

**REGULATIONS FOR GROUP BOARDING HOMES AND RESIDENTIAL CENTERS
FOR CHILDREN AND YOUTH**

K.A.R. 28-4-268. Definitions.

- (a) “Basement” means each area with a floor level more than 30 inches below ground level on all four sides.
- (b) “Child” means each individual under 16 years of age.
- (c) “Corporal punishment” means each activity directed toward modifying a child's behavior by means of adverse physical contact such as spanking with the hand or an implement, slapping, swatting, pulling hair, or any similar activity.
- (d) “Developmental disability” means any physical, emotional, or mental disability which constitutes a substantial handicap to the individual as defined in public law 91-517.
- (e) “Discipline” means the on-going process of helping children develop inner control so that they can manage their own behavior in a socially-approved manner.
- (f) “Emergency care” means residential care not to exceed 30 days.
- (g) “Emergency shelter” means residential care and protection not to exceed 30 days.
- (h) “Facility” means a group boarding home or residential center that provides residential care.
- (i) “Group boarding home” means a non-secure facility providing residential care for not less than five nor more than ten persons unrelated to the caregivers, and includes emergency shelters and maternity homes.
- (j) “Isolation” means removal of a resident from other residents to a separate locked room or quarters.
- (k) “License” means a document issued by the Kansas department of health and environment which authorizes a licensee to operate and maintain a group boarding home or residential center.
- (l) “Living unit” means a group of residents living together as an established unit within a residential center.
- (m) “Maternity care” means residential care which includes services to women during pregnancy.
- (n) “Maternity home” means a facility whose primary function is to provide services to women during pregnancy.

- (o) “Non-secure facility” means a facility which provides the resident access to the surrounding community.
- (p) “Placing agent” means the person, social agency or court possessing the legal right to place a child.
- (q) “Program” means the comprehensive and coordinated sets of activities and services providing for the care, protection and development of the residents.
- (r) “Resident” means any child, youth or pregnant woman accepted for care in the residential facility.
- (s) “Residential care” means 24-hour care.
- (t) “Residential center” means a non-secure facility which provides residential care for more than 10 residents unrelated to the caregivers, and includes emergency shelters and maternity homes.
- (u) “Temporary care” means residential care not to exceed 90 days.

(Authorized by and implementing K.S.A. 65-508; effective, T-86-46, Dec. 18, 1985; effective May 1, 1986.)

K.A.R. 28-4-269. Licensing procedures.

- (a) A person shall not conduct a group boarding home or residential center for children under 16 years of age unless a license is issued by the secretary.
- (b) Each person desiring to conduct a group boarding home or residential center shall submit the following:
 - (1) An application for a license, which shall be submitted on forms supplied by the department; and
 - (2) the license fee as specified in K.S.A. 65-505, and amendments thereto.
- (c) A license shall not be issued until all of the following information is submitted:
 - (1) A written proposal that details the following:
 - (A) The purpose of the facility;
 - (B) the administration plan for the program, including an organizational chart;
 - (C) the financing plan for the program;
 - (D) staffing for the program, including job descriptions;

- (E) the services to be offered, including the number, age range, and sex of residents to be served; and
- (F) admission criteria and a description of the level of care to be provided to the residents through either of the following:
 - (i) Direct services; or
 - (ii) agreements with specified community resources;
- (2) a copy of the written notification provided to the school district where the facility is located, including the following:
 - (A) The anticipated opening date;
 - (B) the number, age range, and anticipated special education needs of the residents to be served; and
 - (C) a request for educational services or a request for approval of proposed alternative formal schooling to be provided by the facility as required by K.A.R. 28-4-274(d);
- (3) documentation that the notification required by paragraph (c)(2) was received by the school district at least 90 days before the planned opening date;
- (4) floor plans for each building to be used as a group boarding home or residential center; and
- (5) documentation of the state fire marshal's approval.
- (d) The proposal required by paragraph (c)(1) shall be approved by the secretary before a license is issued.
- (e) A license shall be issued by the secretary if the applicant is in compliance with the requirements of K.S.A. 65-501 through 65-516, and amendments thereto, and the regulations promulgated pursuant to those statutes, and has made full payment of the license fee.
- (f) Each licensee shall notify the secretary and obtain written approval from the secretary before making any change in any of the following:
 - (1) The admission criteria;
 - (2) the use of the buildings; or
 - (3) the program, including the level of care provided through either of the following:
 - (A) Direct services; or

- (B) agreements with specified community resources.
- (g) The notification of a proposed change in the program, the admission criteria, or the level of care of the residents shall include the following:
 - (1) A copy of the written notification of the proposed change that was submitted to the school district where the facility is located; and
 - (2) documentation that the notification required in paragraph (g)(1) was received by the school district at least 90 days before the anticipated date of any proposed change.
- (h) Renewals. Each licensee who wishes to renew the license shall apply for renewal of the license annually on forms supplied by the department and shall submit the fee as specified in K.S.A. 65-505, and amendments thereto.
- (i) Request to withdraw an application or terminate a license.
 - (1) Each applicant shall inform the department if the applicant desires to withdraw the application. The withdrawal of the application shall be acknowledged by the department in writing. A new application and a new fee shall be required before opening a facility. No applicant shall admit a child before the applicant receives a license.
 - (2) Each licensee shall inform the department if the licensee desires to terminate the license. The licensee shall return the license to the department with the request to terminate the license. The request and the license shall be accepted by the department. The licensee and other appropriate agencies shall be notified by the department that the license is terminated and that the facility is considered closed. The former licensee shall submit a new application and fee to the department if that person desires to obtain a new license. That person shall not reopen the facility or admit any child before receiving a new license.
- (j) A new application and fee shall be submitted for each change of ownership, sponsorship, or location.
- (k) Grievance procedures.
 - (1) Each applicant or licensee receiving notice of denial or revocation of license shall be notified of the right to request an administrative hearing by the secretary and subsequently of the right of appeal to the district court.
 - (2) If an applicant or licensee disagrees with a notice documenting any finding of noncompliance with licensing statutes or regulations, the applicant or licensee may request an explanation of the finding from the secretary's designee. If the explanation is not satisfactory to the applicant or licensee, the applicant or licensee may submit a written request to the secretary for reconsideration of the finding. The written request shall identify the finding in question and explain

why the applicant or licensee believes that the finding should be changed. This request shall be made to the secretary within 10 days after receiving the explanation.

(l) Exceptions.

- (1) An applicant or a licensee may submit a written request for an exception to a regulation to the secretary. An exception may be granted if the secretary determines the exception to be in the best interest of a child or children and their families, and if statutory requirements are not violated.
- (2) Each licensee shall post with the license the written notice from the secretary stating the nature and duration of the exception.

(m) Amended license.

- (1) Each licensee shall submit a request for an amended license and a \$35.00 fee to the secretary if the licensee desires to make any change in any of the following:
 - (A) The license capacity;
 - (B) the age of children to be served; or
 - (C) the living units.
- (2) Each request for a change in the license capacity or the age range of children to be served shall include the following:
 - (A) A copy of the written notification of the proposed change that was submitted to the school district where the facility is located; and
 - (B) documentation that the notification required by paragraph (m)(2)(A) was received by the school district at least 90 days before the anticipated date of any proposed change.
- (3) The licensee shall make no change unless permission is granted, in writing, by the secretary. If granted, the licensee shall post the amended license, and the prior license shall no longer be in effect.

(n) Waiver of 90-day notification to the local school district. The 90-day notification to the local school district may be waived by the secretary upon receipt of a written agreement by the local school district.

This regulation shall be effective on and after July 30, 2002. (Authorized by K.S.A. 2001 Supp. 65-508; implementing K.S.A. 2001 Supp. 65-501, 65-504, 65-505, 65-506, and 65-508; effective May 1, 1986; amended, T-87-34, Nov. 19, 1986; amended May 1, 1987; amended, T-28-4-1-02, April 1, 2002; amended July 30, 2002.)

K.A.R. 28-4-270. Terms of license.

- (a) The maximum number and age range of residents who may be cared for in each facility shall be specified on the license.
- (b) Each facility license issued shall be valid only for the firm, corporation or association and the address appearing on the license.
- (c) The license does not give permission for placement of children.
- (d) Activities which would interfere with the care of the residents shall not be carried out in the facility by child care personnel.
- (e) Advertisements shall conform to the statement of services as given on the application. Claims for specialized services shall not be made unless the facility is staffed and equipped to offer the services, or arrangements have been made for services as outlined in K.A.R. 28-4-271(e)(4). A general claim of "state approval" shall not be made unless the facility has obtained a license issued by the Kansas department of health and environment.

(Authorized by and implementing K.S.A. 65-508; effective May 1, 1986.)

K.A.R. 28-4-271. Administration.

- (a) Organization. The facility shall have plans and policies of organization and administration clearly defining legal responsibility, administrative authority and responsibility for comprehensive services. Changes in policies shall be submitted to the appropriate agency for licensing approval.
- (b) Finances.
 - (1) The facility shall have sound and sufficient finances to insure licensing compliance and effective services. A license for an additional facility operated by a licensee shall not be issued until all existing facilities operated by the licensee are in compliance with licensing regulations.
 - (2) The facility shall be covered by liability and casualty insurance.
 - (3) Residents' personal money shall be kept separate from the facility's funds and individual accounts shall be kept.
 - (4) Residents shall not be exploited in campaigns or publicity efforts to raise funds.
 - (5) Solicitation of funds by charitable organizations shall be made in Kansas only after compliance with K.S.A. 17-1740.

- (c) Personnel policies.
 - (1) The facility shall have written personnel policies and operating practices which shall be made available to its staff members. The various services of the facility and the duties and responsibilities of each staff member shall be clearly defined and followed.
 - (2) A personnel record shall be maintained on each staff member and made available to the staff member on request.
- (d) Child care personnel.
 - (1) The facility shall have an administrator whose responsibility is administration of the program.
 - (2) There shall be adequate staff 18 years of age and older to supervise the residents at all times, and to provide for their physical, social, emotional and educational needs. There shall be an additional adult available in case of emergency.
 - (3) Each facility shall have a minimum of one child care staff member on duty and available for every seven residents during waking hours and a minimum of one for every ten during sleeping hours. When residents are on the premises at least one staff member shall be physically present. Children of the staff shall be included in the ratio if living in the facility.
 - (4) Child care personnel shall be provided for the relief of regular staff.
 - (5) Substitute staff shall be available to work in case of illness or emergency of regular or relief staff.
- (e) Staff qualifications.
 - (1) Administrator. The administrator shall have previous administrative experience and shall have a working knowledge of child development principles.
 - (A) Each administrator of a residential center shall have at least a bachelor's degree.
 - (B) Each administrator of a group boarding home shall have at least a high school diploma, or its equivalent.
 - (C) Each administrator shall be familiar with statutes and regulations governing group boarding homes or residential centers.
 - (2) Child care staff.
 - (A) Child care staff with direct responsibility for the residents shall have at least a high school diploma or its equivalent.

- (B) Child care staff shall practice accepted methods of child care.
 - (C) Child care staff shall have a working knowledge of all agency policies and procedures and of the current status of residents.
- (3) Relief staff.
- (A) Relief staff shall practice accepted methods of child care.
 - (B) Relief staff with direct responsibility for the residents shall have at least a high school diploma or its equivalent.
- (4) Substitute staff shall practice accepted methods of child care.
- (5) Child care personnel including substitute staff, shall have a working knowledge of policies and procedures relative to discipline, child abuse reporting and health.
- (6) Child care personnel, excluding substitute staff, shall attend a minimum of 18 hours of training annually, to improve their knowledge, understanding and practice of child development principles.
- (7) Food service staff shall:
- (A) Have a knowledge of nutritional needs of children and youth;
 - (B) understand quantity food preparation and service;
 - (C) practice sanitary methods of food handling and storage;
 - (D) be sensitive to individual, cultural and religious food preferences of the residents; and
 - (E) be willing to work with the administrator in planning learning experiences for the residents relative to nutrition.
- (8) Consultant services. The facility shall arrange for consultation by social workers, physicians, psychologists, psychiatrists, teachers, nurses, speech therapists and other consultants as required to meet the needs of the residents served.

(Authorized by and implementing K.S.A. 65-508; effective May 1, 1986; amended May 1, 1987.)

K.A.R. 28-4-272. Records.

- (a) Resident's records.
 - (1) A report of residents in care shall be submitted quarterly to the Kansas department of social and rehabilitation services on forms supplied by the Kansas department of health and environment.

- (2) An individual record shall be kept on each resident. Each record shall include:
 - (A) Date of admission and discharge;
 - (B) a health assessment record, an immunization record and a dental record on forms supplied by the Kansas department of health and environment;
 - (C) consent for emergency medical treatment signed by a parent or legal guardian or other person authorized by statute to consent as custodian; and
 - (D) each accident report.
- (3) Each facility providing treatment or social service programs shall have a social service record for each resident. The record shall include a treatment plan and progress report made every three months.
- (4) There shall not be disclosure of confidential records or information regarding the resident.
- (5) Each facility providing emergency care shall be exempt from K.A.R. 28-4-272(a)(2) and (3).
- (b) Staff records. A file shall be kept at the administrative office for each employee. Duplicate health certificates shall be on file at the facility. The file shall include:
 - (1) Terms of employment;
 - (2) education and experience;
 - (3) health certificates;
 - (4) work references; and
 - (5) a statement signed by the employee that the employee has read the following documents and agrees to abide by them:
 - (A) Discipline policies;
 - (B) child abuse reporting policies; and
 - (C) health policies.

(Authorized by and implementing K.S.A. 65-508; effective May 1, 1986.)

K.A.R. 28-4-273. Admission policies.

- (a) Written admission policies shall be prepared by the applicant in accordance with goals and purposes of the facility. The policies shall include a nondiscrimination statement.

- (b) Children under three years of age shall be given care in a residential facility only as follows:
 - (1) To provide emergency care for not more than 30 days; or
 - (2) To keep siblings together for a maximum of 90 days.
- (c) Any facility not specifically designed to serve developmentally disabled persons shall admit residents with special problems only as follows:
 - (1) Any person with mild development disabilities shall be enrolled at the discretion of the licensee.
 - (2) Any person showing significant developmental disabilities, including severe mental retardation, emotional disturbance or physical handicap, shall be enrolled at the discretion of the licensee following a developmental evaluation of the person and approval from the Kansas department of health and environment and the Kansas state department of social and rehabilitation services.
- (d) Any child or youth who requires long term nursing care shall not be kept in the facility.
- (e) Placement agreements between placing agent and facility.
 - (1) The goal of residential placement shall be to return the resident to the resident's home when such a placement is in the resident's best interest.
 - (2) There shall be a written policy regarding the facility's responsibility to the resident's family while the resident is in placement.
 - (3) There shall be a written agreement at the time of placement between the placing agent and the facility setting forth the terms of placement and removal with the understanding that the person or agency having custody shall retain the right to withdraw the resident. Parental rights and responsibilities shall be clearly defined.
 - (4) Written visitation and communication policies shall be available to all residents, parents, legal guardians, and legal representatives.
 - (5) The placing agency or other person responsible under the law for the care and custody of each resident shall make arrangements at the time of placement for the financial responsibility for services of the facility and for necessary specialized services.
 - (6) Acceptance of out-of-state residents shall be made according to Kansas laws and interstate compact procedures.

- (7) Any facility shall not accept legal guardianship of a child unless the facility is licensed as a child placing agency.

(Authorized by and implementing K.S.A. 65-508; effective May 1, 1986.)

K.A.R. 28-4-274. Services.

- (a) Services shall be provided in accordance with the stated purpose and goals of the facility.
- (b) Social services. Treatment and social service facilities shall have a specific plan for the provision of social services for each resident in care. These services shall be provided by a private or public social agency or through a licensed social worker on the facility staff.
- (c) Discipline.
 - (1) Each resident shall be treated as a member of the group during the period of care, sharing privileges and duties of the household according to age and capacity, and receiving care and training according to special abilities and limitations.
 - (2) There shall be a written discipline policy outlining methods of guidance appropriate to the ages of the residents. Residents shall not be permitted to discipline other residents.
 - (3) Prohibited punishment. Punishment or a threat of punishment which is humiliating, frightening or physically harmful to the resident shall be prohibited. Prohibited methods of punishment include:
 - (A) Corporal punishment;
 - (B) verbal abuse or derogatory remarks about the child or the child's family;
 - (C) binding or tying to restrict movement, or enclosing in a confined space such as a closet, locked room, box, or similar cubicle;
 - (D) withholding or forcing foods; or
 - (E) isolation.
 - (4) Facilities with isolation policies approved by the department of social and rehabilitation services shall be exempt from K.A.R. 28-4-274(c)(3)(E).
- (d) Education. Each resident shall be helped to secure the maximum amount of education of which they are capable and be provided the optimum conditions under which they can receive the greatest benefit from the school experience. Alternative formal schooling provided by the facility shall have received approval by the local school district or the Kansas state department of education.
- (e) Religion. Each resident shall be allowed to participate in religious worship.

- (f) Work experiences.
 - (1) Whenever possible, residents shall have an opportunity to earn and manage money by working either at the facility or in the community. They shall not be used as substitutes for regular staff.
 - (2) Vacation, after school, and other jobs shall be permitted with the administrator's approval.
 - (3) Hazardous work experiences shall not be allowed.

(Authorized by and implementing K.S.A. 65-508; effective May 1, 1986.)

K.A.R. 28-4-275. Health care.

- (a) General health policies.
 - (1) Smoking shall be confined to designated smoking areas in the facility.
 - (2) Alcohol or non-prescribed controlled substances, as defined in K.S.A. 65-4101 and any amendments to it, shall not be consumed by any resident, by any staff person while on duty, or by any staff person in the presence of residents.
- (b)
 - (1) The licensee, in consultation with a physician or community health nurse, shall develop written policies for implementing the health program in the following areas:
 - (A) Health examination for residents and staff;
 - (B) continuing health care;
 - (C) dental examination and follow-up dental care;
 - (D) corrections of medical problems;
 - (E) special examinations such as vision, hearing and neurological exams;
 - (F) care of minor illness including use of nonprescription drugs; and
 - (G) consultation for the individual child when indicated.
 - (2)
 - (A) Use of sharp or dangerous instruments and tools by residents shall be supervised by staff.
 - (B) Firearms and ammunition, and household poisons and other hazardous substances shall be in locked storage.

- (C) Internal and external medications shall be in separate locked storage in a supervised location.
 - (3) Each prescription medicine shall have the name of the individual recipient and the physician, and shall show the dosage and time. A record shall be kept in the resident's file as to who gave the medication and when it was given. Each unused or expired medication shall be safely discarded.
 - (4) Medications requiring refrigeration shall be labeled and kept in locked storage in the refrigerator.
- (c) Physical health of residents and children of staff.
- (1) Physical health.
 - (A) A health assessment for each resident and for each child of a staff member shall be obtained within six months prior to or not more than 30 days after admission of the resident or employment of the parent. The assessment shall be conducted by a licensed physician or by a nurse approved by the Kansas department of health and environment to conduct the assessment.
 - (B) Health assessments shall be required annually for residents to age six and every three years for residents over the age of six. Results of the health assessment shall be recorded on forms supplied by the Kansas department of health and environment.
 - (C) Each person under 16 years of age who lives in the facility shall have current immunizations according to the schedule recommended by the center for disease control.
 - (2) Health care.
 - (A) A current health record shall be kept for each resident. The record shall include pertinent information about health status, developmental progress, and special needs, with appropriate plans to meet these needs.
 - (B) The staff shall update the health information as determined by the program's specific health policies and use the information as a basis for review and evaluation of the resident's health status.
 - (3) Residents in emergency care shall be exempt from K.A.R. 28-4-275(c)(1) and (2).
 - (4) Each child care staff member shall be trained in observation of symptoms of illness, in elementary principles of first aid, and accident prevention.

- (5) The staff of the facility shall obtain immediate medical treatment for any resident who is seriously injured or ill, and shall notify the placing agent, the parent, as dictated by the care plan, and the local health department of the injury or illness as soon as possible.
 - (6) Staff members, as required by law, shall report any evidence of suspected child abuse or neglect of residents to the Kansas state department of social and rehabilitation services, or the appropriate law enforcement agency when Kansas state department of social and rehabilitation services offices are closed.
- (d) Dental health of residents.
- (1) A pre-admission dental examination obtained within a year prior to or within 60 days after admission shall be required for each resident except residents in emergency care.
 - (2) Follow-up dental correction shall be provided, and shall be noted in the resident's file.
 - (3) The facility staff shall develop plans for dental health education and supervise the residents in the practice of good oral hygiene.

(Authorized by and implementing K.S.A. 65-508; effective May 1, 1986; amended May 1, 1987.)

K.A.R. 28-4-276. Mental health policies.

- (a) The residential program shall supplement and support the family-child relationship.
- (b) The views of the parents, the resident, and the placing agency, concerning factors important to them in the emotional development of the resident, shall be considered by the staff in the services provided.
- (c) The cultural heritage of the resident shall be recognized and respected.
- (d) Mental health concepts, as an integral aspect of total child development, shall be included in staff training and in parent-child conferences.

(Authorized by and implementing K.S.A. 65-508; effective May 1, 1986.)

K.A.R. 28-4-277. Environmental standards.

- (a) General requirements.
 - (1) Community resources, such as schools, churches, recreational and health services, police protection and fire protection from an organized fire department, shall be available to the facility.

- (2) The building shall meet the legal requirements of the community as to building codes, zoning, and fire protection. Where local fire regulations do not exist, fire safety approval shall be obtained from the state fire marshal.
 - (3) Plans for constructing a proposed building or for any major addition or alteration shall be the responsibility of a licensed architect.
 - (A) New buildings. Preliminary plans and outline specifications including plot plans shall be submitted to the Kansas department of health and environment for review prior to commencing construction.
 - (B) Additions or alterations. A written statement defining the proposed use of the construction shall accompany the plans and specifications. The statement shall be submitted to the Kansas department of health and environment for review prior to beginning construction.
 - (4) If construction is not commenced within the year, plans and proposals shall be resubmitted to the department before proposed construction begins.
- (b) Premises.
- (1) There shall be sufficient outside play space available as determined by the number and ages of residents.
 - (2) The outdoor play area shall be free of physical hazards including bodies of water, ravines, and drainage ditches.
 - (3) Playground equipment, such as climbing apparatus, slides and swings, shall be provided as appropriate for the age of residents, and shall be firmly anchored. A hard-surfaced area or gravel shall not be used under anchored play equipment.
 - (4) Each facility shall develop a written maintenance policy which shall be followed. The facility and outside area shall be maintained in good condition and shall be clean at all times, free from accumulated dirt, trash, vermin and rodent infestation. Garbage and outdoor trash containers shall be covered. Contents of outdoor containers shall be removed at least weekly.
 - (5) The structure of the facility shall be large enough to house the number of residents for which the facility was planned, the staff, substitute staff and children of the staff who are to live in it.
 - (6) Living rooms and indoor play space shall have proper heating, cooling, lighting and ventilation. There shall be adequate space for recreation and study.
 - (7) All quarters occupied by the residents shall have lighting of a minimum of 20 foot candles in all parts of the room. There shall be lighting of a minimum of 35 foot candles in areas used for reading, study or other close work.
 - (8) There shall be a telephone located in each facility and readily available.

- (9) Windows and doors shall be screened as needed unless areas are air conditioned.
 - (10) Low windows and glass doors which present a hazard to children shall be effectively screened and guarded.
 - (11) All stairs shall be provided with sturdy handrails.
 - (12) The facility shall contain adequate central storage for household supplies, bedding, linen, out-of-season clothing, luggage and play equipment in addition to adequate closet and storage space in bedrooms for the residents and child care staff.
 - (13) (A) Asbestos shall not be used in new or remodeling construction.
(B) If friable asbestos is present, it shall be covered and sealed so as to provide a protective barrier between the asbestos and the occupants of the building.
 - (14) Floors shall be smooth, free from cracks, and easily cleanable. They shall not be slippery. Floor covering for living quarters shall be required over concrete slabs in contact with the ground.
 - (15) Walls shall be smooth, easily cleanable and in sound condition.
 - (16) Electrical outlets within the reach of children under six years shall be covered with safety devices.
 - (17) Appropriate physical facilities, equipment and furnishings shall be provided.
 - (18) Care for children with handicapping conditions. Care for non-ambulatory children shall be provided on the ground floor. All exits and steps shall have ramps properly equipped with crosstreads. Each ramp shall have an incline of no more than two inches to the foot.
- (c) Sleeping facilities.
- (1) Sleeping facilities shall be limited to first and second floors. The minimum square footage of floor space exclusive of built in furniture, storage space or closets shall be 80 square feet per person in single rooms and an average of not less than 60 square feet per person in rooms accommodating more than one person. Minimum ceiling height shall be 7' 8" over 90% of the room area.
 - (2) Each sleeping room shall be an outside room with operable windows, and shall be well ventilated, adequately lighted, and appropriately heated or cooled.
 - (3) A separate bed with level flat mattress in good condition and adequate bedding shall be provided for each resident.

- (4) Children of staff who reside in the center shall have separate sleeping areas if sex or age is different from that of residents.
- (d) Water supply.
- (1) The water supply shall be from a source approved and certified by the county health officer and shall be under pressure. Water coming into the premises shall come from a public or municipal source, or from a private water supply which has been investigated and approved by the responsible health authorities. The plumbing shall have been installed according to local or state plumbing codes.
 - (2) Sanitary drinking facilities shall be provided for the residents. The following methods are acceptable:
 - (A) Disposable cups and an appropriate water dispenser which is available to the residents;
 - (B) a fountain of approved design with water under pressure so that the stream is not less than three inches high; or
 - (C) a glass washed after each use.
- (e) Toilet and lavatory facilities.
- (1) All plumbing fixtures and building sewers shall be connected to public sewers if the public sewer line is within 50 yards of the building.
 - (2) Where a public sewer is not available, a private sewage disposal system meeting requirements of the health authority and installed and connected to all plumbing fixtures and building sewers shall be used.
 - (3) Toilet and bathing facilities shall be convenient to sleeping quarters, living and recreation rooms.
 - (4) Cold water and hot water not exceeding 120° F., shall be supplied under pressure to lavatory and bathtub or shower.
 - (5) For each five or fewer residents of each sex there shall be at least one toilet, one lavatory and a bathtub or shower.
 - (6) Separate bathroom facilities shall be provided for live-in staff.
 - (7) Each bathroom shall be ventilated. An inside bathroom shall have a mechanical system to the outdoors with a minimum of four air changes per hour.
 - (8) Facilities serving non-ambulatory children shall have toilets and washbasins designed to accommodate them.

- (f) Laundry facilities.
 - (1) If laundry is done at the facility, laundry fixtures shall be located in an area separate from food preparation areas and shall be installed and used in a manner that safeguards the health and safety of the residents.
 - (2) If needed, the type of diapers and diaper service shall be determined by the facility director with approval of the health nurse.
 - (3) Soiled linen shall be kept in areas separate from clean linen.

(Authorized by and implementing K.S.A. 65-508; effective May 1, 1986; amended, T-87-34, Nov. 19, 1986; amended May 1, 1987.)

K.A.R. 28-4-278. Food service.

- (a) Food preparation and storage.
 - (1) The major food preparation area shall be adequately equipped for the sanitary preparation and storage of food and washing of dishes and utensils. Food shall be prepared and served in a sanitary manner. Kitchens which serve 25 or more persons shall provide separate hand washing facilities in the kitchen. Personnel shall wash their hands before handling food.
 - (2) Dishes shall have hard-glazed surfaces and shall be entirely free of cracks or chips.
 - (3) Dishes, kitchen utensils and feeding equipment shall be maintained in a sanitary condition using one of the following methods:
 - (A) A three-compartment sink supplied with hot and cold running water to each compartment and a drain board for washing, sanitizing, and air-drying;
 - (B) a domestic-type dishwasher for groups of 24 or fewer persons;
 - (C) a commercial-type dishwasher with a 12-second rinse with 180° F. water, for groups of 25 persons or more; or
 - (D) disposable plates, cups, and plastic utensils of food-grade medium weight. Disposable table service shall be used only one time and then destroyed.
 - (4) Tables shall be washed before and after meals, and floors shall be swept after meals.
 - (5) Poisonous or toxic materials shall not be stored with, under, or over food.
 - (6) All perishables and potentially hazardous foods shall be continuously maintained at 45° F. or lower in the refrigerator, or 10° F. or lower in the freezer, with 0° F.

recommended. Each cold storage facility shall be provided with a clearly visible, accurate thermometer.

- (7) All foods stored in the refrigerator shall be covered.
 - (8) All foods not requiring refrigeration shall be stored at least six inches above the floor in clean, dry, well-ventilated storerooms or other approved areas with no overhead drain nor sewer lines.
 - (9) Dry bulk food which is not in an original, unopened container shall be stored in metal, glass or food-grade plastic containers with tight-fitting covers and shall be labeled.
- (b) Food safety.
- (1) All dairy products shall be pasteurized. Dry milk shall be used only for cooking.
 - (2) Beef, pork and poultry shall be obtained from government-inspected sources.
 - (3) Commercially canned food from dented, rusted, bulging or leaking cans, or food from cans without labels, shall not be used. Home-canned foods, other than jams and jellies, shall not be used.
- (c) Nutrition.
- (1) Meals and snacks shall meet the nutrient needs of the residents according to recommended dietary allowances for age and sex.
 - (2) Special diets shall be provided for residents as ordered by attending physicians. Efforts shall be made to accommodate religious practices.
 - (3) Copies of menus served for one month shall be kept on file and available for inspection.

(Authorized by and implementing K.S.A. 65-508; effective May 1, 1986.)

K.A.R. 28-4-279. Maternity care.

- (a) Any facility may provide care for a pregnant resident if the requirements of this regulation are met, and the plan is approved by the department. If the facility does not meet the maternity care regulations or does not plan to maintain the resident through the pregnancy, the resident's child placing agent shall be notified within seven days of the determination of pregnancy and the resident shall be moved within 30 days thereafter.
- (b) Any facility which provides maternity care shall meet the following additional requirements:
 - (1) Each resident shall receive the services of a licensed physician on a regular and continuing basis throughout pregnancy, delivery and post-delivery checkup.

- (2) The facility shall consult with a board-certified obstetrician who is available in case of emergency or complication.
- (3) There shall be a written plan for all deliveries to take place in a licensed hospital or maternity center. The plan shall state the name and location of the facility and of an alternate hospital for use if services are unavailable at the primary hospital or maternity center.
- (4) The facility shall be within 30 minutes of the licensed hospital or maternity center providing maternity services.
- (5) Complaints of alleged inadequate or improper care by a physician or hospital shall be reported in writing immediately to the Kansas department of health and environment.
- (6) Ambulance service shall be readily available for emergencies.
- (7) Special arrangements shall be available for bed and nursing care for each resident who develops complications during pregnancy but who does not require hospitalization.
- (8) Each resident's medical record shall include the medical consent form, the name of her physician, a schedule of appointments, the expected date of delivery and any special needs or problems.
- (9) The facility shall contract for the services of a registered nurse to provide at least weekly instruction to the pregnant residents regarding childbirth preparation, nutrition, general health and hygiene, post-partum care, post-natal care, contraception and venereal disease, and the psychology and physiology of pregnancy. The residents shall be given a tour of the hospital where delivery is planned. The nurse shall also serve as a consultant to the staff regarding the development of general health policies.
- (10) Special nutrition policies for pregnant residents shall be developed in consultation with a physician, nutritionist or nurse. Residents shall be referred to the WIC program when appropriate and available.
- (11) Specific policies shall be developed for support to the mother during labor and delivery and for the care of any new mother who returns to the facility following delivery.
- (12) Upon dismissal from the facility, each resident shall be given written information regarding her post-partum care. A referral shall be made to the appropriate community resource for follow-up services.
- (13) Casework services shall be provided by an approved social agency in the community or the facility's own professional staff.

- (A) If the facility's professional staff provides casework services, the following requirements shall be met:
 - (i) There shall be at least one social worker for each fourteen residents.
 - (ii) Casework services shall be provided to each pregnant resident immediately upon admission to the facility.
 - (iii) Casework interviews shall be regularly scheduled with reasonable frequency based on the service plan.
 - (iv) Casework service shall include help in adjustment to pregnancy, to separation from the resident's natural environment and to group living. Casework services shall include psychological and psychiatric help as needed to facilitate diagnosis and treatment.
 - (v) The caseworker shall be responsible for providing help in formulating a long-term plan for the mother and baby.
 - (vi) Each resident shall have the right to make the decision as to whether to keep or relinquish her infant. This decision shall be made without undue pressure or influence.
 - (vii) The caseworker, at the request of the pregnant resident, shall arrange for referral to a licensed child placing agency for any baby needing adoptive placement or other foster care.
- (B) If casework services are provided by a community social agency, K.A.R. 28-4-279(b)(13)(A)(iii)(iv)(v)(vi) and (vii) requirements shall be met.
- (14) The maternity care staff, board, or any other person connected with the facility shall not directly or indirectly place or arrange for placement of children for adoption or foster care. Such an action shall result in immediate revocation or denial of license.

(Authorized by K.S.A. 65-508; implementing K.S.A. 65-502, 65-506, 65-507 and L. 1984, Chapter 224, Section 1; effective May 1, 1986.)

K.A.R. 28-4-280. Residential services to mothers and infants. Each maternity home or residential facility which provides residential services to mothers and infants after delivery shall meet the following requirements:

- (a) Physical plant.
 - (1) A maximum of five mothers and infants shall be served.
 - (2) The mother/infant unit shall be separate from units serving pregnant and non-pregnant residents.

- (3) A nursery shall be provided.
 - (A) The nursery shall have adequate space and equipment for the number and age of infants in care.
 - (B) Age-appropriate toys and play equipment shall be available.
 - (4) Rooming-in may be allowed if it is determined to be in the best interest of the newborn as documented in the resident's social service plan.
 - (5) A quiet area shall be provided for infant feeding.
 - (6) Laundry facilities shall be readily available.
 - (7) There shall be facilities for the safe preparation and storage of formula.
 - (8) The environment shall be free of substances potentially hazardous to mother and infant.
- (b) Parenting education.
- (1) Techniques of care of the newborn shall be taught on an individual basis.
 - (2) Residents shall be provided instruction in child development and child care, infant development and stimulation, first aid, and infant nutrition by the agency or through community resources.
- (c) Policies.
- (1) There shall be written policies which specify:
 - (A) The length of time the mother may remain in the unit;
 - (B) prohibition against the assumption of child care responsibilities by any resident other than the mother of the newborn; and
 - (C) substitute child care arrangements when the mother is ill or otherwise away from her newborn.
- (d) Services.
- (1) The facility shall contract with a pediatrician to supervise the health care of the infants in the unit.
 - (2) There shall be casework services as outlined in KAR 28-4-279(a)(14).
 - (3) Staff shall be trained in the use of monitors and infant CPR.

(e) Records. The following records shall be maintained for each mother/infant:

- (1) Medical consent;
- (2) health care instructions; and
- (3) infant medical record.

(Authorized by and implementing K.S.A. 65-508; effective May 1, 1986.)