upcoming plans of possible significance, including planned home visits.

⊕ **History:** Eff. 1/1/96, Register 136; am 3/1/98, Register 145

⊕ **Authority:** [AS 44.29.020](#) [AS 47.35.010](#)

⊕ **7 AAC 50.640. Supervised transition living in full time care facilities**

⊕ (a) A full time care facility may not advertise or represent that it specializes in supervised transition living without a supervised transition living specialization approved by the division.

(b) For older adolescents for whom family reunification, placement with previous caregivers, or extended family or adoption are not feasible, a facility shall provide or arrange services designed to enable the child to successfully prepare for and make the transition to independence.

(c) A facility shall provide or secure services that address the child's need for

(1) establishing or strengthening family ties whenever possible;

(2) life skills training, including money management and locating, obtaining, and maintaining a residence;

(3) education with regard to human sexuality;

(4) vocational or other training;

(5) housing during transition;

(6) legal services; and

(7) arrangements for aftercare services and socialization, cultural, religious, and recreational activities.

(d) A facility shall assist a child in obtaining or compiling documents such as a birth certificate, social security card, driver's license, educational record, medicaid or other health eligibility documentation, medical record, job resume, reference letters, list of known relatives, addresses, and phone numbers, emancipation papers, when appropriate, and other documents necessary to function as an independent adult.

(e) A facility shall teach basic skills for negotiating successfully with community institutions that can provide children with necessary support, such as banking and savings, health care, education, employment, and recreation.

(f) Before discharge, a facility shall assure that basic resources are in place for a child such as a living arrangement, a source of income, affordable health care and transportation, access to at least one adult committed to helping with the transition, and peer support.

(g) A facility shall give at least 30 days notice to the child of any cessation of services.

⊕ **History:** Eff. 1/1/96, Register 136; am 3/1/98, Register 145

⊕ **Authority:** [AS 44.29.020](#) [AS 47.35.010](#)

⊕ **7 AAC 50.645. Care for pregnant and parenting adolescents in full time care facilities**

⊕ (a) A full time care facility may not advertise or represent that it specializes in care for pregnant and parenting adolescents without a specialization in care for pregnant and parenting adolescents approved by the division.

(b) In a foster home that specializes in care for pregnant and parenting adolescents

(1) the home shall meet the requirements of this section and the requirements of 7 AAC [50.720](#) - 7 AAC [50.790](#);

(2) the home may utilize available community services to meet a requirement in 7 AAC [50.720](#) - 7 AAC [50.790](#) rather than providing a service directly; however, a home shall document a service provided by a community agency; and

(3) in addition to meeting the training requirements of 7 AAC [50.250\(g\)](#) , one foster parent in the home shall receive at least one hour of training in each of the topics set out in 7 AAC [50.720\(a\)](#) (1) - (6).

(c) A residential child care facility that specializes in care for pregnant and parenting adolescents

(1) shall meet the requirements of this section and the requirements of 7 AAC [50.700](#) - 7 AAC [50.790](#);

(2) may elect to apply for a residential child care facility license with a specialization in care for pregnant and parenting adolescents or to apply for maternity home license; and

(3) may provide care for pregnant and parenting adolescents in combination with other residential child care provided the facility

(A) is licensed as a residential child care facility specializing in care of pregnant and parenting adolescents, rather than a maternity home;

(B) provides separate programs for each type of care; and

(C) minimizes exposure of infants to illness or behavioral problems of children in care.

(d) In this section, "care for pregnant and parenting adolescents" means care for pregnant adolescents, before or after the adolescent gives birth, or care as needed to adolescent mothers and their children.

✚ **History:** Eff. 1/1/96, Register 136; am 3/1/98, Register 145

✚ **Authority:** [AS 44.29.020](#) [AS 47.35.010](#)

✚ **7 AAC 50.650. Substance use treatment facilities**

✚ (a) A residential child care facility may not advertise or represent that it specializes in substance use treatment without a specialization in treatment for substance use approved by the division.

(b) A residential child care facility with approval from the department under [AS 47.37.140](#) in adolescent treatment for substance use is exempt from the requirements of

(1) 7 AAC [50.320\(c\)](#) and (d);

(2) 7 AAC [50.330](#);

(3) 7 AAC [50.340\(b\)](#) (1) - (4) and (c) - (f); and

(4) 7 AAC [50.425\(b\)](#) , (f) - (h), (k)(3), (k)(4), (l), and (p).

(c) A residential child care facility with a specialization in treatment for substance use shall ensure that a child in treatment longer than 30 days receives education to meet the child's needs.

✚ **History:** Eff. 1/1/96, Register 136; am 3/1/98, Register 145

✚ **Authority:** [AS 44.29.020](#) [AS 47.37.140](#)

---

**⊕ Article 8  
Maternity Homes**

Section

[700. Applicability.](#)

[710. Short term prematernal care.](#)

[720. Training.](#)

[730. Admission and planning.](#)

[740. Care and services.](#)

[750. Services regarding paternal involvement.](#)

[760. Parenting education.](#)

[770. Health.](#)

[780. Discharge and aftercare.](#)

[790. Safety precautions.](#)

**⊕ 7 AAC 50.700. Applicability**

⊕ (a) Except as otherwise provided in 7 AAC [50.700](#) - 7 AAC [50.790](#), the provisions of 7 AAC [50.700](#) - 7 AAC [50.790](#) apply to maternity homes for persons of any age.

(b) In addition to the standards for maternity care set out in 7 AAC [50.700](#) - 7 AAC [50.790](#), a maternity home shall comply with the standards for care of children in a residential child care facility prescribed by this chapter. The standards for care of children in a residential child care facility do not apply to adult clients in a maternity home.

**⊕ History: Eff. 3/1/98, Register 145**

**⊕ Authority: [AS 44.29.020](#) [AS 47.35.010](#) (a)(3)**

**⊕ 7 AAC 50.710. Short term prematernal care**

⊕ (a) A maternity home that specializes in short term prematernal care and occasional short term care to mothers and infants is exempt from the requirements of

(1) 7 AAC [50.110\(d\)](#); however, the facility shall designate an adult caregiver or associate administrator to act on behalf of the administrator in the absence of the administrator from the facility;

(2) 7 AAC [50.300](#); however, notwithstanding the exemption of this paragraph, the provisions of 7 AAC [50.300\(a\)](#) apply with regard to an adolescent client;

(3) 7 AAC [50.330](#);

(4) 7 AAC [50.340](#);

(5) 7 AAC [50.400](#), however, notwithstanding the exemption of this paragraph, the provisions of 7 AAC [50.400](#) apply with regard to an adolescent client and a child of an adolescent or adult client;

(6) 7 AAC [50.410](#);

(7) 7 AAC [50.425](#);

(8) 7 AAC [50.455](#);

(9) 7 AAC [50.730\(c\)](#) and (d);

(10) 7 AAC [50.740\(a\)](#) (2), (a)(3), (a)(8), (b), and (c);

(11) 7 AAC [50.750](#);

(12) 7 AAC [50.770\(f\)](#) ; and

(13) 7 AAC [50.780\(c\)](#) .

(b) The administrator of a facility described in (a) of this section must have 12 semester hours of college credit in human development, early childhood development, psychology, nursing care or the equivalent, such as a CDA credential. College credit in management may be substituted for three of the 12 required hours.

(c) A facility described in (a) of this section may maintain the medical records required by this chapter at a clinic or hospital if maintenance of the medical records at the clinic or hospital is included in the agreement required by 7 AAC [50.770\(h\)](#) .

(d) A facility described in (a) of this section may admit the mother of a pregnant adolescent or other significant female adult selected by the adolescent for the purpose of supporting the adolescent prior to and during childbirth. The mother or other significant adult is exempt from the requirements for an adult residing in a facility required by 7 AAC [50.210](#). The facility shall count the adult accompanying the adolescent as a client with regard to the facility's licensed capacity.

(e) In (a) of this section, "short term prematernal care and occasional short term care for mothers and infants" means care

(1) usually for fewer than 30 days for an expectant mother who is residing outside of the expectant mother's home community for the purpose of being near a hospital for childbirth; and

(2) following childbirth for mothers and their infants returning for follow up medical appointments.

✚ **History:** Eff. 3/1/98, Register 145

✚ **Authority:** [AS 44.29.020](#) [AS 47.35.010](#) (a)(3)

✚ **7 AAC 50.720. Training**

✚ (a) A facility must have a training plan that ensures each caregiver receives at least one hour of training in each of the following topics within the first year of employment:

- (1) prenatal care, including nutrition, pregnancy issues, and child birth;
  - (2) infant and early childhood growth and development;
  - (3) infant and early childhood care and stimulation;
  - (4) drug, tobacco, and alcohol use by and effects on children;
  - (5) human sexuality and prevention of disease; and
  - (6) depression and suicide prevention.
- (b) The facility's training plan under (a) of this section may include discussions at staff meetings, attendance at workshops, or self study.
- (c) A facility may provide for the training of staff under (a) of this section by including staff in instructional programs also attended by pregnant and parenting individuals at the facility.

✚ **History: Eff. 3/1/98, Register 145**

✚ **Authority:** [AS 44.29.020](#) [AS 47.35.010](#) (a)(3)

✚ **7 AAC 50.730. Admission and planning**

✚ (a) A facility shall require an expectant mother who is admitted to the facility to have a complete medical examination, including obstetrical information and findings, not later than one week after the admission of the expectant mother.

(b) A facility shall compile a family medical history on the expectant mother and, if available, the father.

(c) If appropriate in preparing the plan of care required for a pregnant adolescent under 7 AAC [50.300\(g\)](#) or the treatment plan under 7 AAC [50.330](#), a facility shall include the expectant father and paternal relatives. The plan must include

- (1) the plan for and receipt of medical care and dental care for an infant or older child accompanying the pregnant adolescent, as applicable;
- (2) an assessment of the expectant father's interest in the child, including a notation of whether paternity has been legally established;
- (3) an assessment of the adolescent's parenting capabilities;
- (4) an assessment of the health and development of the infant or older child, including available developmental assessments from health examinations; and
- (5) documentation of how the adolescent is being prepared for self-sufficiency.

(d) If an adolescent expresses interest in surrendering her infant for adoption, the facility shall

- (1) provide the adolescent with an initial explanation of the implications and process of adoption;

- (2) notify the adolescent's placement worker, if applicable;
- (3) notify the adolescent's parent, if applicable; and
- (4) offer the adolescent information on child placement agencies.

✚ **History: Eff. 3/1/98, Register 145**

✚ **Authority:** [AS 44.29.020](#) [AS 47.35.010](#) (a)(3)

✚ **7 AAC 50.740. Care and services**

✚ (a) A facility must have a planned program to care for pregnant and parenting individuals. The program must be submitted to and approved by the division. The plan must provide for

- (1) preparation for delivery of the baby, including childbirth classes;
- (2) assistance in decision making in relation to the child, including referral to a placement agency for addressing
  - (A) adoption counseling for a mother planning to relinquish the mother's parental rights; and
  - (B) legal rights and obligations in relation to parenthood or relinquishment of parental rights;
- (3) help to the mother with family, peer, and other significant relationships, including paternal involvement;
- (4) parenting education for mothers keeping their babies;
- (5) infant stimulation and child development, where applicable;
- (6) health education, prenatal care, and where applicable, postnatal care;
- (7) physical care of pregnant and parenting individuals and care and services to mothers and their infants within the facility after childbirth, where applicable; and
- (8) socialization and support opportunities for single mothers, where applicable.

(b) A facility providing care and services to mothers and their infants or other young children within the facility after childbirth shall, with regard to the care of the infants or other young children, comply with the requirements of

- (1) former 7 AAC 50.420(a) and (b), in effect as of 7/1/2000, except that the schedule and plan of activities need not be in writing; and
- (2) former 7 AAC 50.540(e), in effect as of 7/1/2000.

(c) The facility's plan for supervision required by 7 AAC [50.400\(a\)](#) must address the increasing responsibility of mothers for their infants and young children.

(d) A facility may permit an adolescent to care for another adolescent's infant if the following conditions are met:

(1) the adolescent who is assuming the care of the infant of another adolescent may not care for more than one other infant in addition to the adolescent's own infant at any one time;

(2) the adolescent whose infant will be cared for and the adolescent caregiver discuss the expectations relating to the care of the infant, including the duration of care, the infant's nutritional and toileting needs, and whether the adolescent whose infant will be cared for will make arrangements to compensate the adolescent caregiver; and

(3) the facility documents approval of the care arrangement, including how it will protect the health and well-being of the infant.

✚ **History: Eff. 3/1/98, Register 145**

✚ **Authority:** [AS 44.29.020](#) [AS 47.35.010](#) (a)(3)

✚ **7 AAC 50.750. Services regarding paternal involvement**

✚ (a) The facility shall explain to an adolescent mother each of the following, as appropriate:

(1) the benefits of the mother's establishing paternity for her infant, her options for establishing paternity, and how paternity may be established;

(2) how to deal with future questions the mother's child may have about the child's father;

(3) how the mother may manage visitation arrangements between her child and the child's father; and

(4) that the mother's decision concerning establishment of paternity is not a condition for her remaining in the facility.

(b) An explanation required by (a) of this section may be provided by a child placement agency working with the adolescent.

(c) If the facility knows the identity of the father of the child of an adolescent, with the agreement of the child's mother, the facility shall attempt at least two contacts with the father no later than two months after admission of the adolescent to the facility to discuss his involvement with the child.

(d) A facility shall allow the expectant fathers and the fathers of the children who are residing in the facility to attend parenting classes provided by the facility.

✚ **History: Eff. 3/1/98, Register 145**

✚ **Authority:** [AS 44.29.020](#) [AS 47.35.010](#) (a)(3)

✚ **7 AAC 50.760. Parenting education**

✚ (a) A facility must have a curriculum or guidelines for providing parenting education. The curriculum or guidelines must include

(1) personal growth and maturity;

(2) interpersonal relationships;

(3) infant and early child development, including age appropriate stimulation and activities for infants and toddlers, managing behavior, and options for toilet training;

(4) safety and accident prevention;

(5) physical care, nutrition, and health of infants and young children;

(6) time, budget, and household management;

(7) community resources that provide assistance; and

(8) selecting and monitoring care of the child by others.

(b) A facility shall provide parenting education on the topics in (a) of this section to each adolescent expectant mother or mother of an infant at least one hour per week.

(c) A facility that is providing short term prematernal care shall provide opportunities for parenting education on the topics in (a) of this section at least one hour per week.

(d) A facility shall involve a pregnant or parenting adolescent in shopping for her child's clothes and other necessities.

⊕ **History: Eff. 3/1/98, Register 145**

⊕ **Authority:** [AS 44.29.020](#) [AS 47.35.010](#) (a)(3)

⊕ **7 AAC 50.770. Health**

⊕ (a) A facility shall ensure that each expectant mother is under the medical supervision of a licensed physician.

(b) A facility shall ensure that periodic examinations and laboratory tests recommended by a physician are performed according to standards of good prenatal care.

(c) A facility that admits pregnant adolescents earlier than 60 days before delivery shall ensure that

(1) a pregnant adolescent receives comprehensive prenatal care, including regular visits to an obstetrician or certified nurse mid-wife, according to the schedule of the professional providing the care;

(2) medical appointments the pregnant adolescent misses are made up; and

(3) a system is established to provide background medical information on the pregnant adolescent to the hospital or birthing center that the pregnant adolescent has identified as the location of the baby's delivery.

(d) A facility shall arrange to have a staff member, family member, or volunteer accompany a expectant mother to the hospital or birthing center when she is ready to deliver and remain with the expectant mother until health care personnel are assigned to her.

(e) Following delivery, a facility shall ensure a mother receives medical and nursing supervision and is allowed an adequate period for recovery.

(f) A facility providing care and services to an adolescent and her infant or other young child within the facility after childbirth shall ensure that mothers follow the early periodic screening, diagnosis, and treatment (EPSDT) schedule of the department's division of public health in obtaining health care for infants.

(g) A facility shall ensure a practicing physician makes postnatal examination of the mother and the infant or that an appointment is made for the examinations before their discharge from the facility.

(h) A facility must have a written agreement with each clinic or hospital that is used for obstetrical and related services provided to clients of the maternity home and their infants. The agreement must include any services the clinic or hospital will provide to ensure the facility meets the requirements of 7 AAC [50.700](#) - 7 AAC [50.790](#), including training in prenatal care or maintenance of medical records.

✚ **History: Eff. 3/1/98, Register 145**

✚ **Authority:** [AS 44.29.020](#) [AS 47.35.010](#) (a)(3)

✚ **7 AAC 50.780. Discharge and aftercare**

✚ (a) A facility shall discharge an infant only to the infant's parent or a licensed child placement agency.

(b) A facility must have a written policy that a pregnant individual seeking adoptive placement for her infant shall be referred to a child placement agency or to the division.

(c) For a mother leaving a facility, the facility shall provide aftercare services or refer the mother to services in the community.

✚ **History: Eff. 3/1/98, Register 145**

✚ **Authority:** [AS 44.29.020](#) [AS 47.35.010](#) (a)(3)

✚ **7 AAC 50.790. Safety precautions**

✚ (a) A facility shall provide beds for all pregnant and parenting individuals and may not allow the use of bunk beds.

(b) A facility may not provide for childbirth. The facility shall provide transportation for pregnant adolescents and women to a birthing center or hospital for childbirth services.

✚ **History: Eff. 3/1/98, Register 145**

✚ **Authority:** [AS 44.29.020](#) [AS 47.35.010](#) (a)(3)

---

⊕ Article 9  
Residential Pyschiatric Treatment Centers

Section

[800. Applicability.](#)

[805. Secure and semi-secure residential psychiatric treatment centers.](#)

[810. Qualifications of medical, clinical, and other staff.](#)

[815. Qualifications of caregiver staff.](#)

[820. Orientation and training.](#)

[825. Admission.](#)

[830. Admission to secure care.](#)

[835. Release from secure care.](#)

[840. Assessment and treatment plan in residential psychiatric treatment centers.](#)

[845. Continued treatment.](#)

[850. Discharge planning.](#)

[855. Discharge.](#)

[860. Independent review of extended periods of treatment or stays in secure care.](#)

[865. Child-to-caregiver ratios in residential psychiatric treatment center facilities.](#)

[870. Behavior management.](#)

[875. Medication.](#) (repealed and readopted)

[880. Resident grievances.](#)

[885. Educational services for residents.](#)

⊕ **7 AAC 50.800. Applicability**

⊕ (a) Except as otherwise provided in 7 AAC [50.800](#) - 7 AAC 50.890, the provisions of 7 AAC [50.800](#) - 7 AAC 50.890 apply to residential psychiatric treatment centers for children.

(b) In addition to the standards for residential psychiatric treatment centers set out in 7 AAC [50.800](#) - 7 AAC 50.890, a residential psychiatric treatment center shall comply with the general standards set out in this chapter for care of children in a residential child care facility except if those general standards conflict with the provisions of 7 AAC [50.800](#) - 7 AAC 50.890.

⊕ **History:** Eff. 6/21/2001, Register 158

⊕ **Authority:** [AS 44.29.020](#) [AS 47.14.120](#) [AS 47.35.010](#)

⊕ **7 AAC 50.805. Secure and semi-secure residential psychiatric treatment centers**

⊕ (a) A facility that applies under this chapter for a license to operate as a residential psychiatric treatment center for children must demonstrate in its application to the division that the facility is

(1) a semi-secure residential psychiatric treatment center; or

(2) both a semi-secure and secure residential psychiatric treatment center.

(b) Each facility must submit the training plan required by 7 AAC [50.820](#) as part of the facility's application for a license or a license renewal.

(c) Each facility must submit a written security plan to the division as part of the facility's application for a license or a license renewal. Portions of a facility's security plan that are related to fire or emergency safety must meet the approval of the appropriate municipal or state fire safety authority, and the facility shall supply proof of the required approval to the division at the time the application is submitted.

(d) To be licensed as a semi-secure residential psychiatric treatment center, a residential psychiatric treatment center must put into place, under the security plan submitted in accordance with (c) of this section, a level of security that will reasonably ensure, through resident and staff training and deployment, and the use of construction, mechanical or electronic means, that

(1) a child in treatment will not leave the facility without permission; and

(2) that if a child leaves the facility without permission, the child's act of leaving will be immediately noticed, and that the facility will immediately take steps that are appropriate to reasonably ensure the safety of the child and the community, and to cause the earliest appropriate return of the child to the facility.

(e) To be licensed as both a semi-secure and secure residential psychiatric treatment center, a residential psychiatric treatment center or a portion of a residential psychiatric treatment center must be lockable, by mechanical or electronic means, to prevent residents from leaving without authorization. The existence of a locked behavior-management room on each residential unit or sub-unit of the facility does not by itself qualify a facility for licensure as a secure residential psychiatric treatment center.

(f) Each facility that operates any part or unit of its facility as a secure residential psychiatric treatment center shall also operate a portion of its facility as a semi-secure residential psychiatric treatment center, and whenever possible shall arrange the facility's security measures and treatment programs so that a child who has resided in the secure part of a facility, may, as appropriate, continue in the same treatment and other therapeutic, educational, and other programs of the facility when the child is allowed to reside in the semi-secure part of the facility.

⊕ **History:** Eff. 6/21/2001, Register 158

⊕ **Authority:** [AS 44.29.020](#) [AS 47.35.010](#)

⊕ **7 AAC 50.810. Qualifications of medical, clinical, and other staff**

⊕ (a) A residential psychiatric treatment center shall appoint a physician as medical director of the facility. The medical director must be

(1) a psychiatrist with experience in psychiatric treatment of children; or

(2) a physician with training and experience in treatment of children with mental health problems.

(b) A residential psychiatric treatment center shall appoint a director of clinical services. The clinical director shall work full-time, shall be present at the facility at least 35 hours per week, and shall provide direct clinical services to residents or directly supervise clinical services provided by other facility staff. The clinical director must be a licensed professional mental health clinician, and must have either a certification in the treatment of children or at least five years of experience providing treatment services to severely emotionally disturbed children, at least two years of which must have been in a residential setting. However, the clinical director of a facility that serves no more than 10 residents may work part-time.

(c) The clinical director and the medical director may be the same person if the person is a psychiatrist qualified under (a)(1) of this section. The clinical director or medical director may not serve as the administrator of the facility, unless the facility serves 10 or fewer residents.

(d) The facility shall hire or contract with sufficient clinical staff who meet the requirements of (e) of this section so that each resident in treatment in the facility, or in post-discharge treatment, receives at least one hour of direct, individual clinical treatment each week, clinical review of the resident's progress file each week, and all other clinical treatment services as specified in the resident's plan of treatment.

(e) A staff person or contractor of the facility who is responsible for providing the minimum clinical services described in (d) of this section, or who is responsible for evaluating children for potential admission based on data collected in the assessment required by 7 AAC [50.825\(b\)](#), for developing that assessment on each potential resident, or for developing a preliminary treatment plan for each child must be a professional mental health clinician.

(f) The facility shall hire or contract with sufficient appropriately qualified professional staff available on a full-time, part-time, or continuing consultative basis to assess and address the mental health, medical, social, family, and educational needs of children in treatment.

⊕ **History:** Eff. 6/21/2001, Register 158

⊕ **Authority:** [AS 44.29.020](#) [AS 47.14.100](#) [AS 47.14.120](#) [AS 47.35.010](#)

⊕ **7 AAC 50.815. Qualifications of caregiver staff**

⊕ A caregiver employee in a residential psychiatric treatment center must have completed

(1) a bachelor's level college degree program;

(2) at least two years of work experience in residential treatment for children, inpatient long-term treatment for children, or other treatment of severely emotionally disturbed children and

(A) an associate level college degree; or

(B) at least two years of college credit toward a bachelor's degree; or

(3) at least four years of increasingly responsible caregiver experience in residential treatment for children, inpatient long-term treatment of children, or treatment of severely emotionally disturbed children and a

(A) high school diploma;

(B) general educational development diploma; or

(C) certification that the individual completed department-provided training in residential child care.

✚ **History: Eff. 6/21/2001, Register 158**

✚ **Authority:** [AS 44.29.020](#) [AS 47.14.100](#) [AS 47.14.120](#) [AS 47.35.010](#)

✚ **7 AAC 50.820. Orientation and training**

✚ (a) A residential psychiatric treatment center shall have a comprehensive written training plan, and shall submit it to the division, for the orientation, ongoing training, and development of staff members.

(b) The orientation portion of the training plan required by (a) of this section must provide that

(1) a new caregiver employee or volunteer who has less than six months of previous full-time experience working with emotionally disturbed persons in a residential setting is to receive at least 40 hours of orientation and training, as described in (4) of this subsection, and at least 40 hours of child care experience in the facility, working under supervision, before being assigned to independently carry out a particular caregiving job;

(2) a new caregiver employee or volunteer who has at least six months of previous full-time experience working with emotionally disturbed persons in a residential setting is to receive at least 20 hours of orientation and training, as described in (4) of this subsection, and at least 20 hours of child care experience in the facility, working under supervision, before being assigned to independently carry out a particular caregiving job;

(3) a new administrative, clerical, housekeeping, janitorial, or other support employee, if the employee's job involves even minimal contact with children in care, is to receive orientation and training as described in (4) of this subsection; for each job class, the residential psychiatric treatment center shall determine the hours of training and topics appropriate to the duties of persons in that job class, including interaction or contact by those persons with children in care;

(4) orientation and initial training of persons as required in (1), (2), and (3) of this subsection is to include, at a minimum, orientation to

(A) the purpose, goals, policies and procedures of the treatment center;

(B) working conditions and regulations;

(C) responsibilities and rights of employees or volunteers;

(D) the facility's policy and procedures for resident and family grievances;

(E) psychiatric treatment for children with severe mental, emotional or behavioral disorders;

(F) the security plan of the facility as described in 7 AAC [50.805](#); and

(G) the theory and practical application of techniques for de-escalating violent, destructive, angry, or runaway behavior by out-of-control residents while protecting the safety of the employee or volunteer and of other residents; and

(5) the facility may acknowledge and give credit for prior training that the employee or volunteer received, and that is the equivalent of parts of the orientation and training required by the facility's training plan, if the prior training occurred no more than two years before the individual became an employee or volunteer.

(c) The portion of the training plan required by (a) of this section for ongoing staff training and development must provide each caregiver employee or supervisor of caregivers, after that individual's first year of employment at the facility, is to receive at least 40 hours of training each subsequent year of employment; that training must address, at a minimum, the following areas:

(1) security procedures;

(2) supervision and treatment of child residents;

(3) regulations and procedures for use of restraints, isolation, or physical force as applied to a resident;

(4) resident rights and responsibilities;

(5) fire and emergency procedures;

(6) interpersonal relations and communication skills;

(7) the theory of treatment of mental, emotional, or behavioral disorders of the types with which residents of the facility are diagnosed;

(8) social and cultural lifestyles of children in the various communities or groups from which the residents of the facility came;

(9) child growth and development;

(10) the theory and treatment of fetal alcohol syndrome and fetal alcohol effect;

(11) the theory and practical application of techniques for de-escalating violent, destructive, angry, or runaway behavior by out-of-control residents while protecting the safety of the employee and the safety of other residents or employees;

(12) first aid and cardiopulmonary resuscitation (CPR).

(d) The training plan required by (a) of this section must provide that each part-time employee and regular volunteer working or volunteering less than 40 hours per week is to receive training appropriate to that individual's assignments, and that volunteers working the same schedule or number of hours as full-time paid employees are to receive the same training as full-time employees.

(e) The facility shall maintain written records documenting training sessions held or external training sessions attended, the participation of individual employees or volunteers, the hours involved, and other in-service training or external training activities in which each employee or volunteer was involved.

(f) A training program must be presented by persons who are qualified in the areas in which they are conducting training.

(g) A residential psychiatric treatment center shall designate one administrative, managerial, or supervisory staff person to be the training director responsible to plan and implement employee and volunteer training programs.

✚ **History:** Eff. 6/21/2001, Register 158

✚ **Authority:** [AS 44.29.020](#) [AS 47.14.100](#) [AS 47.14.120](#) [AS 47.35.010](#)

✚ **7 AAC 50.825. Admission**

✚ (a) In addition to complying with the requirements set out in 7 AAC [50.320](#) regarding admission to residential child care facilities, a residential psychiatric treatment center shall comply with this section.

(b) A residential psychiatric treatment center shall perform a psychiatric and functional assessment of each potential resident, including an evaluation described in 7 AAC [43.870\(b\)](#) , and shall

(1) evaluate a recent assessment of the potential resident performed by another professional mental health clinician; or

(2) review the complete treatment history of the potential resident.

(c) A residential psychiatric treatment center may not admit a child for treatment as a resident if the child is less than six years of age.

(d) To admit a child for treatment as a resident, a residential psychiatric treatment center must document that

(1) other care or treatment resources available in the community or region do not meet the treatment needs of the child because the other care or treatment resources are

(A) more restrictive or less restrictive than necessary to appropriately treat the child; or

(B) provided in a setting less restrictive than the facility, but the child's treatment history shows that when therapeutic services in less restrictive settings have been provided to the child the services have been ineffective;

(2) proper treatment of the child's psychiatric condition requires treatment and services on an inpatient residential basis under the direction of a physician because the child

(A) has a psychiatric condition or disorder that is

(i) classified as a DSM-IV Axis I diagnosis as set out in the American Psychiatric Association's *Diagnostic and Statistical Manual of Mental Disorders*, Fourth Edition, dated 1994; the provisions of that Axis are adopted by reference, as amended from time to time; or

(ii) indicated by a rating on the DSM-IV Axis V of GAF equal to 50 or less, or has an Axis V GAF rating of more than 50 but exhibits specific mental, behavioral, or emotional disorders that place the child at imminent risk for out-of-home supervision or protective custody by state or local authorities;

(B) requires the intensity of services available at a residential psychiatric treatment center, as documented by the clinical director of the facility, specifically including the following needs:

- (i) a need for treatment services to be supervised by a psychiatrist;
  - (ii) a need for mental health professionals to be available to intervene with the child 24 hours a day;
  - (iii) a need for the child to concurrently receive multiple therapies;
- (C) does not demonstrate mental, emotional, or behavioral dysfunction that requires acute psychiatric hospitalization, such as a serious gesture or an actual attempt at suicide; and
- (D) does not demonstrate actual behavior of assaults or escalation towards assault that cannot be managed at the level of care available in the facility; and
- (3) the services provided by the facility can reasonably be expected to improve the child's condition or to prevent further regression so that services of a residential psychiatric treatment center will no longer be needed.

✚ **History: Eff. 6/21/2001, Register 158**

✚ **Authority:** [AS 44.29.020](#) [AS 47.05.012](#) [AS 47.10.080](#) [AS 47.10.087](#) [AS 47.12.120](#) [AS 47.35.010](#)

**Editor's note:** The American Psychiatric Association's *Diagnostic and Statistical Manual of Mental Disorders*, Fourth Edition, dated 1994 and adopted by reference in 7 AAC [50.825](#), may be obtained by writing to the American Psychiatric Association, 1400 K Street N.W., Washington, D.C. 20005. This manual is also available for viewing at the Department of Health and Social Services, Division of Family and Youth Services, 130 Seward Street, Suite 406, Juneau, Alaska.

✚ **7 AAC 50.830. Admission to secure care**

✚ (a) A facility that is licensed as both a semi-secure and secure residential psychiatric treatment center under 7 AAC [50.805](#) may place a child in the secure unit or secure program of the facility if the facility complies with (b) of this section and

(1) after the entry of a court order under [AS 47.10.087](#) or [AS 47.12.255](#), the department applies to the facility for the child's admission to the secure unit or program for a specified period of time up to 90 days;

(2) the court has ordered that a child be placed in a secure residential psychiatric treatment center for a specified period of time, up to 90 days,

(A) by the person taking custody of the child, if the court releases the child from the department's custody under [AS 47.10.080](#) (c)(2); or

(B) as a condition of probation, if the court releases the child from the department's custody under [AS 47.12.120](#) (b)(2); or

(3) the child's parent, Indian custodian, or guardian has requested voluntary admission of the child to the secure unit or program of the facility for a specified period of time up to 60 days, and the facility documents that

(A) the facility has performed the pre-admission assessment and evaluation required by 7 AAC [50.825\(b\)](#) ;

(B) the child and the child's situation meets the requirements of 7 AAC [50.825\(d\)](#) (1); and

(C) in the written opinion of the medical director and the clinical director of the facility, and any mental health professional most recently involved in treatment or evaluation of the child within a period of time no more than three months before the child's application for admission to residential psychiatric treatment

(i) the child is gravely disabled or is suffering from mental illness and, as a result, is likely to cause serious harm to the child or to another person;

(ii) there is no reasonably available, appropriate, and less restrictive alternative for the child's treatment or that less restrictive alternatives have been tried and have failed; and

(iii) there is reason to believe that the child's mental condition could be improved by the course of treatment or would deteriorate if untreated.

(b) To place a child in its secure unit or program under (a) of this section, a residential psychiatric treatment center must find through the assessment required by 7 AAC [50.825\(b\)](#) and by evaluation of all other current professional assessments of and all treatment data available on the child, that a child for whom a court order of authorization or placement in secure care has been entered under (a)(1) or (a)(2) of this section, or a child for whom an application for voluntary admission to secure care has been made under (a)(3) of this section, can be appropriately treated in the facility's secure unit or program.

✚ **History:** Eff. 6/21/2001, Register 158

✚ **Authority:** [AS 44.29.020](#) [AS 47.10.080](#) [AS 47.10.087](#) [AS 47.12.120](#) [AS 47.35.010](#)

✚ **7 AAC 50.835. Release from secure care**

✚ (a) A residential psychiatric treatment center shall release a child from its secure unit or program as soon as the child

(1) shows significant improvement in the conditions caused by those diagnoses and behaviors that justified the child's original admission to secure care under 7 AAC [50.830](#); and

(2) can effectively continue treatment in a less restrictive setting.

(b) The residential psychiatric treatment center may partially release a child from some but not all of the conditions of secure care within the facility, or may, as appropriate, release the child from all conditions of secure care within the facility. The facility may continue to provide psychiatric treatment and other social, educational, and residential services to the child in the semi-secure unit or program of the facility as required under the child's treatment plan.

(c) At the end of the period of time specified for placing a child in a secure residential psychiatric treatment center, as set out in the most recent application made under 7 AAC [50.830\(1\)](#), the most recent court order described in 7 AAC [50.830\(2\)](#), or most recent application made under 7 AAC [50.830\(3\)](#), the facility shall release the child from secure care. The facility may, as appropriate, continue to provide psychiatric treatment and other social, educational, and residential services to the child in the semi-secure unit or program of the facility.

(d) The residential psychiatric treatment center may re-admit or continue to treat the child in its secure unit or program after the period of time specified in an application or court order described in (c) of this section, if the facility makes new findings relevant to the child as required in 7 AAC [50.830\(b\)](#) and the

(1) court issues an order under [AS 47.10.087](#) or [AS 47.12.255](#) authorizing an additional specified period of time that the child may remain in a secure residential psychiatric treatment center and the department has applied to the facility under 7 AAC [50.830\(1\)](#) ;

(2) court issues an order as described in 7 AAC [50.830\(2\)](#) directing the continued placement of the child in secure care for an additional specified period of time; or

(3) child's parent, Indian custodian, or guardian has requested a continuation of the voluntary admission of the child to the secure unit or program of the facility for an additional specified period of time up to another 60 days, and the facility meets the documentation requirements of 7 AAC [50.830\(3\)](#) as of the date of the beginning of the additional period of time for secure care of the child.

✚ **History:** Eff. 6/21/2001, Register 158

✚ **Authority:** [AS 44.29.020](#) [AS 47.10.080](#) [AS 47.10.087](#) [AS 47.12.120](#) [AS 47.35.010](#)

✚ **7 AAC 50.840. Assessment and treatment plan in residential psychiatric treatment centers**

✚ (a) Within 72 hours after a child's admission, a residential psychiatric treatment center shall develop an initial treatment plan for the child. The treatment plan must be completed within 15 days following the child's admission. The treatment plan must be tailored to the individual child, and must be based on

(1) the pre-admission history of the child;

(2) any recent pre-admission assessments of the child; and

(3) the most current evaluation and assessment of the child conducted by staff of the residential psychiatric treatment center.

(b) The treatment plan required by (a) of this section must include

(1) each item required of a treatment plan in 7 AAC [50.330\(b\)](#) (1) - (5) and 7 AAC [50.330\(b\)](#) (7);

(2) the estimated length of stay and detailed discharge plans for the child; and

(3) the evaluation required by 7 AAC [50.870\(b\)](#) .

(c) The residential psychiatric treatment center shall follow the requirements of 7 AAC [50.330\(d\)](#) for informing staff of the treatment plan required by (a) of this section.

(d) The residential psychiatric treatment center shall invite the child, the child's parents, the child's Indian custodian or guardian, if any, the child's placement worker, therapist, guardian ad litem, and school representative, and the child's attorney, if any, to participate as members of a treatment team and to assist in the development of the child's treatment plan and each subsequent revision. At the request of the child's parents, the child, or the residential psychiatric treatment center, additional persons may be invited to participate in some or all of the treatment team's meetings or actions.

(e) The treatment plan for a resident must be reviewed every 30 days by the clinical staff of the facility.

(f) The residential psychiatric treatment center shall follow the requirements of 7 AAC [50.330\(f\)](#) to document the reasons for retaining a child in treatment.

(g) A residential psychiatric treatment center shall give a copy of a child's treatment plan or summary, plan review and updated plan, or summary of the review and updated plan to the child, the child's parents, the child's Indian custodian or guardian, if any, the child's placement worker and guardian ad litem, and the child's attorney, if any.

✚ **History: Eff. 6/21/2001, Register 158**

✚ **Authority:** [AS 44.29.020](#) [AS 47.10.080](#) [AS 47.10.087](#) [AS 47.12.120](#) [AS 47.35.010](#)

✚ **7 AAC 50.845. Continued treatment**

✚ (a) A residential psychiatric treatment center shall conduct a complete progress evaluation

(1) at least every 30 days, for each child in treatment who is not in a secure unit or program; and

(2) at least every seven days, for each child who is in a secure unit or program.

(b) If a residential psychiatric treatment center recommends, based on its evaluation under (a) of this section, that the child continue in treatment at the facility, the facility shall document in the facility's medical records that the following conditions have been met:

(1) the child continues to show evidence of a severely debilitating and persistent mental disorder or serious emotional disturbance, and

(A) the child continues to meet admission criteria under 7 AAC [50.825](#) or 7 AAC [50.830](#); or

(B) despite a decrease in episodes of aggression, self-injury, disruptive behavior, or psychotic episodes, and despite improved decision-making and interpersonal relationship skills with peers and adults, the child cannot maintain that progress without constant cues and external control as provided in the facility;

(2) the child continues to need active, medically necessary, and psychiatrist-directed treatment of a multi-disciplinary nature, under the following criteria:

(A) from the time of admission or of the last evaluation of the child for continued stay, the child has received active, multidisciplinary, goal-oriented focal treatment, the child's treatment plan prepared under 7 AAC [50.840](#) clearly documents in measurable, behavioral terms what has been accomplished, and what remains to be accomplished for the child to be discharged, maintained, and treated safely in a less restrictive setting;

(B) interventions to address specific objectives related to the child's individual goals, whether behavioral, developmental, interpersonal, family, or psychiatric, are documented to have occurred in a timely fashion, the success or failure of the interventions is documented, and in the event of failure, documentation shows that the interventions were changed within an aggressive time frame and the child's treatment plan revised to achieve the desired outcome;

(C) if the child has not responded to interventions, the facility has sought expert consultation in a timely fashion in the needed specialty area, including, as necessary, psychology, psychiatry, substance abuse treatment, neurology, speech and language therapy, and occupational therapy, and the child's treatment plan has been revised to include the special services;

(D) the services of the residential psychiatric treatment center can reasonably be expected to improve the child's condition in the next 60 day period after the evaluation under (a) of this section, so that residential

psychiatric treatment facility services will no longer be needed or so that the facility's services will prevent further regression of the child's condition;

(E) the child's family, if in the best interests of the child, or guardian, the educational provider in the facility, and community support and treatment agencies have been and will continue to be actively involved in the treatment of the child in the facility and in planning for the child's care after discharge.

✚ **History:** Eff. 6/21/2001, Register 158

✚ **Authority:** [AS 44.29.020](#) [AS 47.35.010](#)

✚ **7 AAC 50.850. Discharge planning**

✚ Discharge planning by a residential psychiatric treatment center must include the following documentation:

(1) documentation of discharge planning immediately upon the child's admission;

(2) documentation of the child's progress toward discharge; that progress must be documented at least

(A) twice a month by the facility's clinical staff; and

(B) at least once a month by the treatment team assembled under 7 AAC [50.840](#);

(3) documentation that the child, the child's family, if in the best interests of the child, the child's guardian or guardian ad litem, the child's case worker from the department or a child placement agency, local school personnel, and community support or treatment agencies have been engaged in development and implementation of the child's discharge plan, including plans for care after discharge;

(4) within the child's discharge plan, purposefully planned, time-oriented interventions designed to meet the identified discharge criterion, as appropriate to the problems of the child and the major goals for the child's care and treatment in the facility, and documentation that any significant delay in meeting an identified discharge criterion or delay of the discharge date was justified on the basis of

(A) a significant change in the child's behavior; or

(B) the continued instability of the child's condition or behavior so that the discharge criterion or discharge date could not be attained or that the goals for the child after discharge cannot be maintained by the child in a less restrictive setting than a residential psychiatric treatment center;

(5) within the child's discharge plan and as appropriate, proactive transition phase steps to assist the child's adjustment to the planned setting for care after discharge, including therapeutic passes to the community, visits to the post-discharge setting, or short stays of up to two nights in the post-discharge setting;

(6) documentation that the members of the treatment team assembled under 7 AAC [50.840](#) reached substantial agreement on necessary components of the discharge plan and the plan for care after discharge, including identification of agencies or persons responsible for each plan component;

(7) documentation that the discharge plan was completed in a sufficient amount of time before the projected date of discharge to facilitate successful community placement of the child, including collaboration with the local school district where the child will be placed to support the development of an IEP on or before the date of discharge.

⊕ **History:** Eff. 6/21/2001, Register 158

⊕ **Authority:** [AS 44.29.020](#) [AS 47.35.010](#)

⊕ **7 AAC 50.855. Discharge**

⊕ (a) If, as a result of the progress evaluation required by 7 AAC [50.845\(a\)](#) if the residential psychiatric treatment center recommends that the child not remain in treatment in the facility, the facility shall document in its medical records that the

(1) child's condition can no longer be safely, appropriately, or effectively treated in the facility's treatment program, but that the child could be safely, appropriately, or effectively treated in the treatment program of another residential psychiatric treatment center;

(2) child's condition can no longer be safely, appropriately, or effectively treated in the facility's treatment program, and that persistent clinical indications exist that the child needs a more intensive psychiatric treatment of the level of a psychiatric hospital; however, the residential psychiatric treatment center may not make a finding under this paragraph merely because the child suffers a short-term or episodic worsening of the child's condition or behavior, unless the facility documents that it has repeatedly but unsuccessfully attempted intervention using all of its services and those of special consultants as appropriate to arrest or reverse the worsening of the child's condition or behavior;

(3) child's medical condition requires transfer to a medical setting; or

(4) child no longer requires the intensity of service and treatment of a residential psychiatric treatment center based on documentation

(A) of demonstrably sustainable gains in the areas described in 7 AAC [50.845\(b\)](#) (1)(B) that the child can sustain without requiring cueing or control by the program staff of a residential psychiatric treatment center;

(B) that the child can be safely and effectively treated in a less restrictive setting; and

(C) of a final plan as required under (b) of this section for transition, discharge, and care after discharge for the child.

(b) A final plan for transition, discharge, and care after discharge for the child must

(1) ensure that the residential psychiatric treatment center meets the needs of the child and the child's family through the arrangement of after-care services, and that the treatment team assembled under 7 AAC [50.840](#) and the facility's clinical staff will consult and be available for intervention for at least the longer of

(A) one month for every two months that the child received care in the facility; or

(B) three months;

(2) require that the residential psychiatric treatment center, during the time set out in (1) of this subsection, contact at least once a month the treatment team assembled under 7 AAC [50.840](#), so that the facility can ensure an appropriate transition of the child to community placement and treatment; and

(3) include the following documentation:

- (A) where and with whom the child will live;
  - (B) specified medical and mental health providers to provide ongoing care to the child;
  - (C) identification of a school for the child to attend, with an IEP in place for the child;
  - (D) specific supports and services from persons or programs including the case manager, the department or child placement agency, community residential or treatment facilities or programs, and the child's family; and
  - (E) the involvement, if applicable, of religious, cultural, recreational or other community agencies that will be providing support or services to the child, the child's family, or the provider of full time care to the child;
  - (F) documentation of the substantial agreement of the treatment team assembled under 7 AAC [50.840](#);
  - (G) the consent of the child's parent, Indian custodian, or guardian, and the consent of the child if the child is age sixteen or older and is capable of understanding the consequences, risks, and benefits of the decision.
- (c) In addition to the requirements of this section, a residential psychiatric treatment center
- (1) shall meet the requirements regarding discharge specified in 7 AAC [50.340](#); and
  - (2) may not follow the procedures for discharge in 7 AAC [50.425\(l\)](#) unless the signs of danger to self or others exhibited by the child are so severe that the resident cannot be managed in the facility and requires immediate hospitalization.

✚ **History:** Eff. 6/21/2001, Register 158

✚ **Authority:** [AS 44.29.020](#) [AS 47.35.010](#)

✚ **7 AAC 50.860. Independent review of extended periods of treatment or stays in secure care**

✚ (a) The residential psychiatric treatment center shall contract and pay for an independent review of the progress evaluation performed under 7 AAC [50.845\(a\)](#), the treatment plan developed under 7 AAC [50.840](#), the progress of the child in treatment at the facility up to the date of the evaluation, the child's educational progress, and any other factors relevant to the child's condition or situation and the possible need to stay in treatment at the facility if

(1) under 7 AAC [50.845\(b\)](#) and after the progress evaluation, the facility recommends to the court that a child admitted to a secure unit or program under 7 AAC [50.830\(1\)](#) or (2) remain a resident at the residential psychiatric treatment center for more than

(A) 180 consecutive days after initial admission to the facility, including therapeutic leave days under 7 AAC [50.850\(5\)](#); or

(B) 180 days in any 12-month period; or

(2) a child has been voluntarily admitted to the secure unit or program under 7 AAC [50.830\(3\)](#), and the facility recommends that the child continue treatment in the unit or program for an additional specified period of time which would bring the number of days that the child has been placed in the facility's secure care unit or program to a total of more than 90 days since the child's initial admission or a total of more

than 90 days in any 12-month period, including any days that the child was released from some or all of the conditions of secure care within the facility as described in 7 AAC [50.835\(a\)](#) .

(b) The independent review required in (a) of this section must be conducted by a professional review organization, or by a review team of a psychiatrist or doctor of psychology and an expert in residential treatment. A member of the review organization or review team may not have a contractual relationship with the residential psychiatric treatment center, and may not have an ownership interest in or organizational responsibility for the facility, including a membership on the facility's board of directors.

(c) The residential psychiatric treatment center may continue to treat the child until the review organization or team described in (b) of this section completes the independent review and treatment recommendations, and until the treatment team assembled under 7 AAC [50.840](#) reviews and discusses the independent review and recommendations. If the review and recommendations do not support the continued stay of the child in the secure unit or program the facility and the treatment team shall immediately revise the child's treatment or discharge plan to implement the recommendations as soon as the revised plan can be efficiently and appropriately put into effect.

(d) The residential psychiatric treatment center shall contract and pay for a new independent review that meets the requirements of this section each time that the child's stay in the secure unit or program exceeds

(1) 180 consecutive days after, or 180 days in any 12-month period after the date of the most recent independent review, if the initial independent review was required under (a)(1) of this section; or

(2) 90 consecutive days after, or 90 days in any 12-month period after the date of the most recent independent review, if the initial independent review was required under (a)(2) of this section.

(e) If the department is the payor for part or all of the resident's treatment in the facility, if the department authorizes and pays for a periodic review of the progress of an individual resident by the department or by a professional review organization, and if that review includes review of the progress evaluation performed under 7 AAC [50.845\(a\)](#) , the treatment plan developed under 7 AAC [50.840](#), the progress of the child in treatment at the facility up to the date of the evaluation, and any other factors relevant to the child's condition or situation and the possible need to stay in treatment at the facility, the division will accept the review conducted under this subsection in place of an independent review required in (a) of this section.

✚ **History:** Eff. 6/21/2001, Register 158

✚ **Authority:** [AS 44.29.020](#) [AS 47.35.010](#)

✚ **7 AAC 50.865. Child-to-caregiver ratios in residential psychiatric treatment center facilities**

✚ (a) At least one caregiver shall be on duty in a residential psychiatric treatment center whenever at least one child in treatment is present. At least two caregivers, at least one of whom is awake during the resident sleeping hours, shall be on duty in a residential psychiatric treatment center whenever two or more or more children who are under 10 years of age are present.

(b) Except as provided in (a) of this section, the caregiver-to-child ratio in a residential psychiatric treatment center must be as follows:

(1) in a facility or separate unit of the facility with fewer than 10 residents, one caregiver for every three children during any time children are awake and engaged in activity that is outside their sleeping quarters or outside sleeping hours;

(2) in a facility or separate unit of the facility with 10 or more residents, one caregiver for every five children during any time children are awake and engaged in activity that is outside their sleeping quarters or outside sleeping hours;

(3) one awake caregiver during sleeping hours for every six children who are less than 10 years of age, or one awake caregiver for every 10 children who are 10 years of age or greater, if

(A) the facility has in place procedures for the caregiver to be able to call in another awake staff member as needed; and

(B) the caregiver has access to an on-call mental health professional for consultation.

(c) For purposes of this section, the administrator, medical director, or clinical director may each be counted as a caregiver, if the

(1) facility serves nine or fewer children; and

(2) administrator, medical director, or clinical director is

(A) physically present in or adjacent to the treatment or activity unit or other space where the children are currently located, or is present in an area adjoining the location of the children; and

(B) known by the children and other caregivers to be readily accessible and available to meet their needs.

(d) The residential psychiatric treatment center shall have procedures in place to add more caregiver staff on any shift if internal or external circumstances justify the use of additional staff to keep the residents or employees safe, or to meet the treatment needs of one or more residents.

✚ **History: Eff. 6/21/2001, Register 158**

✚ **Authority:** [AS 44.29.020](#) [AS 47.14.100](#) [AS 47.14.120](#) [AS 47.35.010](#)

✚ **7 AAC 50.870. Behavior management**

✚ (a) A residential psychiatric treatment center shall comply with the behavior guidance requirements of 7 AAC [50.435](#).

(b) As a part of the resident's assessment under 7 AAC [50.825\(b\)](#) and development of the resident's treatment plan under 7 AAC [50.840](#), the residential psychiatric treatment center shall evaluate the history and experiences of the resident that may affect how the resident would respond to isolation or restraint, including any history of abuse, neglect, or other trauma, and shall develop a treatment plan for the resident that takes into account the factors described in this subsection and that seeks to avoid repeating or recalling the trauma or emotional harm to the resident if any use of restraint or isolation is anticipated to be used to manage the resident's behavior or if restraint or isolation are ever used in an emergency situation with the resident. The resident's caregivers shall be informed of the types or manner of restraint or isolation which should not be used with the particular resident.

(c) A residential psychiatric treatment center may not use restraint or isolation upon a resident for the convenience of the staff, or to compel the resident's cooperation with the resident's treatment plan;

(d) If a residential psychiatric treatment center uses restraint or isolation upon a resident, the facility shall direct its clinical staff to discuss the incident that led to the use of restraint or isolation with the resident, the

resident's parents, the facility staff, involved in or affected by the incident, and any residents involved in or affected by the incident, to assist the resident and staff to understand why the incident occurred and what actions or responses could have prevented it. The discussion must occur within 24 hours after the incident.

(e) In the behavior-management log required by 7 AAC [50.435\(j\)](#) (2)(F), and after the incident of restraint or isolation has ended, the residential psychiatric treatment center shall document

(1) the specific and less restrictive alternatives used by staff before the incident to attempt to prevent the need for restraint or isolation of the resident; and

(2) whether the type of behavior by the resident or the use of restraint or isolation as a response to the resident's behavior were anticipated in the resident's treatment plan;

(f) If either the type of behavior by the resident which led to the incident or the necessity to use restraint or isolation as a response were not previously anticipated, and were not specified in the resident's treatment plan, the residential psychiatric treatment center shall direct the facility's clinical staff to make and document a determination of whether the clinical staff should redesign the resident's treatment plan to better prevent similar behavior and to provide for specific and less restrictive alternatives to be used by staff in the future, and shall review the incident and any amendments to the treatment plan with the child's treatment team at the team's next scheduled meeting or sooner if the severity or repetition of the restraint episodes with the child warrant earlier review.

(g) The residential psychiatric treatment center shall

(1) document the information gathered and the amendments to treatment plans made under (d) and (f) of this section in the resident's file and in a file that aggregates all incidents of restraint or isolation for all residents; and

(2) make the records described in (1) of this subsection available to the division for review of the use of isolation or restraint by the facility as the division determines necessary to identify and prevent abuse or inappropriate or unnecessary use of isolation or restraint with residents.

✚ **History:** Eff. 6/21/2001, Register 158

✚ **Authority:** [AS 44.29.020](#) [AS 47.14.100](#) [AS 47.14.120](#) [AS 47.35.010](#)

**7 AAC 50.875. Medications.** A residential psychiatric treatment center subject to this chapter must also comply with the applicable provisions of 7 AAC 10.1070 regarding medications. (Eff. 6/21/2001, Register 158; am 6/23/2006, Register 178)

**Authority:** AS 44.29.020 AS 47.14.120 AS 47.32.030

✚ **7 AAC 50.880. Resident grievances**

✚ A residential psychiatric treatment center shall establish a grievance procedure by which a resident, or a parent, Indian custodian, or guardian may seek redress of a grievance by a resident or on behalf of a resident. The residential psychiatric treatment center shall give a copy of the grievance procedure to the division, shall deliver a copy to each resident and to each resident's parent, Indian custodian, or guardian, and shall post a summary of the grievance procedure in at least two places in the facility where the residents are likely to see it.

✚ **History:** Eff. 6/21/2001, Register 158

⊕ **Authority:** [AS 44.29.020](#) [AS 47.14.100](#) [AS 47.14.120](#) [AS 47.35.010](#)

⊕ **7 AAC 50.885. Educational services for residents**

⊕ A residential psychiatric treatment center shall provide, within the facility, a school program for residents that provides the type and quality of education that is offered in the community. The residential psychiatric treatment center shall develop procedures to ensure that each resident has educational guidance by qualified personnel. As part of the resident's transition toward discharge from the facility, the residential psychiatric treatment center may arrange for the resident to attend school outside the facility.

⊕ **History:** Eff. 6/21/2001, Register 158

⊕ **Authority:** [AS 44.29.020](#) [AS 47.14.100](#) [AS 47.14.120](#) [AS 47.35.010](#)

---

⊕ **Article 10**  
**Miscellaneous Provisions**

**7 AAC 50.900. Compliance and enforcement.** The department will conduct inspections and investigations of a facility subject to this chapter to determine compliance with AS 47.32, 7 AAC 10.1000 – 7 AAC 10.1095, and this chapter as provided in AS 47.32 and 7 AAC 10.9600 – 7 AAC 10.9620, and will take enforcement action as appropriate under AS 47.32. (Eff. 6/23/2006, Register 178)

<b>Authority:</b>	AS 44.29.020	AS 47.32.030	AS 47.32.110
	AS 47.32.010	AS 47.32.090	AS 47.32.130
	AS 47.32.020	AS 47.32.100	AS 47.32.140Section

[990. Definitions.](#) (#6 and #45 amended)

⊕ **7 AAC 50.990. Definitions**

⊕ In [AS 47.35](#) and in this chapter, unless the context requires otherwise,

- (1) "administrator" has the meaning given in [AS 47.35.900](#) ;
- (2) "agency" and "child placement agency" have the meaning given in [AS 47.35.900](#) and include the state with regard to the placement of children;
- (3) "boarding care" means care provided in a foster home or a residential child care facility exclusively for children who are residing outside of their home community for the purpose of obtaining education;
- (4) "caregiver" includes an administrator, foster parent, employee, contractor, substitute, volunteer, student intern, or other individual in a facility whose duties include care and supervision of children;
- (5) "center" includes a residential center;

(6) "child" means an individual who is

(A) under 18 years of age; for purposes of this subparagraph, "child" includes an individual who is a relative of a

(i) care provider;

(ii) administrator; or

(iii) foster parent; or

(B) 18 through 20 years of age and is

(i) in the custody of the state; or

(ii) a runaway child served by an agency;

(7) "child care" or "care" has the meaning given "child care" in [AS 47.35.900](#) and includes services in or away from the facility;

(8) deleted 7/1/2000;

(9) deleted 7/1/2000;

(10) deleted 7/1/2000;

(11) deleted 7/1/2000;

(12) deleted 7/1/2000;

(13) "child in care" means a child who is not a relative of the caregiver, unless in a relative foster home;

(14) "child with special needs" means a child under the age of 18 who

(A) is a

(i) "hard to place child" under [AS 25.23.240](#) ; or

(ii) "person with a handicap" under [AS 47.80.900](#) ; but

(B) is not a "gifted child" under [AS 14.30.350](#) ;

(15) "corporal punishment" means the infliction of bodily pain as a penalty for a disapproved behavior; it includes shaking, spanking, delivering a blow with a part of the body or an object, slapping, punching, pulling, or any other action that seeks to induce pain;

(16) "department" means the Department of Health and Social Services;

(17) "division" means the division of family and youth services in the department;

- (18) "emergency shelter care" means care in a full time care facility that is short-term in nature, usually not exceeding 90 days; the term includes respite care;
- (19) "facility" has the meaning given in [AS 47.35.900](#) and includes other parts of the building housing the facility and adjoining grounds over which the operator of the facility has direct control;
- (20) "foster group home" means a foster home in which one or more foster parents operate not more than one group home for no more than eight children;
- (21) "foster home" has the meaning given in [AS 47.35.900](#) , usually for no more than six children, that is the home of a foster parent;
- (22) "foster parent" means the person or persons providing foster care for children and includes a shelter home parent;
- (23) "full time care facility" means a foster home or a residential child care facility;
- (24) "group home" means a foster group home and a residential group home;
- (25) "home" means a foster home;
- (26) "human services field" means social services, juvenile corrections, education, mental health, developmental disabilities, health care, pastoral counseling and related subjects;
- (27) "IEP" means an individualized education program for a child with special needs age three through 18 developed by a school district in accordance with 4 AAC [52.140](#) or by a department infant learning program grantee or the child's private physician under criteria contained in 7 AAC [23.090\(d\)](#) (3), for a child age birth up to three years;
- (28) "IHP" means an individualized habilitation plan for a child with special needs developed by a state agency, contractor, or grantee in accordance with [AS 47.80.120](#) ;
- (29) "infant" means a child age birth up to 12 months of age;
- (30) "kindergarten aged child" means a child age five;
- (31) "license" means a permit issued under [AS 47.10.392](#) or a license issued under AS 47.35;
- (32) "licensee" has the meaning given in [AS 47.35.900](#) and includes a person to whom a permit has been issued under [AS 47.10.392](#) ;
- (33) "licensing representative" means an employee of the division or an individual or organization responsible for evaluating a facility under [AS 47.35.010](#) (a)(4) and 7 AAC [50.040](#) and presumes review and approval of the representative's decisions by the division or organization authorized under 7 AAC [50.040](#);
- (34) "mental health professional" has the meaning given in [AS 47.30.915](#) ;
- (35) deleted 7/1/2000;
- (36) "operator" means the person licensed to operate a facility;
- (37) "parent" has the meaning given in [AS 47.35.900](#) ;

- (38) "physician" has the meaning given in 12 AAC [40.990](#);
- (39) "placement worker" means an employee or volunteer of a child placement agency who arranges for placement of a child in a residential child care facility or a child foster home; "placement worker" includes an employee of the department with regard to the placement of children;
- (40) deleted 7/1/2000;
- (41) "regular volunteer" means a person who volunteers for at least one day a week for at least five consecutive weeks;
- (42) "relative" has the meaning given in [AS 47.35.900](#) ;
- (43) "residential center" means a residential child care facility for 13 or more children;
- (44) "residential child care facility" has the meaning given in [AS 47.35.900](#) ;
- (45) "residential group home" means a residential child care facility for no more than 12 children;
- (46) "runaway child" has the meaning given in [AS 47.10.390](#) for "runaway minor;"
- (47) "school aged child" means a child age six through age 18;
- (48) "shelter home" means a foster home exclusively for runaway youth;
- (49) "sleeping hours" means the hours from midnight to six a.m.;
- (50) "supervised transition living" or "supervised apartment living" means a short term program for adolescents between the ages of 16 and 18 to enable those for whom independent living is the plan to prepare to lead self-sufficient adult lives;
- (51) "supervision of children" means protective oversight of children including
- (A) a prudent level of awareness of and responsibility for a child's ongoing activity;
  - (B) knowledge of program, the applicable requirements of this chapter, and children's needs; and
  - (C) the degree of supervision indicated by a child's age, developmental level, and physical, emotional, and social needs;
- (52) "toddler" means a child age 12 months up to age 30 months;
- (53) "treatment" means a series of planned interventions designed to address a child's physical, mental, emotional, behavioral, and developmental disorders and bring about positive measurable changes needed to facilitate the child's successful functioning and return to its family or community;
- (54) "waking hours" means the hours from six a.m. to midnight;
- (55) "young child" means a child age birth up to age nine.
- (56) "adolescent" means a child in the period of life from puberty to maturity terminating legally at age 18;

- (57) "maternity home" has the meaning given in [AS 47.35.900](#) ;
- (58) "504 plan" means an individualized plan as set out in 34 C.F.R. § 104.33;
- (59) "semi-secure residential child care facility" has the meaning given in [AS 47.35.900](#) ; "semi-secure residential child care facility" does not include a facility licensed under 7 AAC [50.805](#) as a semi-secure residential psychiatric treatment center;
- (60) "contractor" means a contractor who performs services for a facility and has routine contact with children in the facility;
- (61) "EPSDT" means the early periodic screening, diagnosis, and treatment provided under 7 AAC [43.452](#);
- (62) "medically-fragile child" means a child who lacks physical or emotional strength and requires frequent medical attention from personnel outside of the facility;
- (63) "chemical restraint" means a drug that is administered to manage a resident's behavior in a way that reduces the safety risk to the resident or others, that has the temporary effect of restricting the resident's freedom of movement, and that is not a standard treatment for the resident's medical or psychiatric condition;
- (64) "freestanding" means individually licensed as a residential psychiatric treatment center under this chapter, and independent from administrative or financial control of another facility;
- (65) "functional assessment" means a systematic evaluation of a potential resident to assess that individual's functioning level in the areas of living skills, learning, education, work, interpersonal skills, and other life skills necessary for independent living, in order to develop a treatment plan under 7 AAC [50.840](#);
- (66) "GAF" means the Global Assessment of Functioning assessment instrument published in the American Psychiatric Association's *Diagnostic and Statistical Manual of Mental Disorders*, Fourth Edition, dated 1994; that assessment instrument is adopted by reference, as amended from time to time;
- (67) "Indian custodian" has the meaning given in 25 U.S.C. 1903(6) (Indian Child Welfare Act);
- (68) "isolation" means the involuntary confinement or seclusion of a resident alone in a locked behavior-management room;
- (69) "locked behavior-management room" means a room or area in which a child is isolated by locking the door to the room, or by stationing staff in or outside the room or area for the purpose of preventing the child from leaving the room;
- (70) "mechanical restraint" means a device attached or adjacent to the resident's body that the resident cannot easily remove and that restricts freedom of movement or normal access by the resident to the resident's body;
- (71) "personal restraint" means the application of physical force without the use of any device, for the purpose of restricting the free movement of a resident's body;
- (72) "professional mental health clinician" has the meaning given in [AS 47.30.980](#) ;

(73) "professional review organization" means an independent team of medical professionals, including at least one physician, who have competence in the treatment and diagnosis of mental illness, and who operate under an agreement with the state to provide independent reviews;

(74) "residential psychiatric treatment center" means a facility that

(A) provides residential child care and inpatient psychiatric services, in a semi-secure or secure setting of a residential nature, for the diagnosis and treatment of children six years of age or older for mental, emotional, or behavioral disorders; and

(B) is not a hospital, nursing facility, or facility for the mentally retarded that is required to be licensed under AS 18.20; however, for purposes of this subparagraph, "residential psychiatric treatment center" includes a facility owned or operated by a hospital, nursing facility, or facility for the mentally retarded, if the owned or operated facility is freestanding;

(75) "restraint" means a personal restraint, mechanical restraint, or chemical restraint.

(Eff. 1/1/96, Register 136; am 3/1/98, Register 145; am 1/1/2001, Register 156; am 6/21/2001, Register 158; am 6/23/2006, Register 178)

<b>Authority:</b>	AS 44.29.020	AS 47.10.392	AS 47.05.012
	AS 47.32.010	AS 47.10.300	AS 47.32.030

**Editor's note:** The American Psychiatric Association's *Diagnostic and Statistical Manual of Mental Disorders*, Fourth Edition, dated 1994 and adopted by reference in 7 AAC [50.990](#), may be obtained by writing to the American Psychiatric Association, 1400 K Street N.W., Washington, D.C. 20005. This manual is also available for viewing at the Department of Health and Social Services, Division of Family and Youth Services, 130 Seward Street, Suite 406, Juneau, Alaska.

Chapter 10. Licensing, Certification, and Approvals.

Article

1. Purpose, Applicability, and Administrative Provisions (7 AAC 10.010 – 7 AAC 10.015)
2. Reserved
3. Reserved
4. Environmental Health and Safety (7 AAC 10.1000 – 7 AAC 10.1095)
5. General Variance Procedures (7 AAC 10.9500 – 7 AAC 10.9535)
6. Inspections and Investigations (7 AAC 10.9600 – 7 AAC 10.9620)
7. General Provisions (7 AAC 10.9990)

Article 1. Purpose, Applicability, and Administrative Provisions.

Section

10. Purpose of chapter
15. Applicability of chapter

7 AAC 10.010. Purpose of chapter. The purpose of this chapter is to establish certain licensing and other requirements for entities listed in 7 AAC 10.015, and to establish standards for the protection of public health, safety, and welfare. (Eff. 6/23/2006, Register 178)

Authority:	AS 18.05.010	AS 47.14.120	AS 47.32.030
	AS 18.05.040	AS 47.32.010	AS 47.33.005
	AS 44.29.020	AS 47.32.020	AS 47.33.010

7 AAC 10.015. Applicability of chapter. The requirements of this chapter apply to the following entities, and are in addition to the requirements of 7 AAC 50, 7 AAC 57, and 7 AAC 75, as applicable:

- (1) a residential child care facility, including a residential group home and a residential child care center;
- (2) a foster home or a foster group home;
- (3) a residential psychiatric treatment center;
- (4) a maternity home;
- (5) a child care facility required to be licensed under AS 47.32 and 7 AAC 57;
- (6) an assisted living home. (Eff. 6/23/2006, Register 178)

Authority:	AS 18.05.010	AS 47.14.120	AS 47.32.030
	AS 18.05.040	AS 47.32.010	AS 47.33.005
	AS 44.29.020	AS 47.32.020	AS 47.33.010

Article 2. Reserved.

Article 3. Reserved.

Article 4. Environmental Health and Safety.

Section

1000. Purpose and applicability
1002. Caregivers
1005. Pre-licensing inspection
1010. Life and fire safety
1015. Heating and heating devices

- 1020. Water supply
- 1022. Wastewater disposal
- 1025. Solid waste disposal
- 1030. Toilet facilities, handsinks, showers, and bathing facilities
- 1035. Premises
- 1040. General cleaning and sanitation standards
- 1045. Universal precautions
- 1050. Caregiver hygiene
- 1055. Incontinence care
- 1060. Additional standards for facilities licensed to provide care for children
- 1065. Food service and preparation
- 1070. Medications
- 1075. First aid kit and procedures
- 1080. Firearms and ammunition
- 1085. Smoking
- 1090. Animals
- 1093. Pesticide use and notification
- 1095. Toxic substances; poisonous plants

7 AAC 10.1000. Purpose and applicability. (a) The purpose of 7 AAC 10.1000 – 7 AAC 10.1095 is to protect public health, safety, and welfare by establishing environmental health and safety standards for entities listed in (b) of this section that are in addition to the requirements of 7 AAC 50, 7 AAC 57, and 7 AAC 75, as applicable.

(b) Subject to (c) of this section, to be licensed by the department, the following entities are subject to the applicable requirements of 7 AAC 10.1000 – 7 AAC 10.1095:

- (1) a residential child care facility, including a residential group home and a residential child care center;
- (2) a foster home or a foster group home;
- (3) a residential psychiatric treatment center;
- (4) a maternity home;
- (5) a child care facility required to be licensed under AS 47.32 and 7 AAC 57;
- (6) an assisted living home.

(c) If an entity is licensed for more than one category of care listed in (b) of this section, the entity is subject to the most stringent requirements applicable to those categories of care, even if an exemption might apply if licensed separately. (Eff. 6/23/2006, Register 178)

Authority:	AS 18.05.010	AS 47.14.120	AS 47.32.030
	AS 18.05.040	AS 47.32.010	AS 47.33.005
	AS 44.29.020	AS 47.32.020	AS 47.33.010

7 AAC 10.1002. Caregivers. For purposes of 7 AAC 10.1000 – 7 AAC 10.1095, a caregiver is an individual in an entity whose duties include care, contact, and supervision of adults or children in care. A caregiver does not include

- (1) a parent or other relative of an adult or child in care, unless the parent or other relative is a caregiver or a member of the licensee's household;

(2) a parent's designee to drop off and pick up a child in care, unless the designee performs the duties of a caregiver;

(3) an official or individual providing support services to the entity or to an adult or child in care for fewer than five hours a week, such as an infant learning teacher, an attendant for a child identified as having special needs under 7 AAC 57.940, a licenser, a fire marshal, or a food service sponsor;

(4) an employee of a delivery service who makes deliveries to the entity;

(5) installation, maintenance, and repair service personnel who are present in the entity for less than two weeks;

(6) an individual with an ownership or management interest in the entity who makes only occasional visits;

(7) an occasional guest in the entity;

(8) an individual residing in any part of the premises that house an entity, if the individual remains or intends to remain in the residence for less than 45 days, in total, in any 12-month period, and does not perform the duties of a caregiver; or

(9) an individual coming into incidental contact with adults or children in care during an outing away from the entity. (Eff. 6/23/2006, Register 178)

Authority:	AS 18.05.040	AS 47.32.010	AS 47.32.030
	AS 47.14.120		

7 AAC 10.1005. Pre-licensing inspection. Subject to AS 47.32.050, before deciding whether to issue a license to an entity listed in 7 AAC 10.1000(b), the department may inspect the entity to determine whether the entity is maintained in a manner protective of life, health, safety, and welfare with respect to

(1) bedrooms for an entity licensed to provide 24-hour or overnight care;

(2) exits to the outside of the building;

(3) smoke detectors, carbon monoxide detectors, and fire extinguishers;

(4) storage and disposition of combustible waste material;

(5) portable heating mechanisms, if any; and

(6) other applicable requirements of this chapter or another applicable statute or regulation. (Eff. 6/23/2006, Register 178)

Authority:	AS 18.05.010	AS 47.32.010	AS 47.32.060
	AS 18.05.040	AS 47.32.020	AS 47.33.005
	AS 44.29.020	AS 47.32.030	AS 47.33.010
	AS 47.14.120	AS 47.32.050	

7 AAC 10.1010. Life and fire safety. (a) An entity listed in 7 AAC 10.1000(b) must comply with the applicable life and fire safety requirements of this section and any additional or more stringent applicable standards established by a municipality to which the state fire marshal has deferred building fire safety inspection and enforcement activities under 13 AAC 50.075(c).

(b) An entity must meet the requirements of (c) of this section if the entity provides

(1) 24-hour or nighttime care for six or more adults or children; in this paragraph, "nighttime care" means care between the hours of 10:00 p.m. and 6:00 a.m.; or

(2) less than 24-hour care for six or more children, including the caregiver's children who are under age 12 or of limited mobility.

(c) An entity described in (b) of this section must

(1) meet the standards for life and safety specified in 13 AAC 50 and 13 AAC 55; the entity shall keep any information required by those standards available for department inspection;

(2) obtain any applicable state or municipal building code approval; that approval must also be obtained before making a modification to a licensed entity if the modification is one that requires that approval; for purposes of this paragraph, a state building code approval is an approval required under 13 AAC 50.027 and 13 AAC 55; and

(3) obtain a fire safety inspection report from each state or municipal authority responsible for those inspections, and continue to obtain those reports every two years, or more often if required by the authority; the entity is responsible for any fee charged by the authority for each inspection.

(d) At the time of licensing, the department will inspect an entity licensed to provide care for five or fewer adults or children to determine if the entity meets the applicable requirements of this section. Based on the inspection, or if the department determines that it is necessary for purposes of public health, safety, or welfare, the department will request an advisory inspection report from one or more state or municipal building or fire safety authorities. The entity is responsible for any fee charged by the authority for each inspection.

(e) An entity must have a disaster preparedness and emergency evacuation plan that

(1) includes evacuation procedures that will ensure the complete evacuation of

(A) children in care, including children with limited mobility, within 150 seconds; or

(B) adults in care, including adults with limited mobility, as follows:

(i) if the entity does not have an automatic sprinkler system, the plan must ensure complete evacuation will be accomplished within three minutes;

(ii) if the entity has a central fire alarm system and an automatic retardant sprinkler system, the plan must ensure complete evacuation will be accomplished within 13 minutes;

(iii) if the entity has a central fire alarm system and an automatic suppressant sprinkler system, the plan must ensure evacuation will be accomplished as necessary under the circumstances;

(iv) if the entity has a central fire alarm system, and has a safe location that is remote or separated from the effects of any fire and to which the adults may be safely evacuated, the plan must ensure evacuation will be accomplished as required by the state or municipal fire safety authority responsible for inspecting the entity;

(2) describes in detail the procedures that will be followed for the complete evacuation of the entity, including specific procedures, as applicable, for

(A) children under 30 months of age;

(B) adults or children with limited mobility; and

(C) adults or children who otherwise may need assistance in an emergency, including an adult or child who is mentally, visually, or hearing impaired;

(3) includes procedures for other emergency situations or natural disasters that may affect the entity, including, as appropriate, tsunamis, flooding, and earthquake emergencies;

(4) provides for drills to be conducted as required by (f) of this section;

(5) requires

(A) training of all employees in implementing the plan; and

(B) participation of all employees who are on duty during the scheduled drill;

and

(6) for an assisted living home, provides that the procedures developed in the plan will be reviewed with each adult in care or that adult's representative before the adult begins to receive care.

(f) An entity shall conduct emergency evacuation drills as required in this subsection. Subject to (g)(6) and (7) of this section, a drill may be postponed or modified during severe weather. The entity shall conduct a drill at least

(1) once each month if the entity is

(A) licensed to provide care for children younger than age 12;

(B) a residential child care facility; or

(C) a maternity home; or

(2) once every three months if the entity is

(A) a foster home where children in care are age 12 or older and have been in care at the entity for at least three months; or

(B) an assisted living home, for each shift at the assisted living home; complete evacuation of the home must occur at least once each year for each shift unless the entity conducts evacuations as described under (e)(1)(B)(iii) or (iv) of this section and has an emergency evacuation plan approved by the state fire marshal or a municipality to which the fire marshal has deferred building fire safety inspection and enforcement activities.

(g) An entity shall make and retain a record of each required evacuation drill and make the record available to the department upon request. The record must include

- (1) the date and time of the drill;
- (2) the name of each employee on duty at the time of the drill;
- (3) the name of each adult or child in care who was present at the time of the drill but did not participate in the drill, and the reason for nonparticipation;
- (4) the amount of time required to complete the drill;
- (5) a critique of the drill as described in (h) of this section; the requirement for including a critique does not apply to a foster home or foster group home, but the home shall include a brief evaluation of the evacuation;
- (6) documentation of the reason for any postponement under (f) of this section, and the rescheduled date to conduct the postponed drill; and
- (7) documentation of the reason for any modification under (f) of this section, and a description of the nature of the modification.

(h) The critique required by (g)(5) of this section must include

- (1) a review of actions taken by each employee;
- (2) a review of responses by adults or children in care during drill;
- (3) an evaluation of whether existing policies were followed and, if not, an explanation of why a policy was not followed;
- (4) an evaluation of whether the policies followed were effective and, if not, a description of how any policy will be revised for future drills;
- (5) for any critique that indicates a drill was ineffective in any way, an identification of factors contributing to an ineffective drill; and
- (6) any suggestions for improving future drills.

(i) If an emergency affects an entity, the entity shall notify the department by telephone, facsimile, or electronic mail no later than the following working day and shall, within five working days, submit a detailed written report to the department that includes the following:

- (1) the date and time of the emergency;
- (2) a description of the nature of the emergency;
- (3) a description of how the evacuation was achieved, including the amount of time necessary to achieve evacuation;

(4) a critique of the evacuation that includes the information required under (h) of this section; except as provided in 7 AAC 10.1000(c), the requirement for including a critique does not apply to a foster home or foster group home, but the home shall include a brief evaluation of the evacuation;

(5) if the entity is a residential facility, and if the emergency rendered any part of the facility unsafe for occupancy, a description of how the entity will protect residents until the facility is safe for occupancy.

(j) In addition to the first aid kit required under 7 AAC 10.1075, an entity shall maintain one disaster kit that includes

- (1) at least one flashlight and batteries;
- (2) at least one battery-operated radio and batteries;
- (3) potable water;
- (4) nonperishable food; and
- (5) blankets.

(k) An entity that uses oil, wood, natural gas, or propane as a heating or cooking fuel shall ensure that an operating carbon monoxide detector is installed within each sleeping area, or no more than three feet from the entrance to that area, and is regularly inspected, tested, and serviced. In addition, if the entity is in a multi-level facility, at least one operating carbon monoxide detector must be installed on each level.

(l) An entity licensed to provide care for five or fewer adults or children shall ensure that

(1) the building occupied by the adults or children in care has at least two means of emergency escape that are remote from each other and that provide unobstructed access to the outside of the building; at least one means of emergency escape must be an exterior door; if one of the means of emergency escape is a window, the window must comply with the requirements of (3) of this subsection; an entity that is located in a single-family dwelling with only one exterior door may not provide care for more than five children, including children who are relatives of the administrator or foster parent unless the department approves an additional means of egress;

(2) the building occupied by the adults or children in care has at least one means of escape from any basement directly to the outside at or near ground level, if adults or children in care occupy the basement for any part of the day;

(3) unless prohibited by the state fire marshal for a window 20 feet or more above ground level, each bedroom has at least one fully-opening window that provides escape directly to the outside and that meets the following requirements:

(A) the finished sill height may not exceed

(i) 44 inches above the floor; the department will allow an entity to meet this requirement through the provision of a permanently installed step, the top of which is no more than 44 inches from the sill, if the step does not create a tripping hazard, block wheelchair access in the bedroom, or block a heating element; any request for a variance of the sill height requirement must be accompanied by written approval from the state fire marshal; or

(ii) 48 inches above the floor for a foster home or foster group home licensed under 7 AAC 50 on or before June 23, 2006, or an assisted living home licensed under 7 AAC 75 on or before June 23, 2006, if the home does not already meet the standard in (i) of this subparagraph; the home must meet the standard in (i) of this subparagraph if the bedroom is remodeled or a new bedroom is constructed;

(B) the net clear openable area must be a minimum of 5.7 square feet; for purposes of this subparagraph,

(i) the net clear openable height may not be less than 24 inches; if the height is 24 inches, the width may not be less than 34.25 inches; and

(ii) the net clear openable width may not be less than 20 inches; if the width is 20 inches, the height may not be less than 41.25 inches;

(4) a window screen is not used if it permanently prevents exit or if it cannot be easily removed for exit;

(5) the entity is free of any accumulation of combustible waste material and other fire hazards in or around the premises;

(6) at least one AC primary powered smoke detection device with battery backup, or at least one monitored battery powered smoke detection device, is located in each bedroom; in addition, if the entity is in a multi-level facility, at least one smoke detection device must be installed on each level; each

device required under this paragraph must be less than 10 years old, or newer if necessary to comply with the manufacturer's recommended replacement date; in this paragraph, "AC" means alternating current;

(7) at least one fully charged 2A:10BC dry chemical fire extinguisher is strategically located on each level of the facility, and is installed, inspected, tested, and serviced according to the requirements of 13 AAC 50.025(47);

(8) any flammable or combustible liquid is stored in a container with a tight-fitting lid specifically designed for holding flammable or combustible liquids, and ensure that these liquids are kept out of the reach of children, or adults with impaired judgment; and

(9) each heating device meets the applicable requirements of 7 AAC 10.1015.  
(Eff. 6/23/2006, Register 178)

Authority:	AS 18.05.010	AS 47.32.010	AS 47.32.060
	AS 18.05.040	AS 47.32.020	AS 47.33.005
	AS 44.29.020	AS 47.32.030	AS 47.33.010
	AS 47.14.120	AS 47.32.050	

7 AAC 10.1015. Heating and heating devices. (a) An entity shall ensure that room temperature in the facility is maintained at the following applicable draft-free temperature, adjusted as needed for the majority of adults or children in care to be comfortable:

- (1) 65 degrees Fahrenheit for an entity licensed to provide care for children;
- (2) 68 degrees Fahrenheit for an entity licensed to provide care for adults.

(b) The entity shall ensure that

(1) each heating device is installed and maintained in a safe and serviceable manner and is

(A) vented to the outside if the device is fuel burning; vents or stacks leading from a heating unit must be air-tight at joints so that fumes, smoke, or unburned gases cannot pass from the device, vent, or stack into the entity;

(B) equipped with protective devices if presenting a hazard because of an exposed flame or heating element; heat sources must be shielded in a manner that prevents burn injury; the shield must be far enough from the heat source to prevent it from smoldering or burning; and

(C) not placed or located in sleeping quarters during sleeping hours, unless the entity does not have a separate sleeping area, or in exit ways or corridors at any time; and

(2) an open flame heater is not used, except for a fireplace that complies with 13 AAC 50, 13 AAC 55, and any applicable municipal building code; if a fireplace is used, it must have a protective screen or gate, and the area near the fireplace must be kept free of clutter and combustible or flammable material.

(c) The entity shall ensure that any portable electric heater is equipped with a tipover switch and is kept out of the reach of children, or adults with impaired judgment. A portable electric heater must be kept from flammable objects in accordance with the manufacturer's recommendations. The entity must develop and implement a policy that outlines the safe and proper use of portable heaters. Except as provided in 7 AAC 10.1000(c), the requirement to develop a policy does not apply to a foster home or foster group home. (Eff. 6/23/2006, Register 178)

Authority:	AS 18.05.010	AS 47.14.120	AS 47.32.030
	AS 18.05.040	AS 47.32.010	AS 47.33.005
	AS 44.29.020	AS 47.32.020	AS 47.33.010

7 AAC 10.1020. Water supply. (a) An entity shall provide an ample supply of potable water from a system that complies with applicable provisions of 18 AAC 80.

(b) An entity listed in 7 AAC 10.1000(b) that was licensed before June 23, 2006 has until June 23, 2007 to comply with the requirements of this section, if the entity was approved by the licensing agency to use a rain catchment system as its source of potable water. (Eff. 6/23/2006, Register 178)

Authority:	AS 18.05.010	AS 47.32.010	AS 47.32.140
	AS 18.05.040	AS 47.32.030	AS 47.33.005
	AS 44.29.020	AS 47.32.130	AS 47.33.010
	AS 47.14.120		

7 AAC 10.1022. Wastewater disposal. An entity shall provide a domestic wastewater system that complies with applicable provisions of 18 AAC 72. (Eff. 6/23/2006, Register 178)

Authority:	AS 18.05.010	AS 47.32.010	AS 47.32.140
	AS 18.05.040	AS 47.32.030	AS 47.33.005
	AS 44.29.020	AS 47.32.130	AS 47.33.010
	AS 47.14.120		

7 AAC 10.1025. Solid waste disposal. An entity shall ensure that solid waste is conveyed, stored, and disposed of in a manner that

- (1) minimizes the development of odor;
- (2) prevents waste from attracting and harboring pests; and
- (3) complies with applicable provisions of 18 AAC 60. (Eff. 6/23/2006, Register 178)

Authority:	AS 18.05.010	AS 47.32.010	AS 47.32.140
	AS 18.05.040	AS 47.32.030	AS 47.33.005
	AS 44.29.020	AS 47.32.130	AS 47.33.010
	AS 47.14.120		

7 AAC 10.1030. Toilet facilities, sinks, showers, and bathing facilities. (a) An entity shall ensure that plumbing in the entity is consistent with good public health practices. An entity located in a municipality with a population of 2,500 or more shall ensure that plumbing is sized, installed, and maintained as required by the applicable state plumbing code developed under AS 18.60.705 - 18.60.740, and by any applicable municipal plumbing code.

(b) Except as provided in 7 AAC 10.1000(c), the requirements of this subsection do not apply to foster homes. An entity shall provide at least the number of toilets, handsinks, and bathtubs or showers set out in the following table:

Minimum Plumbing Fixtures			
Based on Average Number of Adults or Children in Care, Plus Employees and Family Members in the Entity During Operation*			
Type of Entity	Minimum Number of Toilets	Minimum Number of Handsinks	Minimum Number of Bathtubs or Showers
Child care center	One for 15 or fewer persons Two for 16 to 30 persons One additional toilet for each additional 15 or fewer persons	One for 15 or fewer persons Two for 16 to 30 persons One additional handsink for each additional 15 or fewer persons	For a center licensed to care for infants or toddlers, at least one bathtub, portable tub capable of being filled, dumped, and cleaned, or sink used only for the purpose of bathing
Residential child care facility, assisted living home, maternity home, or foster group home	One for every six persons	One for every six persons	One for every six persons
*This number is calculated based on the anticipated number of individuals who will be in the entity each day, using a six-month average. Infants are not included for purposes of calculating the number of persons in the entity.			

(c) An entity shall provide and maintain clean and sanitary toilet facilities and ensure that in each toilet room

(1) at least one easily cleanable waste receptacle is provided; if soiled diapers are kept in a waste receptacle until disposed of, that waste receptacle must be covered;

(2) toilet tissue is provided from a wall-hung or protected container at each toilet;

(3) if one or more partitions are used between toilets, each partition is raised at least 12 inches from the floor and is smooth and easily cleanable;

(4) each step stool, if provided, has a nonslip tread made of a water-impervious, durable material;

(5) each floor and wall is covered with smooth, durable, nonabsorbent, easily cleanable material; except as provided in 7 AAC 10.1000(c), the requirements of this paragraph do not apply to a foster home or foster group home; and

(6) each toilet lid, seat, and handle and each handsink is kept clean and sanitary.

(d) The entity shall ensure that each portable tub, bedpan, and potty-chair, as applicable, is emptied into a toilet, and is cleaned and sanitized in a utility sink or another place approved by the department. The entity shall ensure that the utility sink or other area is used only for this purpose and is cleaned and sanitized after each use. Except as provided in 7 AAC 10.1000(c), the requirement of this subsection regarding segregated use of the utility sink does not apply to a foster home or foster group home.

(e) Except for a foster home or foster group home, or an assisted living home providing service for two or fewer residents, the entity shall ensure that each handsink is used only for its designated purpose and is equipped with soap and

(1) at least one accessible single-use towel dispenser or heated air hand-drying device; the entity shall ensure that towels are discarded after each use;

(2) cloth towels if each towel is laundered after each use; or

(3) individual cloth towels assigned to each adult or child in care if each towel is used only by that adult or child; the entity shall ensure that the towels are cleaned or laundered at least every seven days and before assignment to another adult or child in care.

(f) The entity shall ensure that a shower or other bathing facility is constructed with smooth, easily cleanable walls, and water-impervious, nonskid floors that slope uniformly to a drain. The entity shall ensure that the shower or other bathing facility is located in a room with mechanical or other adequate ventilation. Except as provided in 7 AAC 10.1000(c), the requirements of this subsection do not apply to foster homes or foster group homes. (Eff. 6/23/2006, Register 178)

Authority:	AS 18.05.010	AS 47.32.010	AS 47.32.140
	AS 18.05.040	AS 47.32.030	AS 47.33.005
	AS 44.29.020	AS 47.32.130	AS 47.33.010
	AS 47.14.120		

7 AAC 10.1035. Premises. (a) An entity shall ensure that

(1) the premises and surrounding grounds are kept clean, sanitary, safe, and in good repair;

(2) the entity is free of hazards, including splintered surfaces, sharp edges, protruding corners, broken or hazardous toys, steep stairways, ice on walkways, and unsafe play areas;

(3) insects, rodents, and other pests are controlled and that the entity is kept free of conditions that are likely to attract or harbor pests; any pesticide use is subject to the notice and other applicable requirements of 7 AAC 10.1093; if the department determines that the entity is not adequately controlling pests, the department may require the administrator to hire a commercial pest control applicator certified under 18 AAC 90, or to take other appropriate action if a commercial pest control applicator is not available in the community;

(4) outdoor areas are well drained and free from deep depressions that may collect standing water; if necessary to ensure the safety of adults or children in care, the department will require that an outdoor recreation area be enclosed with landscaping, a fence, or another effective barrier that prevents or deters access to a busy roadway or other potential hazard; except as provided in 7 AAC 10.1000(c), the requirements of this paragraph do not apply to a foster home or foster group home;

(5) ventilation by natural or mechanical means is provided to keep air fresh and to prevent the accumulation of heat, steam, condensation, vapors, smoke, or fumes; openings to the outside must prevent the entrance of rodents, insects, and other pests; except as provided in 7 AAC 10.1000(c), the requirements of this paragraph do not apply to a foster home or foster group home;

(6) walls and ceilings have smooth, durable, nonabsorbent, easily cleanable surfaces, except that rough-textured and acoustical tile ceilings are permitted in bedrooms and living rooms; except as provided in 7 AAC 10.1000(c), the requirements of this paragraph do not apply to a foster home or foster group home;

(7) lead-based paint is not used, and any painted surface is free from flaking;

(8) stairways and steps have handrails and nonslip treads or covering; except as provided in 7 AAC 10.1000(c), the requirements of this paragraph do not apply to a foster home or foster group home;

(9) at any fixture that is accessible to adults or children, hot water temperature is no less than 100 degrees Fahrenheit, and no more than 120 degrees Fahrenheit;

(10) self-dispensing or metering faucets, if used, provide a flow of water for at least 10 seconds;

(11) an artificial light source is provided in each area of the entity; the light must be sufficient and appropriate for the activities performed in each area by employees, or by adults or children in care;

(12) cleaners, medicines, and other harmful substances are stored in a place that is inaccessible to children and to adults with impaired judgment; for an entity licensed to provide care for six or more adults or children, the entity must provide a closet, storeroom, or other area separate from the area where adults or children in care are present for the storage of janitorial equipment and cleaning supplies;

(13) furniture and equipment is durable, safe, easily cleanable, and is kept clean and in good repair; and

(14) at least two feet of floor space is provided between each crib, mat, or bed; except as provided in 7 AAC 10.1000(c), the requirements of this paragraph do not apply to a foster home or foster group home.

(b) An entity licensed to provide care for adults with dementia or a cognitive impairment, including adults with a history of wandering or attempting to run away, shall ensure that a method is in place to alert staff when someone exits the entity. To meet the requirements of this subsection, the entity shall install a 15-second delayed exit door with an alarm at each exit, use a wander alarm system, or use another method approved by the department. If the entity wishes to use a delayed exit door, the entity must obtain approval from the municipal fire marshal. (Eff. 6/23/2006, Register 178)

Authority:	AS 18.05.010	AS 47.32.010	AS 47.32.140
	AS 18.05.040	AS 47.32.030	AS 47.33.005
	AS 44.29.020	AS 47.32.130	AS 47.33.010
	AS 47.14.120		

7 AAC 10.1040. General cleaning and sanitation standards. (a) Except as provided in (b) of this section, in addition to the other cleaning and sanitation requirements of 7 AAC 10.1000 – 7 AAC 10.1095, an entity shall ensure that

(1) each table or highchair used for food is in good repair, is easily cleanable, and is cleaned and sanitized after each use;

(2) uncarpeted floors, low shelves, walls, door knobs, and other surfaces often touched by adults or children in care are cleaned and sanitized at a frequency to keep the surfaces clean and sanitary; in each carpeted area, the entity shall ensure that the carpet is vacuumed and shampooed at a frequency to keep it clean;

(3) each interior waste receptacle is kept clean and emptied as often as necessary to prevent overflow;

(4) any surface contaminated by a body fluid, including saliva, blood, mucus, vomit, urine, feces, and an injury discharge, is immediately cleaned and disinfected using universal precautions in accordance with 7 AAC 10.1045, including the use of gloves and the caregiver hygiene requirements of 7 AAC 10.1050(e);

(5) cleaning that may present a hazard to adults or children is done only when a room is not occupied by adults or children in care; and

(6) all bedding is laundered

(A) at least once every seven days;

(B) before assignment to another adult or child in care; and

(C) whenever soiled.

(b) Except as provided in 7 AAC 10.1000(c), the requirements of (a)(6) of this section do not apply to a foster home or foster group home. (Eff. 6/23/2006, Register 178)

Authority:	AS 18.05.010	AS 47.32.010	AS 47.32.140
	AS 18.05.040	AS 47.32.030	AS 47.33.005
	AS 44.29.020	AS 47.32.130	AS 47.33.010
	AS 47.14.120		

7 AAC 10.1045. Universal precautions. An entity shall take precautions to reduce risk against the spread of a communicable, contagious, or infectious disease that could pose a significant threat to the health, safety, or welfare of adults or children in care. In addition to the applicable requirements of 7 AAC 10.1000 – 7 AAC 10.1095, precautions include

(1) seeking and complying with current medical and sanitation advice on communicable, contagious, or infectious diseases;

(2) adopting universal precautions, including the use of gloves, to handle potential exposure to blood, blood-contaminating body fluids, and injury discharges;

(3) training staff, if any, in universal precautions and in the prevention of communicable, contagious, and infectious diseases;

(4) ensuring that the caregiver hygiene requirements of 7 AAC 10.1050 are met;

(5) encouraging children, or adults with impaired judgment, to wash their hands

(A) before food handling, preparation, serving, or table setting;

(B) before eating;

(C) after toileting;

(D) after handling pets or other animals; and

(E) when hands are contaminated with a body fluid, including after nose wiping; and

(6) encouraging children to wash their hands before and after participation in moist play, including molding clay or painting. (Eff. 6/23/2006, Register 178)

Authority:	AS 18.05.010	AS 47.32.010	AS 47.32.140
	AS 18.05.040	AS 47.32.030	AS 47.33.005
	AS 44.29.020	AS 47.32.130	AS 47.33.010
	AS 47.14.120		

7 AAC 10.1050. Caregiver hygiene. (a) A caregiver with a communicable disease, rash, or infection, or an acute respiratory infection, may not work in an entity in any capacity in which the caregiver likely could transmit that disease, rash, infection, or respiratory infection to an adult or child in care. The requirements of this subsection do not apply to a foster home or foster group home.

(b) Caregivers shall conform to good hygienic practices, including those described in 7 AAC 10.1045 and this section.

(c) A caregiver shall thoroughly wash the caregiver's hands with soap and warm running water and rinse with water

(1) before food handling, food preparation, food serving, eating, or setting a table;

(2) after toileting, diapering, or assisting with toileting or diapering;

(3) before and after assisting with toothbrushing;

(4) after handling animals, animal waste, or animal cages;

(5) before and after giving medication, except as provided in (d) of this section;

(6) before and after participation in moist play including molding clay, painting, and cooking; and

(7) whenever hands are contaminated with a body fluid, including after nose wiping.

(d) If the caregiver is administering medication to more than one adult or child and during the process touches the adult or child, or a surface that might be contaminated, the caregiver may use a bacteriocidal or viricidal hand rinse or hand dip between each administration instead of handwashing.

(e) If a caregiver uses gloves, the caregiver shall wash the caregiver's hands immediately after the gloves are removed even if the hands are not visibly contaminated. The use of gloves does not preclude or substitute for handwashing.

(f) If a caregiver provides toothbrushing assistance, the caregiver shall dispense the toothpaste from a shared container in a manner that will not contaminate the toothpaste container. The requirements of this subsection do not apply to a foster home or foster group home. (Eff. 6/23/2006, Register 178)

Authority:	AS 18.05.010	AS 47.32.010	AS 47.32.140
	AS 18.05.040	AS 47.32.030	AS 47.33.005
	AS 44.29.020	AS 47.32.130	AS 47.33.010
	AS 47.14.120		

7 AAC 10.1055. Incontinence care. (a) Except as provided in (b) of this section, an entity that provides incontinence care shall develop, and ensure that each caregiver follows, written incontinence care procedures that minimize the spread of disease and the risk of contamination to hands and surfaces. In addition, the entity shall ensure that

- (1) sufficient quantities of incontinence pads are available and neatly stored;
- (2) the entity has an adequate supply of additional bedding and mattress pads;
- (3) an impervious bag is used for the disposal of soiled pads; and
- (4) nonlatex gloves and handwashing supplies are available to prevent contamination, and are used in accordance with the universal precautions described in 7 AAC 10.1045.

(b) An assisted living home serving five or fewer residents, a foster home, and a foster group home are not required to have written procedures, but must ensure that procedures used minimize the spread of disease and the risk of contamination, and otherwise meet the requirements of this section. (Eff. 6/23/2006, Register 178)

Authority:	AS 18.05.010	AS 47.32.010	AS 47.32.140
	AS 18.05.040	AS 47.32.030	AS 47.33.005
	AS 44.29.020	AS 47.32.130	AS 47.33.010
	AS 47.14.120		

7 AAC 10.1060. Additional provisions for entities licensed to provide care for children. (a) In addition to other applicable requirements of 7 AAC 10.1000 – 7 AAC 10.1095, an entity licensed to provide care for infants and children shall

(1) if infants or toddlers are in care, install and use safety gates to prevent access to stairs;

(2) install outlet covers in all electrical outlets that are not in use and that are accessible to children under age five; and

(3) use safe and sanitary equipment and supplies for diapering and toileting, including easy accessibility for the caregiver to wash the caregiver's hands after changing a diaper or assisting a child with toileting.

(b) An entity that provides care for more than one child who uses bottles and pacifiers shall label the bottles and pacifiers with each child's name.

(c) An entity that reuses bottles, bottle caps, and nipples shall, before reuse,

(1) wash them in a dishwasher, using a long wash cycle with hot water, and a heated drying cycle; or

(2) boil them in water for at least five minutes.

(d) An entity that provides diapering shall develop, and ensure that each caregiver follows, written diaper changing procedures that minimize the spread of disease and the risk of contamination to hands and surfaces. Except as provided in 7 AAC 10.1000(c), a foster home or foster group home is not required to have written procedures, but must ensure that procedures used minimize the spread of disease and the risk of contamination.

(e) In addition to the requirements of (d) of this section, an entity other than a foster home or foster group home shall ensure that

(1) the diaper changing area

(A) is not located in a food preparation area and is not used for temporary placement or serving of food; and

(B) has one accessible handsink located in, or immediately adjacent to, that area;

(2) each surface used for changing diapers is smooth, durable, nonabsorbent, and easily cleanable;

(3) sufficient quantities of clean diapers are available and are neatly stored;

(4) nonlatex gloves and handwashing supplies are available to prevent contamination, and are used in accordance with universal precautions described in 7 AAC 10.1045;

(5) for soiled clothing or cloth diapers, solid waste contents are disposed of by dumping the contents into a toilet and placing the diapers, without rinsing, in

(A) an impervious bag to be given to the parent for laundering, if applicable; or

(B) an easily cleanable container with a firmly fitted cover; the container must be

(i) lined with plastic;

(ii) designed to prevent the caregiver from contaminating the exterior surface of the container or the caregiver when inserting a soiled diaper;

(iii) provided within the caregiver's reach of the diaper changing area; and

(iv) emptied, cleaned, and sanitized daily;

(6) each diaper changing surface is cleaned and sanitized after each use; if a single-use, disposable cover is placed on the diapering surface before diapering, the entity shall ensure that the cover is disposed of immediately after diapering; the use of a single-use, disposable cover does not preclude or substitute for cleaning and sanitizing the surface or area after each use even if the surface or area is not visibly contaminated;

(7) after a soiled disposable diaper is removed, it is folded inward and resealed before disposal into a container described in (5)(B) of this subsection;

(8) if single-use, disposable wipes are used during diapering, the disposable wipes are discarded after use; if a nondisposable cloth is used, that cloth must be placed immediately, without rinsing, in

(A) an impervious bag to be given to the parent for laundering, if applicable; or

(B) a container described in (5)(B) of this subsection;

(9) diaper changing supplies, including containers of cream and lotion, are kept clean and sanitary; and

(10) children do not handle diaper changing supplies.

(f) The entity shall ensure that individual cloth towels used for bathing, toothbrushes, and combs used by a child in care are stored separately to prevent contamination and are labeled with the child's name. If a storage rack is used, the rack must be cleaned and sanitized or replaced when visibly soiled and after contamination with blood or another body fluid. Except as provided in 7 AAC 10.1000(c), the requirements of this subsection do not apply to a foster home or foster group home.

(g) Except for toys brought by children for personal use, the entity shall ensure that

(1) toys used by children are kept clean and sanitary;

(2) if a toy has been mouthed or is otherwise contaminated, that toy is cleaned and sanitized before use by another child; except as provided in 7 AAC 10.1000(c), the requirements of this paragraph do not apply to a foster home or foster group home; and

(3) toys used by children age three or older are cleaned at least once every seven days or when soiled; except as provided in 7 AAC 10.1000(c), the requirements of this paragraph do not apply to a foster home or foster group home.

(h) If a water play table is used by children, the entity shall ensure that

(1) water in the table is maintained at 2 - 10 parts per million chlorine solution during use; the entity shall frequently use chemical test strips to ensure that proper chlorine concentration levels are maintained;

(2) each child using the table has hands washed before and after playing at the water play table;

(3) a child with open sores or wounds does not play at the table;

(4) water is discarded after each day of use; and

(5) the table is cleaned and sanitized after each day of use.

(i) Except as provided in (k) of this section, an entity that provides a play area for use by children in care shall ensure that the play area is free of hazards that can cause injury, including

(1) selecting and maintaining play equipment so that it

(A) is securely anchored, unless it is portable and self supporting;

(B) is free of entrapment, pinch, or crush points;

(C) is free of sharp points, corners, or edges; and

(D) provides clearance between the equipment and any objects that may cause injury; and

(2) covering areas around and under play equipment that has a fall height of three feet or more with shock absorbing material such as pea gravel, sand, or sawdust; concrete or asphalt may not be used under play equipment; in this paragraph, "fall height" means the vertical distance between a play surface and the area around and under the play equipment.

(j) Subject to (k) of this section, an entity shall ensure that each crib, crib mattress, cot, mat, and playpen is cleaned and sanitized

- (1) at least once every seven days;
- (2) before assignment to another child in care; and
- (3) whenever soiled.

(k) Except as provided in 7 AAC 10.1000(c), the requirements of (i) and (j) of this section do not apply to a foster home or foster group home. (Eff. 6/23/2006, Register 178)

Authority:	AS 18.05.010	AS 47.32.010	AS 47.32.140
	AS 18.05.040	AS 47.32.030	AS 47.33.005
	AS 44.29.020	AS 47.32.130	AS 47.33.010
	AS 47.14.120		

7 AAC 10.1065. Food service and preparation. (a) An entity for which a food service permit is required by the Department of Environmental Conservation shall meet the applicable requirements of 18 AAC 31. If that department has set minimum standards for an entity, the entity shall meet those minimum standards.

(b) Except for a foster home or foster group home, an entity providing care for children shall ensure that any meals or snacks brought from a child's home are labeled with the child's name and the date.

(c) An entity that is exempt under 18 AAC 31.012 or 18 AAC 31.014 from the requirements of 18 AAC 31 shall maintain sanitary facilities for the proper care, storage, refrigeration, and preparation of food. The entity shall ensure that

- (1) for purposes of AS 17.20.020, food served is not adulterated; and
- (2) fruits and vegetables are thoroughly washed with potable water before use.

(Eff. 6/23/2006, Register 178)

Authority:	AS 18.05.010	AS 47.32.010	AS 47.32.140
	AS 18.05.040	AS 47.32.030	AS 47.33.005
	AS 44.29.020	AS 47.32.130	AS 47.33.010
	AS 47.14.120		

7 AAC 10.1070. Medications. (a) Subject to 12 AAC 44.965, or another applicable statute or regulation, an entity listed in 7 AAC 10.1000(b) shall meet each applicable requirement of this section unless the entity has an onsite pharmacist and consequently follows a more stringent procedure for that requirement, including a procedure required under 12 AAC 52, or by federal law, and the department has been informed in writing of the more stringent procedure and has approved its use for purposes of this section.

(b) If, as part of health-related services provided in an assisted living home, the home supervises the self-administration of medications, supervision must be performed in accordance with AS 47.33.020.

(c) Except as provided in (d) and (g)(4) of this section, an entity subject to this section shall

(1) ensure that each stored medication, including each nonprescription medication, is in its original container and properly labeled with the name of the adult or child for whom it is intended, the name of the medication, the dosage, expiration date, and directions for administration; except as provided

in 7 AAC 10.1000(c), the requirements of this paragraph do not apply to nonprescription medication used communally in a foster home or foster group home;

(2) store medications in a manner that prevents access by unauthorized persons;

(3) store controlled substances in a locked, permanently affixed storage container; for a controlled substance that requires refrigeration, the storage container must be locked; the entity shall establish written procedures for maintaining a record that accurately accounts for the receipt and each use of each controlled substance, and for periodically reconciling the record; except as provided in 7 AAC 10.1000(c), the requirements of this paragraph do not apply to a foster home, foster group home, or a child care facility;

(4) store medications, including controlled substances, in accordance with the manufacturer's recommendations; and

(5) ensure that nonprescription medications and health products, including nonaspirin fever reducers, naturopathic remedies, vitamin and mineral supplements, diaper ointments and powders, sunscreen, and insect repellent, are used only at the dose, duration, or method of administration specified on the manufacturer's label.

(d) The provisions of (c) of this section do not apply to a medication that a resident of an assisted living home is allowed to keep in that resident's room.

(e) The following entities subject to this chapter may be delegated the task of administration of medicine under 12 AAC 44.965:

(1) a foster home for an adult;

(2) a foster group home for adults;

(3) an assisted living home.

(f) An entity not listed in (e) of this section may administer medication if

(1) within the scope of the person's own license;

(2) under other legal authority; or

(3) under the supervision of another licensed health care provider.

(g) An entity authorized to administer medication may do so only under the following conditions:

(1) the entity must first obtain written permission for the administration of prescription medication from the adult or that adult's representative, or the parent of a child in care upon admission into the entity, or when a new medication is prescribed; if the department is the child's legal guardian, the entity must first obtain written permission from the department;

(2) the entity may administer prescription medication and special medical procedures only in the dosage, at the intervals, or in the manner prescribed by a physician or other person legally authorized to prescribe medication or medical procedures;

(3) if an entity providing care for children has not obtained written permission from the child's parent for the administration of a commonly used nonprescription medication or medication contained in the first aid kit required by 7 AAC 10.1075, the entity shall document telephone permission to administer that medication; a foster home, a foster group home, or an entity providing care for a child for whom the department is the legal guardian is not required to obtain permission from the child's parent for

the administration of nonprescription medication, but shall administer nonprescription medication as authorized by the department in the placement agreement;

(4) the entity shall have a written policy for the use of any commonly used nonprescription medication for oral or topical use kept on hand by the entity for the communal use of any adult or child in care for whom the medication may be indicated; the requirements of this paragraph do not apply to a foster home or foster group home, or to an assisted living home serving two or fewer residents;

(5) prescription medicine must be kept in

(A) the original container showing the date filled, the expiration date, instructions, and the physician's or other medical professional's name; or

(B) medicine sets filled by a pharmacist, a licensed medical professional, or a resident's representative; the prescription date filled, the expiration date, instructions, and the physician's or other medical professional's name must be affixed to or stored with each medicine set;

(6) in an entity with one or more employees, only one designated employee in each shift may administer medication; the designated employee shall record and initial the time each dose is administered;

(7) unused medication must be returned to the parent of a child in care when the medication is no longer needed, except that a foster home, foster group home, or an entity providing care for a child for whom the department is the legal guardian shall discard the unused medication

(A) in a manner that prevents access by children in care; and

(B) in accordance with instructions from the manufacturer, if any;

(8) an assisted living home shall ensure that unused medication is properly discarded and shall notify the resident or resident's representative of the disposal of the medication.

(h) The entity shall ensure that medication requiring refrigeration is grouped together, stored in a manner to prevent contamination of food, and labeled as required by this section. A residential child care facility or an assisted living home that provides care for six or more residents shall keep medication in a separate refrigeration unit that is not used to store food.

(i) In addition to complying with the other requirements of this section, a residential psychiatric treatment center

(1) shall ensure that the record of the prescription and administration of prescription and nonprescription medications is kept in each child's files and in another master medications file arranged to show in chronological order the prescription and administration of medications to each child, with records sorted by each child's name, showing each diagnosis for each child;

(2) shall make the records described in (1) of this subsection available for department review for the purpose of identifying and preventing abuse, or inappropriate or unnecessary use of prescription or nonprescription medications;

(3) may not use a medication for the purpose of sedating or controlling the behavior of a child; however, subject to 7 AAC 50.870, a medication may be used for chemical restraint in a residential psychiatric treatment center; in this paragraph, "chemical restraint" has the meaning given in 7 AAC 50.990;

(4) may not administer a psychotropic or neuroleptic class medication to a child unless the use of the medication is part of the child's treatment plan developed under 7 AAC 50.840 and use of the medication has been consented to by the child's parent, Indian custodian, or guardian after both the clinical director and the prescribing physician have given sufficient information and counseling to the parent, Indian custodian, or guardian to ensure that the parent, Indian custodian, or guardian can give an informed consent to or refusal of the use of the medication; the information and counseling must discuss the option of not using the medication, the potential benefits and disadvantages of the medication, and alternative medications or therapies that might reasonably be used to treat the same condition; and

(5) may not discharge or threaten to discharge a child because the child's parent, Indian custodian, or guardian declines to give consent to the use of any recommended medication.

(j) In this section,

(1) "controlled substance" means a drug, substance, or immediate precursor included in the schedules set out in AS 11.71.140 - 11.71.190;

(2) "Indian custodian" has the meaning given in 25 U.S.C. 1903(6). (Eff. 6/23/2006, Register 178)

Authority:	AS 18.05.010	AS 47.32.010	AS 47.33.005
	AS 18.05.040	AS 47.32.030	AS 47.33.010
	AS 44.29.020	AS 47.32.130	AS 47.33.020
	AS 47.14.120	AS 47.32.140	

7 AAC 10.1075. First aid kit and procedures. (a) An entity shall review, and shall post or make readily available, first aid procedures. The entity shall post and keep current emergency telephone numbers, including the number for the poison control center, near one or more telephones in the entity. The entity shall maintain

(1) at least one first aid kit described in (c) of this section that is kept at the entity;

(2) at least one additional first aid kit described in (c) of this section for field trips or outings away from the entity; and

(3) an abbreviated first aid kit for a neighborhood walk of 30 minutes or less; the requirements of this paragraph do not apply to an assisted living home; an entity may use the kit described in (2) of this subsection for a neighborhood walk if the kit is not needed for a field trip or outing, and if a kit described in (c) of this section is kept at the entity; for purposes of this paragraph, an abbreviated kit must contain, at a minimum, the following:

(A) disposable nonporous, nonlatex gloves;

(B) tweezers;

(C) adhesive bandages;

(D) bandage tape;

(E) sterile gauze pads;

(F) a cold pack;

(G) a CPR barrier device or mask;

(H) potable water;

(I) for an entity providing care for children, the emergency child record information required by 7 AAC 57.400(a);

(J) medication that may be needed on the walk.

(b) The entity shall restock each first aid kit after use to ensure compliance with this section.

(c) Except as provided in (a)(3) of this section, each first aid kit must include at least the following items, checked regularly to ensure that any expiration date is not exceeded, and kept within a container that will hold all of the items:

(1) disposable nonporous, nonlatex gloves;

(2) sealed packages of alcohol wipes or antiseptic for thermometer cleaning only;

(3) scissors;

(4) tweezers;

(5) a thermometer;

- (6) adhesive bandages;
- (7) bandage tape;
- (8) sterile gauze pads;
- (9) flexible roller gauze;
- (10) triangular bandages;
- (11) safety pins;
- (12) an eye dressing;
- (13) a note pad with a pen or pencil;
- (14) activated charcoal, for use only under the direction of a poison control center or another medical professional;
- (15) a cold pack;
- (16) a current American Academy of Pediatrics or American Red Cross standard first aid text or equivalent first aid guide;
- (17) a CPR barrier device or mask;
- (18) the telephone number for the poison control center;
- (19) potable water;
- (20) splints, including small child-size splints if children are in care;
- (21) soap;
- (22) a working flashlight;
- (23) for a field trip or outing away from a child care facility, other than a foster home or foster group home, and for each child participating in the trip or outing,

(A) the emergency child record information as required by 7 AAC 57.400(a);

and

(B) written permission for use of medication; only medication that is or may be needed during a field trip or outing may be included in first aid kit, and only for the length of the field trip or outing. (Eff. 6/23/2006, Register 178)

Authority:	AS 18.05.010	AS 47.32.010	AS 47.32.140
	AS 18.05.040	AS 47.32.030	AS 47.33.005
	AS 44.29.020	AS 47.32.130	AS 47.33.010
	AS 47.14.120		

Editor's note: Information about the first aid text or guide referred to in 7 AAC 10.1075 may be obtained from the American Academy of Pediatrics at its website: <http://www.aap.org/>, or by writing to the American Academy of Pediatrics, 141 Northwest Point Boulevard, Elk Grove Village, IL 60007-1098 (telephone 847-434-4000). Information may be obtained from the American Red Cross at its website: <http://www.redcross.org/>, or by writing to American Red Cross National Headquarters, 2025 E Street, NW, Washington, DC 20006 (telephone: 202-303-4498).

7 AAC 10.1080. Firearms and ammunition. (a) Firearms and ammunition are prohibited in an assisted living home licensed for six or more residents, and in a child care center, a residential child care facility, and a maternity home.

(b) An entity that is not subject to (a) of this section shall ensure that any firearms are unloaded and stored in a locked gun safe or other locked place that is not visible or accessible to adults or children in care. The entity shall ensure that ammunition is stored separately from the firearms in a place inaccessible to adults or children in care.

(c) The entity shall inform each adult in care or that adult's representative, parents of children in care, or social workers, care coordinators, or case managers, as applicable, if firearms are present in the entity.

(d) Before a foster home allows a child to handle a firearm, the home shall submit a firearms safety plan acceptable to the department that addresses the firearms safety instruction approach the home will use. (Eff. 6/23/2006, Register 178)

Authority:	AS 18.05.010	AS 47.32.010	AS 47.32.140
	AS 18.05.040	AS 47.32.030	AS 47.33.005
	AS 44.29.020	AS 47.32.130	AS 47.33.010
	AS 47.14.120		

7 AAC 10.1085. Smoking. (a) In addition to the applicable requirements of AS 18.35.300 – 18.35.365, an entity listed in 7 AAC 10.1000(b) is subject to the applicable requirements of this section.

(b) Smoking is prohibited in a child care center, a residential child care facility, and a maternity home.

(c) Smoking in a foster home or foster group home must be limited to outside the home, or in a well-ventilated area away from the immediate living area, and only after submitting a plan acceptable to the department that addresses how children in care will be protected from smoke.

(d) Smoking is prohibited in a child care home and a child care group home while children are in care. The home must ensure that, while children are in care,

(1) cigarettes or other smoking products, and ashtrays, lighters, or other smoking accessories are not visible or accessible to children; and

(2) the home does not smell of smoke from cigarettes or other smoking products.

(e) Any vehicle used to transport children must be smoke-free.

(f) If smoking is allowed in an assisted living home, a designated smoking and a nonsmoking area must be provided. A designated smoking area may not be in a common area. The designated smoking area must be separated from common areas by a closed door or partition that protects nonsmokers from smoke. The designated smoking area must be provided with natural or mechanical ventilation sufficient to provide fresh air and to prevent the accumulation of smoke and smoke odor. (Eff. 6/23/2006, Register 178)

Authority:	AS 18.05.010	AS 47.32.010	AS 47.32.140
	AS 18.05.040	AS 47.32.030	AS 47.33.005
	AS 44.29.020	AS 47.32.130	AS 47.33.010
	AS 47.14.120		

7 AAC 10.1090. Animals. (a) An entity shall ensure that any animal kept in the entity has no communicable disease, has immunizations required under state and federal law, and is free of internal and external parasites. The entity must show proof of compliance with required immunizations to the department upon request.

(b) The entity shall inform each adult in care or that adult's representative, parents of children in care, social workers, care coordinators, and case managers, as applicable, if any animal is present in the entity.

(c) Psittacine birds may not be kept in a child care center.

(d) A psittacine bird may be kept in an assisted living home if the bird

(1) receives prophylactic antibiotics before introduction into the assisted living home;  
and

(2) is isolated at least 45 days in a room separate from a room occupied by any other birds in the home.

(e) Except for a child care center subject to (c) of this section, a parakeet, pigeon, or other similarly small-sized psittacine bird may be kept in another entity listed in 7 AAC 10.1000(b) only if the bird

(1) receives prophylactic antibiotics before introduction into the entity; and

(2) is isolated at least 45 days in a room separate from a room occupied by any other birds in the entity.

(f) Ducklings and chicks may be incubated or hatched in an entity, except in a room where infants or toddlers are present, if

(1) children do not handle the ducklings or chicks; and

(2) the ducklings and chicks are removed from the entity when hatched.

(g) Amphibians, ferrets, reptiles, and wild, poisonous, or predatory animals may not be kept in an entity listed in 7 AAC 10.1000(b). A foster home or foster group home, or an assisted living home serving two or fewer residents, may have amphibians, ferrets, or reptiles, if approved by the department. The prohibition of this subsection on predatory animals does not apply to domestic dogs and domestic cats.

(h) The entity shall ensure that

(1) any birds, fish, and other animals allowed by this section are kept in appropriately designed cages or aquariums; the requirements of this paragraph do not apply to domestic dogs and domestic cats;

(2) the area around a cage or aquarium is smooth, nonabsorbent, impervious to water, and easily cleanable, and is cleaned and sanitized at a frequency to keep the area clean and sanitary;

(3) animal waste is removed daily, or at a frequency to prevent odor or contact with adults or children in care;

(4) each cage is lined with an impervious material and is cleaned at a frequency necessary to prevent a health risk to adults or children in care;

(5) bowls used for providing food and water for animals are cleaned at a frequency necessary to prevent a health risk to adults or children in care; and

(6) cleaning of animal waste

(A) is conducted when adults or children in care are not present; except as provided in 7 AAC 10.1000(c), the requirements of this subparagraph do not apply to a foster home or foster group home; and

(B) is not conducted in an area used for food preparation or service.

(i) The entity shall

(1) disclose to the department information regarding any animal in the entity, if that animal has

(A) been the subject of a past contact with an animal control official because of aggressive behavior or biting; or

(B) a history of aggressive behavior or biting, regardless of whether the animal has been the subject of a past contact with an animal control official;

(2) notify the department within 24 hours of any occurrence of aggressive behavior or biting by an animal in the entity, including whether the occurrence resulted in a contact with an animal control official;

(3) immediately remove from contact with adults or children in care, an animal described in (1) or (2) of this subsection; and

(4) permanently remove from the entity an animal described in (1) or (2) of this subsection, if the department determines that the animal is a threat to the life or safety of adults or children in care.

(j) In this section, "psittacine bird" means a bird classified as part of the family Psittaciadae, including parrots, macaws, and parakeets. (Eff. 6/23/2006, Register 178)

Authority:	AS 18.05.010	AS 47.32.010	AS 47.32.140
	AS 18.05.040	AS 47.32.030	AS 47.33.005
	AS 44.29.020	AS 47.32.130	AS 47.33.010
	AS 47.14.120		

7 AAC 10.1093. Pesticide use and notification. (a) An entity shall, whenever practical, use a nonchemical method, including good sanitation practices, structural repair, and window screens to control pests. Pesticide use, including the use of a certified applicator if required, is subject to applicable requirements of the Department of Environmental Conservation under 18 AAC 90. The requirements of (b) – (g) of this section do not apply to a foster home or foster group home, but the home must notify the

department before any major fumigation or other application that would require residents of the home to be temporarily relocated.

(b) Except as provided in (e) and (f) of this section, at least 24 hours before the application of a pesticide to any area of an entity used by or accessible to adults or children in care, an entity that provides care for six or more adults or children shall notify each adult or that adult's representative, each parent of a child in care, social workers, care coordinators, and case managers, as applicable, regarding the application. A notice under this subsection must include

(1) a description of the area where the pesticide will be applied;

(2) the date and approximate time of application; if the application will be outdoors, the notification must include three dates in chronological order in case an application is cancelled due to weather;

(3) the common or brand name of each pesticide to be used;

(4) the targeted pests to be controlled by the pesticide;

(5) a contact name and telephone number at the entity; and

(6) a statement that, upon request, the entity will provide

(A) a list of each active ingredient in the pesticide;

(B) the EPA registration number; and

(C) the telephone contact number, if any, on the label of the pesticide for additional information about each pesticide.

(c) The notification required by (b) of this section may be made by individual notice delivered by telephone, face-to-face oral communication, electronic mail, postal mail, or facsimile. The entity may develop a registration system to provide this notification only to those persons who wish to receive notification. If the entity develops a registration system, the entity shall provide written notice at the time of admission or enrollment that pesticides may be used in or around the entity and explain how to register to be notified at least 24 hours before a pesticide treatment. If written notice is given, the notice may not be included with a notice being provided on another matter.

(d) Except as provided in (f) of this section, immediately before application of a pesticide, the entity shall post the area where the pesticide is to be applied with a sign that is at least 8 ½ x 11 inches and that reads "Pesticide Treated Area: KEEP OUT" in block letters at least one inch high. The entity shall ensure that the sign remains posted and that children, or adults with impaired judgment, are kept out of the treated area for at least 24 hours or until the reentry interval, if any, on the pesticide label has expired, whichever period is longer.

(e) An entity may authorize an immediate pesticide treatment without prior notification if the administrator determines that an emergency exists. An emergency includes an immediate and unanticipated threat to the health or safety of adults or children in care. The provisions of (d) of this section must be met.

(f) The following pesticide applications are not subject to the notification or posting requirements of (b) – (e) of this section:

- (1) the application of an antimicrobial pesticide;
- (2) an application during which the entity remains unoccupied by adults or children in care for a continuous 72-hour period after the application;
- (3) the application of a rodenticide in a tamper-resistant bait station, or in an area inaccessible to children or to adults with impaired judgment;
- (4) the application of silica gels and other ready-to-use pastes, foams, or gels that will be applied in an area inaccessible to children or to adults with impaired judgment.

(g) An entity shall keep records of pesticide applications for at least two years after application. Records required to be kept under this subsection must be made available for department review and must include

- (1) a copy of each notice issued under this section; if a child care center authorizes a pesticide application under (f) of this section, the information required under (b) of this section must be included in the record;
- (2) the date of the application;
- (3) the name and employer of the individual who applied the pesticide, including the individual's certification number;
- (4) the rate of the application;
- (5) the concentration of the pesticide applied; and
- (6) the total amount of pesticide product used.

(h) In this section,

(1) "active ingredient" has the meaning given in 18 AAC 90.990; the definition of "active ingredient" in 18 AAC 90.990, as revised as of May 17, 2006, and as amended from time to time, is adopted by reference;

(2) "antimicrobial pesticide" has the meaning given in 18 AAC 90.990; the definition of "antimicrobial pesticide" in 18 AAC 90.990, as revised as of May 17, 2006, and as amended from time to time, is adopted by reference;

(3) "label" has the meaning given in 18 AAC 90.990; the definition of "label" in 18 AAC 90.990, as revised as of May 17, 2006, and as amended from time to time, is adopted by reference;

(4) "rate of application" has the meaning given in 18 AAC 90.990; the definition of "rate of application" in 18 AAC 90.990, as revised as of May 17, 2006, and as amended from time to time, is adopted by reference;

(5) "rodenticide" has the meaning given in 18 AAC 90.990; the definition of "rodenticide" in 18 AAC 90.990, as revised as of May 17, 2006, and as amended from time to time, is adopted by reference. (Eff. 6/23/2006, Register 178)

Authority:	AS 18.05.010	AS 47.32.010	AS 47.32.140
	AS 18.05.040	AS 47.32.030	AS 47.33.005
	AS 44.29.020	AS 47.32.130	AS 47.33.010
	AS 47.14.120		

Editor's note: The sign required in 7 AAC 10.1093 may be downloaded from the department's website at <http://www.hss.state.ak.us/dph/CL/forms/default.htm> and is available at the Department of Health and Social Services' offices statewide.

7 AAC 10.1095. Toxic substances; poisonous plants. (a) An entity shall ensure that

(1) each cleaning material, detergent, aerosol can, pesticide, poison, and other toxic material is

(A) stored in the original labeled container; the requirement in this subparagraph does not apply to a spray bottle that contains a commercial sanitizing solution or a bleach-water solution used to sanitize toys, tables, counters, and other surfaces throughout the day, if that bottle is appropriately labeled and is stored as provided in (B) of this paragraph;

(B) inaccessible to children or to adults with impaired judgment, and stored separately from medication and food;

(C) used

(i) according to the manufacturer's instructions;

(ii) for the intended purpose;

(iii) in a manner that will not contaminate a play surface, a food service area, or a food preparation area; and

(iv) in a manner that is not a hazard to adults or children in care;

(2) only nontoxic arts and crafts materials are used; and

(3) a poisonous plant is not in an entity where children, or adults with impaired judgment, are in care, except as provided in (b) of this section.

(b) The department may allow a poisonous plant that is a common household plant, including a poinsettia, a dieffenbachia, an English ivy, a mother-in-law, and a philodendron, to be present in an entity described in (a)(3) of this section, if the department finds that children in care or adults with impaired judgment will be protected from harm. The entity shall submit to the department a written list of all poisonous plants maintained in the entity, and a description of how the entity will protect children, or adults with impaired judgment, from being harmed by the plants. If the department allows one or more poisonous plants to be present in the entity, the entity shall inform each adult's representative, parents of children in care, social workers, care coordinators, and case managers, as applicable, of any poisonous plant present in the entity, and describe how the entity will protect children, or adults with impaired judgment, from harm.

(c) In this section, "poisonous plant"

(1) means a plant, tree, or shrub that can cause injury or death, if a portion of that plant, tree, or shrub is ingested or touched; and

(2) includes certain

(A) flower garden plants, including autumn crocus, bleeding heart, chrysanthemum, daffodil, four-o'clocks, foxglove, hyacinth, hydrangea, iris, jonquil, lily of the valley, morning glory, narcissus, and snow on the mountain;

(B) house plants, including bird of paradise, castor bean, dumbcane (also known as dieffenbachia), English ivy, holly, jequirty bean (also known as rosary pea), Jerusalem cherry, mistletoe, mother-in-law, oleander, philodendron, poinsettia, and rhododendron;

(C) trees and shrubs, including black locust, boxwood, chokecherry, elderberry, English yew, horse chestnut, buckeye, juniper, oak, water hemlock, and yew;

(D) vegetable garden plants, including asparagus, sprouts and green parts of potato, rhubarb leaves, and green parts of tomato; and

(E) wild plants, including belladonna, bittersweet, buttercups, Indian hemp, jack-in-the-pulpit, jimson weed, larkspur, monkshood, certain mushrooms, nightshade, poison hemlock, poison ivy, poison oak, poison sumac, tobacco, and skunk cabbage. (Eff. 6/23/2006, Register 178)

Authority:	AS 18.05.010	AS 47.32.010	AS 47.32.140
	AS 18.05.040	AS 47.32.030	AS 47.33.005
	AS 44.29.020	AS 47.32.130	AS 47.33.010
	AS 47.14.120		

Article 5. General Variance Procedures.

Section

- 9500. Purpose and applicability
- 9505. General variance
- 9510. Request for a general variance
- 9515. Notice requirements for general variance requests for assisted living homes
- 9520. Evaluation of a request for a general variance
- 9525. Grant or denial of a general variance
- 9530. Posting of a general variance
- 9535. Request for reconsideration of denial or revocation of a general variance

7 AAC 10.9500. Purpose and applicability. (a) Except as provided in (b)(2) and (3) of this section, the purpose of 7 AAC 10.9500 – 7 AAC 10.9535 is to provide a process for determining whether a general variance, if requested, should be granted for a requirement of

- (1) AS 47.32;
- (2) this chapter; or
- (3) another regulation applicable to an entity listed in 7 AAC 10.015.

(b) The provisions of 7 AAC 10.9500 – 7 AAC 10.9535

- (1) apply to the entities listed in 7 AAC 10.015;
- (2) do not apply to a temporary variance to admit a child for care in an assisted living home under 7 AAC 75.415; and
- (3) do not apply to a request for a variance from a provision of 7 AAC 41.205, 7 AAC 50.210, 7 AAC 57.315, or 7 AAC 75.215. (Eff. 6/23/2006, Register 178)

Authority:	AS 18.05.010	AS 47.14.120	AS 47.32.130
	AS 18.05.040	AS 47.32.010	AS 47.32.140
	AS 44.29.020	AS 47.32.030	

7 AAC 10.9505. General variance. (a) Subject to 7 AAC 10.9500(b)(2) and (3), and (b) of this section, the department may grant a general variance if

- (1) the applicable requirements of 7 AAC 10.9500 – 7 AAC 10.9515 are met;
- (2) an alternative means, acceptable to the department, satisfies the purpose of the requirement for which the variance is sought; and
- (3) the health, safety, and welfare of recipients of services are protected.

(b) The department may grant an assisted living home a general variance from a requirement of AS 47.32, 7 AAC 75, or this chapter to allow the home to

(1) meet the goals of AS 47.32, 7 AAC 75, and this chapter in a way that differs from the methods set out in AS 47.32, 7 AAC 75, or this chapter;

(2) promote aging in place to minimize the need for a resident to move from the home;  
or

(3) integrate mentally, developmentally, and physically disabled residents into the community to reach their highest level of functioning. (Eff. 6/23/2006, Register 178)

Authority:	AS 18.05.010	AS 47.14.120	AS 47.32.130
	AS 18.05.040	AS 47.32.010	AS 47.32.140
	AS 44.29.020	AS 47.32.030	

7 AAC 10.9510. Request for a general variance. An entity seeking a general variance under 7 AAC 10.9500 – 7 AAC 10.9535 must submit to the department, on a form supplied by the department, a request for a general variance as required by this section. A request must contain the following:

- (1) the requirement from which the variance is sought;
- (2) the reasons why the entity is unable to comply with the requirement, a description of how the entity is not in compliance, and the extent to which compliance with the requirement will impose any substantial economic, technological, programmatic, legal, or medical hardship on the entity or recipients of services;
- (3) the period of time for which the variance is requested;
- (4) the proposed alternative means of satisfying the purpose of the requirement for which the variance is sought;
- (5) a statement as to how the health, safety, and welfare of recipients of services will be protected during the period of the variance;
- (6) the plan for achieving compliance before the variance expires;
- (7) assurance that the conditions at the entity do not present an imminent danger to the health, safety, or welfare of recipients of services;
- (8) if the request for a variance involves fire safety or another state or municipal requirement, evidence that the request has been reviewed by the appropriate authority;
- (9) for a licensed entity, the names of the recipients of services who would be affected by the variance, and the names and addresses of any representatives of those recipients of services; the

requirements of this paragraph do not apply to a child care facility subject to 7 AAC 57 unless this information is requested by the department;

(10) for an assisted living home, assurance that the notice requirements of 7 AAC 10.9515 will be met;

(11) any additional information requested by the department to determine the effect of a variance on the health, safety, and welfare of recipients of services. (Eff. 6/23/2006, Register 178)

Authority:	AS 18.05.010	AS 47.14.120	AS 47.32.130
	AS 18.05.040	AS 47.32.010	AS 47.32.140
	AS 44.29.020	AS 47.32.030	

Editor's note: The request form referred to in 7 AAC 10.9510 may be obtained from the Certification and Licensing section of the Division of Public Health, 619 East Ship Creek Avenue, Suite 232, Anchorage, Alaska 99501.

7 AAC 10.9515. Notice requirements for general variance requests for assisted living homes. (a) If an assisted living home is requesting a general variance for a state statutory or regulatory licensing requirement, the home shall deliver to each affected resident or the resident's representative, no later than five days after submitting a request for a variance, a

(1) copy or summary of the request; and

(2) notice that states

(A) that the resident or representative has the right to submit comments to the department regarding the request; and

(B) the date by which any comments must be received by the department.

(b) The home shall provide to the department a statement indicating compliance with (a) of this section.

(c) The department will consider any timely comments received under this section in determining whether to grant a general variance. (Eff. 6/23/2006, Register 178)

Authority:	AS 18.05.010	AS 47.14.120	AS 47.32.130
	AS 18.05.040	AS 47.32.010	AS 47.32.140
	AS 44.29.020	AS 47.32.030	

7 AAC 10.9520. Evaluation of a request for a general variance. The department will evaluate a request for a general variance by

(1) investigating the statements in the request form;

(2) inspecting the entity, if appropriate; and

(3) taking one or both of the following actions:

(A) conferring with the applicant or licensee regarding the request;

(B) discussing the request with the affected recipients of services or their representatives, as appropriate, to determine whether they support granting the variance. (Eff. 6/23/2006, Register 178)

Authority:	AS 18.05.010	AS 47.14.120	AS 47.32.130
	AS 18.05.040	AS 47.32.010	AS 47.32.140
	AS 44.29.020	AS 47.32.030	

7 AAC 10.9525. Grant or denial of a general variance. (a) The department's decision to grant or deny a request for a general variance will be issued in writing and will be delivered to the person who made the request.

(b) Subject to (c) of this section, the department may grant a general variance, for a period that does not exceed one year, if the department determines that the entity

(1) is unable to comply with the requirement from which the variance is sought;

(2) has an effective plan for achieving compliance during the term of the variance; and

(3) is able to adequately provide for the health, safety, and welfare of recipients of services during the term of the variance.

(c) The department may grant a general variance for a longer period than allowed under (b) of this section if the department determines

(1) that

(A) strict compliance with the requirement from which the variance is sought cannot be accomplished without a substantial economic, technological, programmatic, legal, or medical hardship; or

(B) the variance will maintain or improve the quality of services for recipients of services; and

(2) that the entity has an effective plan for meeting the goal of the requirement from which the variance is sought, and that the plan adequately protects the health, safety, and welfare of recipients of services and otherwise meets all applicable statutory or regulatory standards.

(d) A decision to grant a request for a general variance will identify the statutory or regulatory requirement involved by section number and subject matter and state the duration, terms, and conditions of the variance, including the steps the entity must take to achieve compliance before the variance expires.

(e) A decision to deny a request for a general variance will be in writing and will state the reasons for the denial. The entity may reapply for a variance, addressing the department's stated reasons for the denial or may request reconsideration under 7 AAC 10.9535.

(f) If an entity violates a condition of a general variance granted under this section, the department will send written notice to the entity that the variance is revoked. The notice will advise that the entity may request reconsideration under 7 AAC 10.9535. (Eff. 6/23/2006, Register 178)

Authority:	AS 18.05.010	AS 47.14.120	AS 47.32.130
	AS 18.05.040	AS 47.32.010	AS 47.32.140
	AS 44.29.020	AS 47.32.030	

7 AAC 10.9530. Posting of a general variance. (a) If the department grants a request for a general variance, the entity shall post a copy of the general variance decision in a conspicuous place, with

the entity's license as required by AS 47.32.080, during the period the variance is in effect, and shall make it available to any person who wishes to review it. A general variance remains in effect for the duration stated, unless the department revokes the variance under (b) of this section.

(b) The department will revoke a general variance if the department finds that the entity is not following its plan for achieving compliance, or is no longer able to adequately provide for the health, safety, and welfare of recipients of services during the term of the variance. If the department decides to revoke a variance, it will provide written notice of revocation to the entity, setting out the reasons for the department's decision. The department will advise the entity of its right to request reconsideration under 7 AAC 10.9535. A notice of revocation issued under this subsection is effective 30 days after it is received by the entity unless a request for reconsideration is submitted. Nothing in this subsection precludes the department from issuing a notice of immediate revocation if the department finds that the life, health, safety, or welfare of recipients of services is threatened. (Eff. 6/23/2006, Register 178)

Authority:	AS 18.05.010	AS 47.14.120	AS 47.32.080
	AS 18.05.040	AS 47.32.010	AS 47.32.130
	AS 44.29.020	AS 47.32.030	AS 47.32.140

7 AAC 10.9535. Request for reconsideration of denial or revocation of a general variance. (a) If the department denies or revokes a variance subject to 7 AAC 10.9500 – 7 AAC 10.9535, the entity may submit a written request to the department for reconsideration of that decision.

(b) A request under (a) of this section must be submitted within 30 days after the entity receives the denial or notice of revocation, and must include

(1) the requestor's name, mailing address, telephone number, and, if available, electronic mail address and facsimile number;

(2) a summary of the department's decision to be reviewed; and

(3) a clear and concise statement of the reason for the request, including

(A) a statement of the nature and scope of the requestor's interests, and an explanation of how and to what extent those interests would be directly and adversely affected by the decision;

(B) the contested terms and conditions of the department's decision, and proposed alternatives; and

(C) copies of any documents or data that would assist the department in its review.

(c) After reviewing a request for reconsideration, the department will notify the entity in writing within 30 days after receiving the request, and will state the reasons for the department's final decision. (Eff. 6/23/2006, Register 178)

Authority:	AS 18.05.010	AS 47.14.120	AS 47.32.130
	AS 18.05.040	AS 47.32.010	AS 47.32.140
	AS 44.29.020	AS 47.32.030	

Article 6. Inspections and Investigations.

Section

- 9600. Inspections and investigations
- 9610. Plan of correction
- 9615. Allegation of compliance
- 9620. Hearings

7 AAC 10.9600. Inspections and investigations. The department will conduct announced and unannounced inspections and investigations of an entity subject to this chapter

(1) for purposes of AS 47.32.110;

(2) to determine compliance with AS 47.32, this chapter, and any other applicable statute or regulation; and

(3) to determine whether an enforcement action should be taken under AS 47.32.130 or 47.32.140. (Eff. 6/23/2006, Register 178)

Authority:	AS 18.05.010	AS 47.32.030	AS 47.32.130
	AS 18.05.040	AS 47.32.050	AS 47.32.140
	AS 44.29.020	AS 47.32.060	AS 47.33.005
	AS 47.14.120	AS 47.32.100	AS 47.33.010
	AS 47.32.010	AS 47.32.110	

7 AAC 10.9610. Plan of correction. (a) The plan of correction required under AS 47.32.140(b) must contain the following information for each violation identified in the report issued under AS 47.32.120(a):

(1) each action that will be taken to correct the violation;

(2) each measure that will be taken or change that will be made to ensure the violation does not recur;

(3) how the entity will monitor each corrective action to ensure the violation is cured and will not recur;

(4) the date on or before which the violation will be cured.

(b) The plan of correction must be signed by the administrator or another person responsible for operation of the entity.

(c) If the department determines that any recipients of services were affected by a violation, the department may also require the entity to describe

(1) each corrective action that will be taken with regard to those recipients; and

(2) how the entity will identify other recipients of services who might be affected by the violation, and what corrective action will be taken.

(d) The entity may request that the plan of correction also act as the allegation of compliance required under 7 AAC 10.9615 if each violation listed in the report has been corrected before submission of the plan of correction.

(e) The department will review a plan of correction submitted under (a) - (d) of this section to determine whether the plan is acceptable. If the department determines that the plan is unacceptable, the department may

(1) request additional information regarding one or more corrective actions described in the plan;

(2) require the entity to amend the plan as directed by the department;

(3) require the entity to comply with a plan of correction developed by the department under (g) of this section.

(f) If the department finds that an entity has failed to correct a violation of an applicable statute or regulation within the time specified by the department under AS 47.32.140(a), has failed to submit a plan of correction for department approval under AS 47.32.140(b), or has submitted an unacceptable plan, the department may require the entity to participate in a plan of correction developed by the department under (g) of this section.

(g) In a plan of correction developed by the department, the department will describe each violation, specify each corrective action the entity must take to correct the violation, and specify the date on or before which the entity must cure the violation. The department will notify the entity in writing of a decision to require compliance with a plan of correction developed under this subsection, and will provide a copy of the plan of correction with the notice. In the notice, the department will describe any enforcement action under AS 47.32.140(d) and (f) that the department intends to take, regardless of whether the violation is cured.

(h) The department may conduct a follow-up inspection to determine compliance with the plan of correction.

(i) The entity shall keep on the premises a copy of each inspection document described in AS 47.32.180(b) for at least three years from the date of inspection and shall make each document available to any interested person upon request. (Eff. 6/23/2006, Register 178)

Authority:	AS 18.05.010	AS 47.32.030	AS 47.32.120
	AS 18.05.040	AS 47.32.050	AS 47.32.130
	AS 44.29.020	AS 47.32.060	AS 47.32.140
	AS 47.14.120	AS 47.32.100	AS 47.33.005
	AS 47.32.010	AS 47.32.110	AS 47.33.010

7 AAC 10.9615. Allegation of compliance. An allegation of compliance required under AS 47.32.140(c) must describe each action that was taken by the entity to correct each violation, and must include the date the violation was corrected. The allegation must be signed by the administrator or another person responsible for operation of the entity. The department will review the allegation to determine whether it provides enough detail to establish that each violation was corrected by any applicable deadline. The department may also conduct a follow-up inspection to validate the allegation of compliance. (Eff. 6/23/2006, Register 178)

Authority:	AS 18.05.010	AS 47.32.030	AS 47.32.140
	AS 18.05.040	AS 47.32.050	AS 47.32.180
	AS 44.29.020	AS 47.32.060	AS 47.33.005
	AS 47.14.120	AS 47.32.100	AS 47.33.010
	AS 47.32.010	AS 47.32.110	

7 AAC 10.9620. Hearings. An enforcement action taken by the department under AS 47.32 or this chapter, or another state statute or regulation applicable to an entity subject to AS 47.32 and this chapter, is subject to the applicable hearing requirements of AS 47.32.150. (Eff. 6/23/2006, Register 178)

Authority:	AS 18.05.010	AS 47.32.010	AS 47.32.140
	AS 18.05.040	AS 47.32.030	AS 47.32.150
	AS 44.29.020	AS 47.32.050	AS 47.33.005
	AS 47.14.120	AS 47.32.130	AS 47.33.010

#### Article 7. General Provisions.

##### Section 9990. Definitions

7 AAC 10.9990. Definitions. In this chapter, unless the context indicates otherwise,

(1) "adequate" or "adequately" means that which is necessary to accomplish the intended purpose in keeping with good public health practices;

(2) "administrator" means a person who controls, operates, manages, supervises, or conducts activities described in this chapter, or the person performing the duties of the owner, operator, manager, or supervisor;

(3) "adult" means an individual 18 years of age or older;

(4) "adult with impaired judgment" means an adult in care who has dementia or a cognitive impairment;

(5) "approved" means acceptable to the department, based upon conformance with applicable federal, state, or municipal standards and good public health practices;

(6) "assisted living home" has the meaning given in AS 47.32.900;

(7) "caregiver" means an individual identified as a caregiver in 7 AAC 10.1002;

- (8) "child" has the meaning given in
  - (A) 7 AAC 50.990 if referring to a child for whom services are provided under 7 AAC 50; or
  - (B) 7 AAC 57.990(b) if referring to a child for whom services are provided under 7 AAC 57;
- (9) "child care center" has the meaning given in 7 AAC 57.990(a);
- (10) "child care facility" has the meaning given in
  - (A) 7 AAC 50.990 if referring to a child for whom services are provided under 7 AAC 50; or
  - (B) 7 AAC 57.990(b) if referring to a child for whom services are provided under 7 AAC 57;
- (11) "child care group home" has the meaning given in 7 AAC 57.990(a);
- (12) "child care home" has the meaning given in 7 AAC 57.990(a);
- (13) "clean" or "cleaned" means made free of soil, or to make free of soil by
  - (A) washing in warm, soapy water and rinsing; or
  - (B) using another approved method if use of water is inappropriate for the item being cleaned;
- (14) "communicable disease" means a disease or condition that is contagious or transmissible;
- (15) "contaminate" or "contamination" means contact with or from
  - (A) dust, insects, rodents, or other pests;
  - (B) unsanitary equipment or utensils;
  - (C) a body fluid, including saliva, blood, mucus, vomit, urine, feces, or an injury discharge;
  - (D) unnecessary handling;
  - (E) flooding, draining, leakage from overhead, or condensation;
  - (F) poisonous or toxic materials; or
  - (G) any substance or organism that might threaten human health;
- (16) "CPR" means cardiopulmonary resuscitation;
- (17) "department" means the Department of Health and Social Services;

(18) "disinfect" and "disinfected" means the destruction, through use of an appropriate disinfection agent, of disease-causing microorganisms on an inanimate object or surface that renders the object or surface safe for use or handling;

(19) "easily cleanable" means having surfaces that are readily accessible and designed so that residue may be effectively removed by normal cleaning methods;

(20) "entity" means the administration, program, and physical plant of a business or other premises subject to the applicable provisions of this chapter; "entity" includes other parts of the building housing the entity and adjoining grounds over which the administrator has direct control;

(21) "EPA" means United States Environmental Protection Agency;

(22) "food" means a liquid or solid substance consumed by humans, including water or another beverage, a confection, condiment, food ingredient, food additive, or ice, or a substance that enters into the composition of these things, whether simple, blended, mixed, or compounded;

(23) "foster group home" has the meaning given in 7 AAC 50.990;

(24) "foster home" has the meaning given in AS 47.32.900;

(25) "general variance" means a variance described in 7 AAC 10.9500;

(26) "gloves" mean a device made of natural rubber, vinyl, or synthetic material such as neoprene, polyvinyl chloride, or styrene butadiene, worn on the caregiver's hands to prevent contamination between the caregiver and the person receiving care;

(27) "handsink" means a lavatory

(A) equipped to provide hot and cold running water in a manner that meets the requirements of 7 AAC 10.1035(a)(9) and (10); and

(B) used solely for washing hands, face, arms, or other portions of the body;

(28) "imminent danger" means a condition with the potential to adversely affect public health, safety, or welfare; "imminent danger" includes

(A) the extended loss of a potable water supply;

(B) an extended power outage;

(C) a sewage backup into the entity;

(D) a natural disaster;

(E) a disease or illness associated with the operation of the entity; and

(F) a major insect or rodent infestation;

(29) "impervious bag" means a bag designed to prevent transfer, seepage, or flow of moisture into or from the bag;

(30) "in care" means receiving care at an entity;

(31) "infant" has the meaning given in 7 AAC 57.990(a);

(32) "insect" has the meaning given in 18 AAC 90.990; the definition of "insect" in 18 AAC 90.990, as revised as of May 17, 2006, and as amended from time to time, is adopted by reference;

(33) "maternity home" has the meaning given in AS 47.32.900;

(34) "parent" means a birth or adoptive parent or a legal guardian of a child;

(35) "pest" has the meaning given in 18 AAC 90.990; the definition of "pest" in 18 AAC 90.990, as revised as of May 17, 2006, and as amended from time to time, is adopted by reference;

(36) "pesticide" has the meaning given in 18 AAC 90.990; the definition of "pesticide" in 18 AAC 90.990, as revised as of May 17, 2006, and as amended from time to time, is adopted by reference;

(37) "potable water" means water that is safe for drinking, culinary, and other domestic purposes;

(38) "premises" means a place or location used in conjunction with the activities of an entity; "premises" includes all or portions of structures, land, vehicles, equipment, supplies, water supply, wastewater system, and plumbing;

(39) "recipients of services" means individuals receiving care or services in an entity;

(40) "residential child care facility" has the meaning given in AS 47.32.900;

(41) "residential group home" has the meaning given in 7 AAC 50.990;

(42) "residential psychiatric treatment center" has the meaning given in AS 47.32.900;

(43) "sanitize" means to reduce the numbers of microorganisms on cleaned surfaces and equipment to a safe level by application of an appropriate sanitizing agent;

(44) "single-use" means designed to be used once and then discarded, as with disposable diapers, disposable wipes, and disposable paper products;

(45) "toddler" has the meaning given in 7 AAC 57.990(a);

(46) "toilet" means a plumbing fixture designed to receive solid and liquid human waste;  
"toilet"

(A) includes a

(i) water closet that conveys waterborne waste through an integral trap seal; and

(ii) nonflushing toilet, including an incinerating, composting, or humus toilet or vault privy; in this sub-subparagraph, "vault privy" means a holding tank with a seat or seats, or other appurtenances attached, that allows for excretion of human wastes directly into the tank; and

(B) does not include a pit privy; in this subparagraph, "pit privy" means a structure that

(i) is not a vault privy as defined in (A)(ii) of this paragraph;

(ii) receives urine and excrement that is not waterborne; and

(iii) is the final disposal site and not a temporary storage facility;

(47) "universal precautions" means the infectious control precautions that are recommended by the United States Department of Health and Human Services, Centers for Disease Control and Prevention, to be used to prevent the transmission of blood-borne germs such as human immunodeficiency virus and hepatitis B virus;

(48) "water play table" means a table designed for play that can be filled with water;

(49) "working day" means a day other than Saturday, Sunday, or a state holiday.  
(Eff. 6/23/2006, Register 178)

Authority:	AS 18.05.010	AS 47.14.120	AS 47.33.005
	AS 18.05.040	AS 47.32.010	AS 47.33.010
	AS 44.29.020	AS 47.32.030	

Chapter 47.32.

CENTRALIZED LICENSING AND RELATED ADMINISTRATIVE PROCEDURES

**Sec. 47.32.010. Purpose and applicability.**

(a) The purpose of this chapter is to establish centralized licensing and related administrative procedures for the delivery of services in this state by the entities listed in (b) of this section. These procedures are intended to promote safe and appropriate services by setting standards for licensure that will reduce predictable risk; improve quality of care; foster individual and patient rights; and otherwise advance public health, safety, and welfare.

(b) This chapter and regulations adopted under this chapter apply to the following entities:

- (1) ambulatory surgical centers;
- (2) assisted living homes;
- (3) child care facilities;
- (4) child placement agencies;
- (5) foster homes;
- (6) free-standing birth centers;
- (7) home health agencies;
- (8) hospices, or agencies providing hospice services or operating hospice programs;
- (9) hospitals;
- (10) intermediate care facilities for the mentally retarded;
- (11) maternity homes;
- (12) nursing facilities;
- (13) residential child care facilities;
- (14) residential psychiatric treatment centers;
- (15) rural health clinics;
- (16) runaway shelters.

(c) [See delayed effective date note]. The provisions of AS 47.05.300 - 47.05.390, regarding criminal history, criminal history checks, criminal history use standards, and a centralized registry, apply to entities listed in (b) of this section, as provided in AS 47.05.300.

**Sec. 47.32.020. Requirement to obtain a license.**

(a) An entity may not operate a facility described in AS 47.32.010(b) without first obtaining a license under this chapter unless the entity is exempt under regulations adopted under AS 47.32.030.

(b) If an entity encompasses more than one type of activity listed in AS 47.32.010(b), the entity shall apply for and receive a separate license under this chapter before operating that type of activity unless exempt under regulations adopted under AS 47.32.030.

**Sec. 47.32.030. Powers of the department; delegation to municipality.**

(a) The department may

- (1) administer and enforce the provisions of this chapter;
- (2) coordinate and develop policies, programs, and planning related to licensure and operation of entities listed in AS 47.32.010(b) as defined by regulation;
- (3) adopt regulations necessary to carry out the purposes of this chapter, including regulations that
  - (A) establish fees for licensing of each type of entity listed in AS 47.32.010(b);
  - (B) impose requirements for licensure, including standards for license renewal, that are in addition to the requirements of this chapter or of any other applicable state or federal statute or regulation;
  - (C) impose requirements and standards on licensed entities that are in addition to those imposed by this chapter or by any other applicable state or federal statute or regulation, including
    - (i) requirements and standards necessary for an entity or the state to receive money from the department from any source, including federal money;
    - (ii) record-keeping requirements;
    - (iii) reporting requirements; and
    - (iv) requirements and standards regarding health, safety, and sanitation;

- (D) provide for waivers, variances, and exemptions from the requirements of this chapter, including the requirement to obtain a license, if the department finds it necessary for the efficient administration of this chapter; and
- (E) establish requirements for the operation of entities licensed under this chapter;
- (4) investigate
  - (A) entities described in AS 47.32.010(b);
  - (B) applicants for licensure, including individuals named in an application; and
  - (C) other persons that the department has reason to believe are operating an entity required to be licensed under this chapter, or are residing or working in an entity for which licensure has been sought under this chapter; this subparagraph does not apply to persons receiving services from an entity for which licensure has been sought under this chapter;
- (5) inspect and monitor licensed entities for compliance with this chapter, regulations adopted under this chapter, and any other applicable statutes or regulations;
- (6) enter into contracts and agreements necessary to carry out the functions, powers, and duties of the department under this chapter;
- (7) enter into agreements with private entities, municipalities, and individuals to investigate and make recommendations to the department regarding the licensure and monitoring of entities under this chapter;
- (8) require an individual who is or will be operating an entity to complete training related to the operation of the entity;
- (9) waive the application requirements for an entity seeking licensure if the entity submits documentation verifying that it
  - (A) has a license issued by an organization or other agency that has licensing authority under state or federal law if the standards for that licensure are approved by the department under this chapter or regulations adopted under this chapter;
  - (B) has accreditation from a nationally recognized organization if the standards for that accreditation are equal to or more stringent than the standards for licensure under this chapter or regulations adopted under this chapter; or
  - (C) is an entity that federal law does not require to be licensed.
- (b) The department shall delegate the department's authority to regulate child care facilities to a municipality that has adopted an ordinance providing for child care licensing under home rule powers under AS 29.10.010 or as authorized under AS 29.35.200 - 29.35.210. The department shall make the delegation described in this subsection within 90 days after receiving a written request from the municipality to delegate the authority. A municipality receiving a delegation under this subsection may adopt additional requirements for child care facilities operating within the boundaries of the municipality if the requirements meet or exceed the requirements under state law.
- (c) The issuance of a license by the department does not obligate the department to place or maintain an individual in an entity or through an entity, or to provide financial support to an entity.

**Sec. 47.32.040. Application for license.**

A person shall apply to the department for a license under this chapter. The application must be made to the department on a form provided by the department or in a format approved by the department, and must be accompanied by

- (1) any fee established by regulation; and
- (2) documents and information required by regulation.

**Sec. 47.32.050. Provisional license; biennial license.**

(a) The department may issue a provisional license to an entity for which application is made under AS 47.32.040 if, after inspection and investigation, the department determines that the application and the entity meet the requirements of this chapter, regulations adopted under this chapter, and any other applicable statutes or regulations. A provisional license is valid for a period not to exceed one year, except that the department may extend a provisional license for one additional period not to exceed one year.

(b) Before expiration of a provisional license issued under (a) of this section, the department shall inspect and investigate the entity to determine whether the entity is operating in compliance with this chapter, regulations adopted under this chapter, and any other applicable statutes or regulations. After

inspection and investigation under this subsection and before expiration of a provisional license, the department shall issue a biennial license for the entity if the department finds that

(1) the entity meets the requirements for biennial licensure established in this chapter, regulations adopted under this chapter, and other applicable statutes and regulations;

(2) a ground for nonrenewal of a license does not exist; and

(3) any applicable fee has been paid.

(c) The department may place one or more conditions on a provisional or biennial license issued under this section in order to further the purposes of this chapter.

**Sec. 47.32.060. License renewal.**

(a) At least 90 days before expiration of a biennial license, a licensed entity that intends to remain licensed shall submit an application for renewal of the license on a form provided by the department or in a format approved by the department, accompanied by

(1) all documents and information identified in regulation as being required for renewal of the license; and

(2) any fee established by regulation.

(b) Before expiration of a biennial license, the department or its representative may inspect an entity that is the subject of a renewal application to determine whether the entity is operating in compliance with this chapter, regulations adopted under this chapter, and other applicable statutes or regulations. After any inspection and investigation under this subsection and before expiration of the biennial license, the department shall renew a biennial license if the department finds that

(1) the licensed entity meets the requirements for renewal;

(2) a ground for nonrenewal of a license does not exist; and

(3) any applicable fee has been paid.

(c) If an application for renewal of a license is submitted but the department is unable to complete its review of the application before the expiration of the biennial license, the license is automatically extended for six months or until the department completes its review and either approves or denies the application, whichever occurs earlier.

(d) The department may place one or more conditions on a renewed license issued under this section to further the purposes of this section.

(e) The department shall adopt regulations establishing the grounds for nonrenewal of a license for purposes of AS 47.32.050 and this section.

**Sec. 47.32.070. Denial of or conditions on license.**

(a) If the department denies an application for or places conditions on a provisional or biennial license or license renewal, the department shall provide the applicant or entity with a notice of the action by certified mail. The notice must contain a written statement of the reason for the action and information about requesting a hearing under (b) of this section.

(b) An applicant or entity that receives a notice of action under (a) of this section may appeal the department's decision by requesting a hearing within 15 days after receipt of the notice. The appeal must be on a form provided by the department or in a format approved by the department.

**Sec. 47.32.080. Posting of license; license not transferable.**

(a) A license issued under this chapter shall be posted in a conspicuous place on the licensed premises. Any notice of a variance issued by the department shall be posted near the license.

(b) A license issued under this chapter is not transferable unless authorized by the department.

**Sec. 47.32.090. Complaints and investigation.**

(a) A person who believes that an entity has violated an applicable statute or regulation or a condition of a license issued under this chapter may file a verbal or written complaint with the department.

(b) The department may investigate a complaint filed under this section. The department may decline to investigate a complaint if the department reasonably concludes and documents that the complaint is without merit based on information available to the department at the time of the complaint. The

department may consolidate complaints if the department concludes that a single investigation would further the efficient administration of this chapter.

(c) A licensed entity may not take retaliatory action against a person who files a complaint. Except as provided in AS 47.05.350 and AS 47.32.160, a complainant against whom a retaliatory action has been taken may recover treble damages in a civil action upon a showing that the action was taken in retaliation for the filing of a complaint.

**Sec. 47.32.100. Cooperation with investigation.**

An entity shall cooperate with an investigation initiated by the department. An investigated entity shall

(1) permit representatives of the department to inspect the entity; review records, including files of individuals who received services from the entity; interview staff; and interview individuals receiving services from the entity; and

(2) upon request, provide the department with information and documentation regarding compliance with applicable statutes and regulations.

**Sec. 47.32.110. Right of access and inspection.**

(a) A designated agent or employee of the department shall have right of access to an entity

(1) to determine whether an application for licensure or renewal is appropriate;

(2) to conduct a complaint investigation;

(3) to conduct a standard inspection;

(4) to inspect documents, including personnel records, accounts, the building, or the premises;

(5) to interview staff or residents; or

(6) if the department has reasonable cause to believe that the entity is operating in violation of this chapter or the regulations adopted under this chapter.

(b) If an entity denies access, the department may petition the court for an order permitting access, or the department may seek to revoke the entity's license under AS 47.32.140.

(c) Upon petition of the department and after a hearing held upon reasonable notice to the entity, the court shall issue an order to an officer or employee of the department authorizing the officer or employee to enter for any of the purposes described in (a) of this section.

**Sec. 47.32.120. Report.**

(a) Within 10 working days after completing an investigation or inspection under AS 47.32.090 - 47.32.110, the department shall prepare a report of the results of the investigation or inspection and mail a copy of the report to the entity. The report shall include a description of

(1) any violation, including a citation to each statute or regulation that has been violated; and

(2) any enforcement action the department intends to take under AS 47.32.130 or 47.32.140.

(b) An entity that receives a copy of a report under this section may submit a written response to the report to the department. The department may require an entity to submit a response to a report received under this section.

(c) Within 14 days after the entity receives a copy of the report under this section, upon request of the complainant, the department shall provide a copy of the report to the complainant.

**Sec. 47.32.130. Enforcement action: immediate revocation or suspension.**

(a) If the department's report of investigation or inspection under AS 47.32.120 concludes that the department has reasonable cause to believe that a violation of an applicable statute or regulation has occurred that presents an immediate danger to the health, safety, or welfare of an individual receiving services from the entity, the department, without an administrative hearing and without providing an opportunity to cure or correct the violation, may immediately revoke or suspend the entity's license or, if the entity is not licensed under this chapter, may revoke the entity's ability to become licensed under this chapter or to provide services as an entity exempted under this chapter. A suspension or revocation under this subsection takes effect immediately upon initial notice to the entity from the department, is in addition to any enforcement action under AS 47.32.140, and continues until a final determination under (c) of this section or AS 47.32.150.

(b) Notice under this section shall be provided as follows:

(1) the department shall provide initial notice to the entity at the time the department determines that an immediate suspension or revocation is required; initial notice may be oral, except that, if an entity representative is not present at the entity, the department shall post written notice on the front door of the entity; the initial notice must provide information regarding the entity's appeal rights;

(2) the department shall provide formal written notice to the entity within 14 working days after the immediate revocation or suspension decision; formal written notice must include

(A) a copy of the department's report under AS 47.32.120, a statement of the entity's right to submit a written response to the report, and any department requirement that the entity submit a written response to the report;

(B) a description of any enforcement action the department intends to take under AS 47.32.140(d) or (f); and

(C) information regarding the entity's appeal rights.

(c) An entity to which a notice has been provided under this section may appeal the department's decision to impose the enforcement action, including an enforcement action the department intends to take under AS 47.32.140(d) or (f), by filing a written request for a hearing, on a form provided by the department, within 15 days after receipt of the notice. If a hearing is not timely requested under this subsection, the department's notice constitutes a final administrative order for which the department may seek the court's assistance in enforcing.

#### **Sec. 47.32.140. Enforcement actions.**

(a) If the department's report of investigation or inspection under AS 47.32.120 concludes that the department has reasonable cause to believe that a violation of an applicable statute or regulation has occurred, the department shall provide notice to the entity of the violation and an opportunity to cure the violation within a reasonable time specified by the department. The notice must include a copy of the department's report under AS 47.32.120, a statement that the entity may submit a written response to the report, any department requirement that the entity submit a written response to the report, a description of any enforcement action the department intends to take under (d) or (f) of this section, and information regarding the entity's appeal rights.

(b) An entity receiving a notice under (a) of this section, or a notice under AS 47.32.130(b)(2) that contains the information specified in AS 47.32.130(b)(2)(B), shall submit a plan of correction to the department for approval. Once it has cured its violations, the entity shall submit to the department an allegation of compliance. Upon receipt of the allegation of compliance, the department may conduct a follow-up investigation or inspection to determine compliance. The department may take one or more enforcement actions under (d) and (f) of this section regardless of whether the entity achieves compliance under this subsection.

(c) If the department believes that an entity has not voluntarily corrected the violation or entered into a plan of correction with the approval of the department, the department may require that the entity participate in a plan of correction under regulations of the department. Once the entity has cured its violations, it shall submit to the department an allegation of compliance. Upon receipt of the allegation of compliance, the department may conduct a follow-up investigation or inspection to determine compliance. The department may take one or more enforcement actions under (d) and (f) of this section regardless of whether the entity achieves compliance under this subsection.

(d) The department may take one or more of the following enforcement actions under this section:

(1) delivery of a warning notice to the licensed entity and to any additional person who was the subject of the investigation or inspection;

(2) modification of the term or scope of the entity's existing license, including changing a biennial license to a provisional license or adding a condition to the license;

(3) suspension of the entity's operations for a period of time set by the department;

(4) suspension of or a ban on the entity's provision of services to individuals not already receiving services from the entity for a period of time set by the department;

(5) nonrenewal of the entity's license;

(6) revocation of the entity's license or, if the entity is not licensed under this chapter, revocation of the entity's ability to become licensed under this chapter;

(7) issuance of an order requiring closure, immediate or otherwise, of the entity regardless of whether the entity is licensed or unlicensed;

(8) denial of payments under AS 47.07 for the entity's provision of services to an individual not already receiving services from the entity;

(9) assumption of either temporary or permanent management of the entity or pursuit of a court-ordered receiver for the entity;

(10) reduction of the number of individuals receiving services from the entity under the license;

(11) imposition of a penalty authorized under law;

(12) inclusion in the registry established under AS 47.05.330;

(13) requirement that the entity prepare and submit a plan of correction.

(e) The department may not take action under (d)(9) of this section unless the commissioner has reasonable cause to believe that continued management by the entity while the entity is attempting to cure a violation would be injurious to the health, safety, or welfare of an individual who is receiving a service from the entity.

(f) In addition to any other enforcement actions the department may take under this section, the department may assess a civil fine against an entity for a violation of an applicable statute or regulation, taking into account the type and size of the entity and the type and severity of the violation. A fine assessed under this subsection may not exceed \$2,500 a day for each day of violation for a continuing violation or \$25,000 for a single violation.

(g) An entity to which a notice has been provided under this section regarding an enforcement action under (d) or (f) of this section may appeal the department's decision to impose the enforcement action by filing a written request for a hearing, on a form provided by the department, within 15 days after receipt of the notice of the enforcement action.

(h) An enforcement action under (d) or (f) of this section may not be imposed until

(1) the time period for requesting a hearing under AS 47.32.130(c) or under (g) of this section, as applicable, has passed without a hearing being requested; or

(2) a final agency decision has been issued following a hearing requested under AS 47.32.130(c) or under (g) of this section, as applicable.

(i) If a hearing is not timely requested under AS 47.32.130(c) or under (g) of this section, as applicable, the department's notice regarding an enforcement action under (d) or (f) of this section constitutes a final administrative order. The department may seek the court's assistance in enforcing the final administrative order.

(j) An entity against which an enforcement action under (d) or (f) of this section has been taken may not apply for a license or license renewal until after the time period set by the department in its final administrative order under AS 47.32.130(c), this section, or AS 47.32.150, as applicable. If a time period has not been set, a final administrative order against the entity has the effect of a permanent revocation, and the entity may not apply for a license or license renewal. If the ownership, control, or management of an entity changes, the department may allow the entity to seek licensure if the entity submits documents showing the change.

(k) Assessment of a civil fine under this section does not preclude imposition of a criminal penalty under AS 47.32.170.

#### **Sec. 47.32.150. Hearings.**

(a) Upon receipt of a timely request for a hearing by an entity regarding an enforcement action under AS 47.32.130(a) or 47.32.140(d)(3), (5), (6), (7), or (9), the department shall request the chief administrative law judge appointed under AS 44.64.020 to appoint an administrative law judge employed or retained by the office of administrative hearings to preside over a hearing conducted under this section. AS 44.62.330 - 44.62.630 and AS 44.64.060 apply to the hearing.

(b) Upon receipt of a timely request for a hearing by an entity regarding an enforcement action under AS 47.32.070 or 47.32.140(d)(1), (2), (4), (8), (10), (11), (12), or (13), the department shall conduct a hearing in front of an officer appointed by the commissioner. A hearing under this subsection may be conducted on the record, in an informal manner, and may not be conducted under AS 44.62 or AS 44.64. The appointed hearing officer may be a state employee.

(c) The decision following a hearing conducted under (a) or (b) of this section constitutes a final agency administrative order.

(d) A hearing conducted under this section shall take place within 120 days after the department's receipt of the request for hearing. A hearing may be held on an expedited basis upon a showing of good

cause. An expedited hearing shall be held within 60 days after the department's receipt of the request for a hearing.

**Sec. 47.32.160. Immunity.**

(a) The department, its employees, and its agents are not liable for civil damages as a result of an act or omission in the licensure process, the monitoring of a licensed entity, or any activities under this chapter.

(b) A volunteer who works for a hospice program licensed under this chapter is not liable for damages for personal injury, wrongful death, or property damage for an act or omission committed in the course of hospice-related duties unless the act or omission constitutes gross negligence, recklessness, or intentional misconduct.

**Sec. 47.32.170. Criminal penalty.**

A person who intentionally or with criminal negligence violates a provision of this chapter or a regulation adopted under this chapter related to the health and safety of persons served by an entity required to comply with this chapter is guilty of a class B misdemeanor.

**Sec. 47.32.180. Confidentiality; release of certain information.**

(a) Except as otherwise provided by law, the following are confidential and may not be disclosed to the public without a court order: complaints; investigations; inspections; records related to a complaint, investigation, or inspection; and the identity of a complainant and of individuals receiving services from an entity.

(b) With the exception of information that identifies a complainant or a recipient of services from an entity, a copy of the department's report of investigation or inspection under AS 47.32.120, an entity's written response to the report, and information regarding any department imposition of an enforcement action under AS 47.32.130 or 47.32.140 are public records under AS 40.25. The department shall make this information available to the public for inspection and copying within timeframes specified in AS 40.25 or regulations adopted under AS 40.25 after the

(1) entity receives its copy of the report of investigation under AS 47.32.120, if the department has determined that an enforcement action under AS 47.32.130 or 47.32.140 will not be taken regarding the entity;

(2) department's notice of enforcement action under AS 47.32.130 or 47.32.140 becomes a final administrative order without a hearing under AS 47.32.130(c) or 47.32.140(i); or

(3) issuance of a decision following a hearing under AS 47.32.150.

**Sec. 47.32.190. Access to information.**

Notwithstanding any contrary provision of law, the divisions of the department assigned public health and public assistance functions shall have access to any information compiled or retained by other divisions within the department, regardless of the nature of the information or whether the information is considered confidential, in order to assist in administering the provisions of this chapter.

**Sec. 47.32.200. Notice of changes from an entity.**

(a) An entity shall provide the department with written notice of a change of mailing address at least 14 days before the effective date of the change.

(b) An entity shall notify the department within 24 hours after having knowledge that an administrator, employee, volunteer, or household member, as required by the type of entity under department regulations, has been

(1) convicted of, has been charged by information or complaint with, or is under indictment or presentment for an offense listed in regulations adopted under AS 47.05.310 or a law or ordinance of this or another jurisdiction with similar elements; or

(2) found to have neglected or abused a child as described in AS 47.10.

(c) An entity shall notify the department within 24 hours after having knowledge of any allegation or suspicion of abuse, neglect, or misappropriation of money or other property of an individual receiving services from the entity. The entity shall conduct an investigation and make a written report to the department within five days following notification to the department under this subsection.

(d) Not less than 20 days before the effective date of a decision to relinquish the entity's license, the entity shall notify the department of the decision.

(e) Not more than one day after signing a contract for sale of the licensed entity, the entity shall notify the department of the sale.

(f) Not less than 30 days before an entity wishes to change the location of the entity, the entity shall notify the department of the change.

**Sec. 47.32.900. Definitions.**

In this chapter,

(1) "ambulatory surgical center" means a facility that  
(A) is not a part of a hospital or a physician's general medical practice; and  
(B) operates primarily for the purpose of providing surgical services to patients who do not require hospitalization;

(2) "assisted living home"  
(A) means a residential facility that serves three or more adults who are not related to the owner by blood or marriage, or that receives state or federal payment for services regardless of the number of adults served; the department shall consider a facility to be an assisted living home if the facility

(i) provides housing and food services to its residents;

(ii) offers to provide or obtain for its residents assistance with activities of daily living;

(iii) offers personal assistance as defined in AS 47.33.990; or

(iv) provides or offers any combination of these services;

(B) does not include

(i) a correctional facility;

(ii) an emergency shelter;

(iii) a program licensed under AS 47.10.310 for runaway minors;

(iv) a type of entity listed in AS 47.32.010(b)(5), (8), (9), (10), (11), or (12);

(3) "child placement agency" means an agency that arranges for placement of a child

(A) in a foster home, residential child care facility, or adoptive home; or

(B) for guardianship purposes;

(4) "commissioner" means the commissioner of health and social services;

(5) "department" means the Department of Health and Social Services;

(6) "entity" means an entity listed in AS 47.32.010(b);

(7) "foster home" means a place where the adult head of household provides 24-hour care on a continuing basis to one or more children who are apart from their parents;

(8) "free-standing birth center" means a facility that is not a part of a hospital and that provides a birth service to maternal clients;

(9) "frontier extended stay clinic" means a rural health clinic that is authorized to provide 24-hour care to one or more individuals;

(10) "home health agency" means a public agency or private organization, or a subdivision of a public agency or private organization, that primarily engages in providing skilled nursing services in combination with physical therapy, occupational therapy, speech therapy, or services provided by a home health aide to an individual in the individual's home, an assisted living home, or another residential setting; in this paragraph,

(A) "public agency" means an agency operated by the state or a local government;

(B) "subdivision" means a component of a multi-function facility or home health agency, such as the home health care division of a hospital or the division of a public agency, that independently meets the requirements for licensure as a home health agency;

(11) "hospice" or "agency providing hospice services or operating hospice programs" means a program that provides hospice services;

(12) "hospice services" means a range of interdisciplinary palliative and supportive services

(A) provided in a home or at an inpatient facility to persons who are terminally ill and to those persons' families in order to meet their physical, psychological, social, emotional, and spiritual needs; and

(B) based on hospice philosophy; for purposes of this subparagraph, "hospice philosophy" means a philosophy that is life affirming, recognizes dying as a normal process of living, focuses on maintaining the quality of remaining life, neither hastens nor postpones death, strengthens the client's role in making informed decisions about care, and stresses the delivery of services in the least restrictive setting possible

and with the least amount of technology necessary by volunteers and professionals who are trained to help a client with the physical, social, psychological, spiritual, and emotional issues related to terminal illness so that the client can feel better prepared for the death that is to come;

(13) "hospital" means a public or private institution or establishment devoted primarily to providing diagnosis, treatment, or care over a continuous period of 24 hours each day for two or more unrelated individuals suffering from illness, physical or mental disease, injury or deformity, or any other condition for which medical or surgical services would be appropriate; "hospital" does not include a frontier extended stay clinic;

(14) "intermediate care facility for the mentally retarded" has the meaning given in 42 C.F.R. 440.150;

(15) "licensed entity" means an entity that has a license issued under this chapter;

(16) "maternity home" means a place of residence the primary function of which is to give care, with or without compensation, to pregnant individuals, regardless of age, or that provides care, as needed, to mothers and their newborn infants;

(17) "nursing facility" means a facility that is primarily engaged in providing skilled nursing care or rehabilitative services and related services for those who, because of their mental or physical condition, require care and services above the level of room and board; "nursing facility" does not include a facility that is primarily for the care and treatment of mental diseases;

(18) "residential child care facility" means a place, staffed by employees, where one or more children who are apart from their parents receive 24-hour care on a continuing basis;

(19) "residential psychiatric treatment center" means a secure or semi-secure facility, or an inpatient program in another facility, that provides, under the direction of a physician, psychiatric diagnostic, evaluation, and treatment services on a 24-hour-a-day basis to children with severe emotional or behavioral disorders;

(20) "runaway shelter" means a facility housing a runaway child;

(21) "rural health clinic"

(A) means a facility or clinic that is authorized to provide health care services and is located in a rural area;

(B) includes a frontier extended stay clinic;

(C) does not include a rehabilitation agency or a facility primarily for the care and treatment of mental diseases.

### **Article 3. Criminal History; Registry.**

**Sec. 47.05.300. Applicability.** (a) The provisions of AS 47.05.310 - 47.05.390 apply to any individual or entity that is required by statute or regulation to be licensed or certified by the department or that is eligible to receive payments, in whole or in part, from the department to provide for the health, safety, and welfare of persons who are served by the programs administered by the department.

(b) Those individual service providers subject to AS 47.05.310 - 47.05.390 under (a) of this section include

(1) public home care providers described in AS 47.05.017;

(2) providers of home and community-based waiver services financed under AS 47.07.030(c); and

(3) case managers to coordinate community mental health services under AS 47.30.530.

**Sec. 47.05.310. Criminal history; criminal history check; compliance.** (a) If an individual has been charged with, convicted of, found not guilty by reason of insanity for, or adjudicated as a delinquent for, a crime that is inconsistent with the standards for licensure or certification established by the department by regulation, that individual may not own an entity, or be an officer, director, partner, member, or principal of the business organization that owns an entity. In addition, an entity may not

(1) allow that individual to operate the entity;

(2) hire or retain that individual at the entity as an employee, independent contractor, or unsupervised volunteer of the entity;

(3) allow that individual to reside in the entity if not a recipient of services; or

(4) allow that individual to be present in the entity if the individual would have regular contact with individuals who receive services from the entity, unless that individual is a family member of or visitor of an individual who receives services from the entity.

(b) The department may not issue or renew a license or a certification for an entity that is in violation of (a) of this section or that would be in violation based on the information received as part of the application process.

(c) The department may not issue or renew a license or certification for an entity if an individual is applying for a license, license renewal, certification, or certification renewal for the entity and that

(1) individual has been found by a court or agency of this or another jurisdiction to have neglected, abused, or exploited a child or vulnerable adult under AS 47.10, AS 47.24, or AS 47.62 or a substantially similar provision in another jurisdiction, or to have committed medical assistance fraud under AS 47.05.210 or a substantially similar provision in another jurisdiction; or

(2) individual's name appears on the centralized registry established under AS 47.05.330 or a similar registry of this state or another jurisdiction.

(d) An entity shall provide to the department a release of information authorization for a criminal history check for an individual who is not a recipient of services from the entity and, after the entity has been issued a license, license renewal, certification, or certification renewal by the department,

(1) who intends to become an owner of the entity, or an officer, director, partner, member, or principal of the business organization that owns the entity;

(2) whom the entity intends to hire or retain as the operator of the entity's business;

(3) whom the entity intends to hire or retain as an employee, independent contractor, or unsupervised volunteer of the entity; or

(4) who will be present in the entity or at the places of operation of entity, and would have regular contact with individuals who receive services from the, but who is not a family member or visitor of an individual who receives services from the entity.

(e) An individual for whom a release of information authorization has been provided to the department shall submit the individual's fingerprints to the department, with the fee established under AS 12.62.160, for a report of criminal justice information under AS 12.62 and for submission by the Department of Public Safety to the Federal Bureau of Investigation for a national criminal history record check. The Department of Public Safety shall provide the report of criminal justice information and the results of the national criminal history record check to the department for its use in considering an application for a license, license renewal, certification, or renewal, or in considering other approval or selection regarding an entity, for compliance with the standards established in this section. For purposes of obtaining access to criminal justice information maintained by the Department of Public Safety under AS 12.62, the department is a criminal justice agency conducting a criminal justice activity. The department may waive the requirement for fingerprint submission if an individual is unable to provide fingerprints due to a medical or physical condition that is documented by a licensed physician.

(f) The provisions of this section do not apply if the department grants an exception from a requirement of (a) - (e) of this section under a regulation adopted by the department.

(g) The department shall adopt regulations listing those criminal offenses that are inconsistent with the standards for licensure or certification by the department.

(h) An individual service provider is subject to the provisions of (a) - (g) of this section as if the individual service provider were an entity subject to those provisions.

(i) For purposes of (b) and (c) of this section, in place of nonissuance or nonrenewal of a license or certification, an entity or individual service provider that is not required to be licensed or certified by the department or a person wishing to become an entity or individual service provider that is not required to be licensed or certified by the department is instead ineligible to receive a payment, in whole or in part, from the department to provide for the health, safety, and welfare of persons who served by the programs administered by the department if the entity, individual service provider, or person

(1) is in violation of (a) of this section or would be in violation based on information received by the department as part of an application, approval, or selection process;

(2) has been found by a court or agency of this or another jurisdiction to have neglected, abused, or exploited a child or vulnerable adult under AS 47.10, AS 47.24, or AS 47.62 or a substantially similar provision in another jurisdiction, or to have committed medical assistance fraud under AS 47.05.210 or a substantially similar provision in another jurisdiction; or

(3) appears on the centralized registry established under AS 47.05.330 or a similar registry of this state or another jurisdiction.

**Sec. 47.05.320. Criminal history use standards.** The department shall by regulation establish standards for the consideration and use by the department, an entity, or an individual service provider of the criminal history of an individual obtained under AS 47.05.310.

**Sec. 47.05.330. Centralized registry.** (a) The department shall by regulation provide for a centralized registry to facilitate the licensing or certification of entities and individual service providers, the authorization of payments to entities or individual service providers by the department, and the employment of individuals by entities and individual service providers.

(b) Except for the name of each victim being redacted before the information is placed on the registry, the registry shall consist of the following information for an entity or individual service provider, an applicant on behalf of an entity or individual service provider, or an employee or unsupervised volunteer of an entity or individual service provider:

(1) decisions, orders, judgments, and adjudications finding that the applicant, employee, or unsupervised volunteer committed

(A) abuse, neglect, or exploitation under AS 47.10, AS 7.24, AS 47.62, or a substantially similar provision in another jurisdiction; or

(B) medical assistance fraud under AS 47.05.210 or a substantially similar provision in another jurisdiction;

(2) orders under a state statute or a substantially similar provision in another jurisdiction that a license or certification of the entity or individual service provider to provide services related to the health, safety, and welfare of persons was denied, suspended, revoked, or conditioned.

(c) As a condition for applying for licensure or certification of an entity or individual service provider, or for payment to an entity or individual service provider by the department, an applicant must agree to submit timely to the registry the information required under this section relating to the entity, any individual, the applicant, employees, and unsupervised volunteers of the entity or individual service provider.

(d) Within 24 hours of a court decision, order, judgment, or adjudication that an entity, individual service provider, or employee or unsupervised volunteer of an entity or individual service provider committed an act listed under (b) of this section, the entity, individual service provider, or employee or unsupervised volunteer of an entity or individual service provider shall report the court action to the department.

(e) Within 24 hours of receiving notice of an allegation that an employee, unsupervised volunteer, or former employee or unsupervised volunteer of an entity or individual service provider committed an act listed under (b) of this section within the past 10 years, the entity or individual service provider shall report the allegation to the department.

(f) The department shall prescribe by regulation the form or format by which an applicant shall submit required information to the registry.

(g) Notwithstanding any contrary provision of law, the department may also submit information described in this section to the registry. An entity or individual that is exempt from department licensure or certification and that does not receive money from the department for its services may voluntarily submit information described in this section to the department for placement in the registry.

(h) Information contained in the registry is confidential and is not subject to public inspection and copying under AS 40.25.110 - 40.25.125. However, information contained in the registry may be released to entities, individual service providers, and governmental agencies authorized and in a manner provided under this section and regulations adopted under this section.

(i) A person is presumed to be acting in good faith and is immune from civil and criminal liability if the person

(1) makes a report of medical assistance fraud, abuse, neglect, or exploitation;

(2) submits information to the registry; or

(3) fails to hire or retain an employee or unsupervised volunteer because the employee or unsupervised volunteer is included in the registry.

(j) A person about whom information is placed in the registry shall be notified of the placement by the department and may request the department to delete or modify the information to correct inaccuracies. The department shall investigate the request and make necessary deletions or modifications if the

department finds no relationship between the information placed in the registry and the risk of harm to the entity's clientele.

**Sec. 47.05.340. Regulations.** The department shall adopt regulations to implement AS 47.05.300 - 47.05.390.

**Sec. 47.05.350. Use of information; immunity.** An entity or individual service provider that obtains information about an employee under a criminal history check under AS 47.05.310 may use that information only as provided for in regulations adopted by the department under AS 47.05.320. However, if an entity or individual service provider reasonably relies on the information provided under the regulations adopted by the department to deny employment to an individual who was selected for hire as an employee, including during a period of provisional employment, the entity or individual service provider is not liable in an action brought by the individual based on the employment determination resulting from the information.

**Sec. 47.05.390. Definitions.** In AS 47.05.300 - 47.05.390, unless the context otherwise requires,

- (1) "criminal history records" has the meaning given in AS 12.64.010;
- (2) "criminal justice activity" has the meaning given in AS 12.62.900;
- (3) "criminal justice agency" has the meaning given in AS 12.62.900;
- (4) "criminal justice information" has the meaning given in AS 12.62.900;
- (5) "department" means the Department of Health and Social Services;
- (6) "entity" means an entity listed in AS 47.32.010(b) and includes an owner, officer, director, member or partner of the entity;
- (7) "individual service provider" means an individual described in AS 47.05.300(a), and includes those listed in AS 47.05.300(b);
- (8) "license" includes a provisional license;
- (9) "unsupervised" means that an individual who is licensed under AS 47.32, after submitting a criminal history background check, is not physically present to observe the volunteer at the entity.

\* **Sec. 62.** Sections 15, 19, and 35 of this Act take effect on the effective date of the regulations adopted by the Department of Health and Social Services under sec. 58(b) of this Act, or March 1, 2006, whichever is earlier, but in no event earlier than July 2, 2005.