R432. Health [Family] and Human Services, Health [and Preparedness, Care Facility Licensing.

R432-550. Birthing Centers.

R432-550-1. [Legal | Authority]:

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

R432-550-2. | and Purpose.

- (1) Section 26B-2-202 authorizes this rule.
- (2) This rule provides health and safety standards for the organization, physical plant, maintenance, and operation of birthing centers.
 - (1) Birthing centers shall consist of one to five birth rooms.
 - (3) Licensure is not required for birthing centers with only one birth room.
- ([2]4) Birthing [centers]center facilities provide quality care and services in a pleasing and safe environment to a [select-]low[-]-risk population of healthy maternal patients who are expected to have an uncomplicated labor and delivery, and who choose a safe and cost-effective alternative to the traditional hospital childbirth experience.
- $([\frac{3}{2}]5)$ Birthing center clinical staff assess the maternal patient's risk for obstetric complications through careful review of the patient's records for prenatal screening of potential problems.
- [(4) Birthing centers recognize the individual needs of, and provide service to, low risk maternal patients expected to have an uncomplicated labor and delivery.]

[R432-550-3. Time for Compliance.

- Facilities governed by these rules shall be in full compliance with these rules at the time of licensure.]

R432-550-[4]2. Definitions.

- [(1) Common definitions Section-]Terms used in this rule are defined in Rules R380-600 and R432-1[-3-]. Additionally:
- (2) Special Definitions:
- (a) "Alongside midwifery unit" means a birthing unit that [may be] is licensed as a birthing center and is connected to a hospital facility, either through a bridge, ramp, or adjacent to the labor and delivery unit within the hospital with care provided with the midwifery model of care, where maternal patients are received and care provided during labor, delivery, and immediately after delivery.
- ([b]2)(a) "Birth room" means a room and environment designed, equipped, and arranged to provide for the care of a maternal patient and newborn and to accommodate a maternal patient's support person during the process of vaginal birth and recovery.[—"]
- (b) Birth room["] does not include rooms intended for pre-admittance or post-discharge accommodations of maternal patients and their newborns.
- ([e]3) "Birthing center" means a facility[, receiving] with one to five birth rooms, that receives maternal patients and provid[ing]es care during labor, delivery, and immediately after delivery[;], including an alongside midwifery unit.
- ([d]4) "Certification in [Cardiopulmonary Resuscitation (]cardiopulmonary resuscitation" or "(CPR[)])" refers to a certification issued after completion of a course that is consistent with the [most current version of the]American Heart Association [G]guidelines for [Health Care Provider CPR.
- (e) "Patient" means a woman or newborn receiving <u>labor</u>, care [and services provided by a birthing center during <u>labor</u>, childbirth and recovery <u>provider CPR</u>.
- ([f]5) "Clinical staff" means a licensed maternity care practitioner appointed by the governing authority to practice within the birthing center and governed by rules <u>and policies</u> approved by the governing body.
- ([g) "Support person" means the individual or individuals selected or chosen by a patient to provide emotional support and to assist her during the process of labor and childbirth.
 - (h) "Vaginal birth" means the three stages of labor.
- (b) a certified nurse-midwife licensed under Title 58, Chapter 44a, [Naturopathic Physicians] Nurse Midwife Practice Act;
 - (c) a licensed direct-entry midwife licensed under Title 58. Chapter 77. Direct-Entry Midwife Act:
- (d) a naturopathic physician licensed under Title 58, Chapter 71, [Licensed Direct-Entry Midwives licensed under Title 58, chapter 77, and Naturopathic Physician Practice Act; and
- (e) others licensed to provide maternity, midwifery, or obstetric care under Title 58. Chapter 67, Utah Medical Practice Act, and Chapter 68, Utah Osteopathic Medical Practice Act.
- (7) "OL" means the Office of Licensing in the Division of Licensing and Background Checks under the Department of Health and Human Services.
- (8) "Patient" means a woman or newborn receiving care and services provided by a birthing center during labor, childbirth, and recovery.

- (9) "Support person" means the individual, or individuals, selected or chosen by a patient to provide emotional support and to assist during the process of labor and childbirth.
 - (10) "Vaginal birth" means the three stages of labor.

[R432-550 3. Time for Compliance.

A facility shall fully comply with this rule when licensed.

R432-550-3. General Construction[-Rules.].

See R432-14 Birthing Center Construction Rules.

A birthing center facility shall comply with the construction requirements in Title R432-14.

R432-550-[6]4. Governing Body.

- (1) The [licensee] facility shall appoint in writing an individual or group to constitute the facility's governing body. [The governing body shall:
 - (a) [comply with federal, state]act on findings and [local laws, rules and regulations;
- (b) adopt written policies and procedures which describe the functions and services recommendations of [the birthing center and protect patient rights] facility-created committees as required by this rule;
- ([e]b) adopt a policy prohibiting discrimination because of race, color, sex, religion, ancestry, or national origin in accordance with Title 13, Chapter 7, [Sections 1 through 4.]Civil Rights;
- [(d) develop an organizational structure establishing lines of authority] (c) adopt written policies and [responsibility;
- (e) when]procedures that describe the [governing body is more than one individual, conduct meetings in accordance with facility policy, but at least annually,]functions and [maintain written minutes]services of the [meetings]birthing center and protection patient rights;
 - $([f]\underline{d})$ appoint by name and in writing a qualified administrator;
 - ([g]e) appoint by name and in writing a qualified director of the clinical staff;
 - ([h]f) appoint members of the clinical staff and delineate their clinical privileges;
- [(i) review and approve at least annually a quality assurance program for birthing center operation and patient care provided.
 - -(j) establish a system for financial management and accountability;
 - (k) provide for resources and equipment to provide a safe working environment for personnel;
- (l) act on findings and recommendations of facility-created committees relevant to compliance with these birthing center rules;
 - (m) (g) comply with federal, state, and local laws, rules, and regulations;
 - (h) develop an organizational structure establishing lines of authority and responsibility;
- (i) ensure that [facility] patient admission eligibility criteria are strictly applied by clinical staff and are evaluated through quality assurance review in accordance with Section R432-550-1[+]0[-]:
 - (j) establish a system for financial management and accountability;
 - (k) provide resources and equipment to provide a safe working environment for personnel;
- (l) review and approve at least annually a quality assurance program for birthing center operation and patient care provided; and
- (m) when the governing body is more than one individual, conduct meetings per facility policy, but at least annually, and maintain written minutes of the meetings.
 - (2) [Written]The governing body shall ensure written policies and procedures[-shall]:
- (a) clearly, accurately, and comprehensively define the methods [by which] the facility will [be operated] utilize to protect the health and safety of patients;
 - (b) provide for meeting the patient's needs;
- (b) define specific criteria that makes a maternal patient ineligible for birth services or continued care at the birthing center;
 - (c) [provide for continuous compliance with federal, state and local laws, rules and regulations.
 - (d) Written policies and procedures shall include:
- (i) defining]define the term "low[-]_risk maternal patient[" which]_" that shall include eligibility criteria for birth services offered in the birthing center;
- (d) document how to prescribe and install a prophylactic solution approved by the department in the eyes of the newborn in accordance with Section R386-702-14;
 - (e) ensure that prenatal laboratory screening includes:
 - (i) antibody screen;
 - (ii) blood type and Rh factor and provision for appropriate use of Rh immunoglobulin;

(c) develop, for each employee position, a job description that delineates functional responsibilities and authority;

- (d) employ or contract with competent personnel whose qualifications are commensurate with job responsibilities and authority and who have the appropriate Utah license or certificate of completion:
 - (e) [develop, for all employee positions, job descriptions that delineate functional responsibilities and authority; and
 - (f) review and act on incident or accident reports [-] in accordance with Title R380-600; and
 - (f) review facility policies and procedures at least annually and report to the governing body on the review.

R432-550-[8]6. Clinical Director.

- (1) The clinical director [shall be] is responsible for [implementing, coordinating] the implementation, coordination, and [assuring] assurance of the quality of patient care services.
 - (2) The clinical director shall:
 - (a) [be eurrently licensed] hold a license to practice medicine or midwifery in Utah;
- [(b) have training and expertise in obstetric and newborn services offered to ensure adequate supervision of patient care services; and
- (e) (b) for an alongside midwifery unit, the clinical director shall [be-]act as a physician as defined in Section 58-67-102 or a certified nurse midwife under Title 58, Chapter 44a, Nurse Midwife Practice Act[-]; and
- (c) have training and expertise in the obstetric and newborn services offered to ensure adequate supervision of patient care services.
- (3) The <u>facility shall ensure the clinical director's responsibilities [shall be]are</u> included in a written job description [available for Department review. The]that includes the clinical [director shall]director's responsibility to:
 - (a) [review and update facility protocols;
 - (b) review and evaluate clinical staff privileges and revise them as necessary;
- (c) recommend, to the governing body, names of qualified licensed health care practitioners to perform approved procedures and the corresponding clinical staff privileges to be granted;
- [(e) evaluate and recommend to the administrator the type and amount of equipment needed in the facility;
 - (f) ensure that qualified staff are on the premises while patients are admitted to the facility;
 - (g) (b) ensure clinical staff documentation is recorded immediately and reflects a description of care given;
 - $([h]\underline{c})$ ensure that planned birthing center services are within the scope of privileges granted to the clinical staff; [-and]
- (i) (d) ensure that qualified staff are on the premises while patients are admitted to the facility:
 - (e) evaluate and recommend to the administrator the type and amount of equipment needed in the facility:
- <u>(f)</u> recommend to the administrator appropriate remedial action and disciplinary action, when necessary, to correct violations of clinical protocols[:];
- (g) recommend, to the governing body, names of qualified licensed health care practitioners to perform approved procedures and the corresponding clinical staff privileges to be granted;
 - (h) review and evaluate clinical staff privileges and revise them as necessary; and
- (i) review and update facility protocols.

R432-550-[9]7. Personnel.

- (1) The administrator shall employ [a sufficient number of]enough qualified professional and support staff [who are]competent to perform their respective duties, services, and functions.
- (2) The facility shall maintain written personnel policies and procedures [which shall be]that are available to personnel and [shall-]address the following:
 - (a) conditions of employment;
 - (b) content of personnel records;
- ([b]c) job descriptions, qualifications, and validation of licensure or certificates of completion as appropriate for the position held; and
 - (c) conditions of employment; and
 - (d) management of employees.
- (3) The facility shall maintain personnel records for employees and shall [retain]keep personnel records for terminated employees for a minimum of [one] four years following termination of employment.
- (4) The facility shall establish a personnel health program through written personnel health policies and procedures[which shall] that protect the health and safety of personnel and patients commensurate with the services offered.
- (5) [An]When hired, an employee shall complete an employee placement health evaluation that shall include [at-]a completed health inventory[which shall be completed when an employee is hired.-]. The health inventory shall [obtain]include the employee's history of the following:
 - (a) any conditions that may prevent the employee from performing assigned duties; and
 - (b) any conditions that would predispose the employee to acquiring or transmitting infectious diseases[; and].
 - (b) conditions which may prevent the employee from performing certain assigned duties satisfactorily.
- [] (6) [Employee] The facility shall develop employee health screening and immunization components of personnel health programs [shall be developed] in accordance with Title R386-702[, Code of Communicable Disease Rules].
 - (7[) Employee skin testing by](a) [the Mantoux method or other FDA approved in-vitro serologic test, and follow-up

for tuberculosis shall be done in accordance with R388-804. Special Measures for the Control of Tuberculosis l.

- ([a]b) [The licensee shall ensure that all employees are skin-tested for tuberculosis within two weeks of:

 ——]
- initial hiring;
 - -(iii) suspected exposure to a person with active tuberculosis; and
- (iii) development of symptoms of tuberculosis.] The facility shall ensure employee skin testing by the Mantoux method or other Federal Drug Administration approved in-vitro serologic test, and follow up for tuberculosis is done in accordance with Title R388-804, Special Measures for the Control of Tuberculosis.
 - (b) The facility shall ensure that each employee is skin-tested for tuberculosis within two weeks of:
 - (i) development of symptoms of tuberculosis;
 - (ii) initial hiring; and
 - (iii) suspected exposure to a person with active tuberculosis.
 - (c) The facility shall ensure skin testing is exempted for each employee with a known positive reaction to skin tests.
- [(b) Skin testing shall be exempted for all employees] (d) The facility may exempt skin tests for each employee with known positive reactions to skin tests.
- (8) The birthing center personnel [must]shall receive a documented orientation to the facility [and]for the job [for which]that they are hired to perform.
- (9) The <u>facility shall ensure</u> birthing center personnel[<u>must</u>] receive documented ongoing in-service training to include:
 - (a) an annual review of facility policies and procedures; and
 - (b) infection control, personal hygiene, and each employee's responsibility in the personnel health program.
- (10) The <u>facility shall ensure</u> birthing center [<u>Personnel shall]personnel</u> have access to the facility's policy and procedure manuals when on duty.
- (11[) Personnel])(a) The facility shall maintain current [licensing,]licensure, registration, or certification [or registration]appropriate for the work performed and as required by the Utah Department of Commerce.
- ([a) Personnel]b) The facility shall ensure personnel provide evidence of current licensure, registration, or certification to the $[\mathbf{D}]$ department upon request.
- $([\frac{b}{c}]c)$ Failure of a facility to ensure personnel are licensed, certified, or registered may result in sanctions to the facility license, per Title R380-600.

R432-550-[10]8. Contracts.

- (1) The [lieensee] facility shall provide a written contract for any birthing center services that are not provided directly by the facility. The [lieensee] facility shall ensure that the contracted entity:
 - (a) complies with applicable laws, rules, and regulations;
 - (b) performs according to facility policies and procedures; and
 - (b) conforms to standards required by laws, rules and regulations; and
 - (c) provides <u>timely</u> services that meet professional standards[and are timely].
 - (2) [Contracts] The facility shall [be-]ensure contracts are available for [Department] OL review.
- (3) An alongside midwifery unit shall have a transfer agreement in place with the adjoining hospital to transfer a patient to the adjacent hospital's labor and delivery unit if a higher level of care is needed, and for services that are provided by the adjacent hospital's staff in collaboration with the alongside midwifery unit staff.
- (4) An alongside midwifery unit may contract with staff from the adjoining hospital to assist with newborn care or resuscitation of a patient in an emergency.

R432-550-[11]9. Quality Assurance.

- (1) The administrator shall establish a quality assurance committee and program.[—This committee shall review regularly clinic operations, protocols, policies and procedures, incident reports, infection control, patient care policies and safety.]
 - (2) The quality assurance committee shall:
 - (a) ensure the quality assurance program includes surveillance, prevention, and control of infection;
- (b) initiate action to resolve identified quality assurance problems by filing a written report of findings and recommendations with the [licensee] facility[:];
- ([3) The quality assurance committee shall]c) meet as prescribed in [facility]birthing center policy or at least quarterly and [shall keep]maintain written minutes that are available for [department]OL review[-
 - (4) The quality assurance program shall include surveillance, prevention]; and [control of infection.]
- (d) review regularly clinic operations, protocols, policies and procedures, incident reports, infection control, patient care policies, and safety.

R432-550-[42]10. Emergency and Disaster.

- (1) The facility shall assure [the]a patients' safety and well-being [of patients-]in [the event of-]an emergency or disaster. [-]An emergency or disaster may include[but is not limited to]:
- (a) a bomb threat:

- R432-550-[14]12. Clinical Staff and Personnel.
 - The facility shall comply with this section regarding clinical staff and personnel.
- (1) Information identifying [eurrent-]clinical staff and on-call and emergency telephone numbers [shall be] is readily available to [birthing center-]personnel.
- (2) Clinical staff and licensed personnel [of the birthing center shall be]are trained in emergency and resuscitation measures[for], for both infants and adults[fineluding but not limited to, cardiopulmonary resuscitation] and have a CPR certification.

- (3) A licensed maternity care practitioner [shall-be] is present at each birth and [remain] remains there until the maternal patient and newborn are stable postpartum.
- (4) A second member of the birthing center staff who is licensed or certified to give [eardiopulmonary resuscitation shall be] CPR is present at each birth.
- (5) Clinical staff, licensed personnel, and support staff [shall be]are provided to meet [patients']a patient's needs, [to]ensure [patients']a patient's safety, and [to-]ensure that [patients]a patient in active labor [are]is attended to.
- (6) A midwife [practicing] who practices in an alongside midwifery unit [shall be] is also a certified nurse midwife under Title 58, Chapter 44a, Nurse Midwife Practice Act.

R432-550-[45]13. Clinical Staff.

- (1) The attending member of the clinical staff shall ensure the supervision [of,] and quality of[,] care delivered to the patient admitted to the facility.
 - (2) [Each]The facility shall ensure that each patient [shall be]is under the care of a member of the clinical staff.
- (3) Clinical staff members shall comply with applicable professional practice laws and written birthing center protocols approved by the clinical director.
- (4) The attending member of the clinical staff shall verify in writing that the patient [eonforms to facility]meets birthing center eligibility criteria.
- (5) The attending member of the clinical staff shall decide when the transfer of a patient to a hospital is necessary and document in writing the conditions warranting the decision.

R432-550-[16]<u>14</u>. Equipment and Supplies.

- (1) The administrator shall provide necessary equipment in good working order to meet the patient's needs.
- (2) The [type and amount of equipment]administrator shall [be indicated in facility policy and approved by the clinical director.]ensure:
- ([3) An]a) an emergency cart or tray is readily available and equipped to allow the completion of emergency procedures defined by facility policy [shall be readily available.];

 [(a) The facility shall safely store.] (b) the emergency cart or tray is safely stored in a designated area that is accessible to authorized personnel[:];

 [(b) The facility shall maintain.] (c) the type and amount of equipment indicated in facility policy and approved by the clinical director; and

 (d) there is a written log of [all] any upkeep of the emergency cart or tray.
- ([4]3) The [inventory of]facility shall ensure there are enough supplies [shall be sufficient]in the inventory to care for the number of patients registered for care.
- [(5) Properly] (4) The facility shall ensure that properly maintained equipment and supplies for the maternal patient and the newborn [shall-]include [at least] the following:
 - (a) [furnishings suitable for labor, birth and recovery;
 - (b) oxygen with flow meters and masks or equivalent;
 - (c) bulb suction;
 - -(d) resuscitation equipment to include resuscitation bags, laryngeal mask airways and oral airways;
 - (c) firm surfaces suitable for use in resuscitating patients;
 - (f) emergency medications and related supplies and equipment;
 - (g) fetal monitoring equipment, minimally to include a fetoscope or doppler;
 - (h) equipment to monitor and maintain the optimum body temperature of the newborn;
 - (i)—la clock indicating hours, minutes, and seconds;
- (j) sterile suturing equipment and supplies;
 - (k) adjustable examination light;
- (1) infant scale;
 - (m) (b) a delivery log for recording birth data;
- (c) a telephone or equivalent two-way communication device capable of reaching other facilities or emergency agencies; [-and]
 - (n) (d) adjustable examination light;
 - (e) bulb suction;
 - (f) emergency medications and related supplies and equipment:
 - (g) equipment to monitor and maintain the optimum body temperature of the newborn;
 - (h) fetal monitoring equipment to include a [delivery log] fetoscope or doppler;
 - (i) firm surfaces suitable for [recording] use in resuscitating a patient:
 - (j) furnishings suitable for labor, birth[-data.], and recovery;
 - (k) infant scale;
 - (l) oxygen with flow meters and masks or equivalent;
 - (m) resuscitation equipment to include resuscitation bags, laryngeal mask airways, and oral airways; and
 - (n) sterile suturing equipment and supplies.

R432-550-[17]15. Medications.

[(1)-]Licensed personnel shall prescribe, order, and administer medication in accordance with applicable professional practice acts, pharmacy, and controlled substances laws.

R432-550-[18]16. Anesthesia Services.

- (1) The [birthing center] facility shall provide facilities and equipment for the provision of anesthesia services commensurate with the obstetric procedures planned for the facility.
- (2) The clinical director shall ensure the safety of anesthesia services administered [to patients]to a patient by clinical staff through written policies and protocols approved by the clinical staff for[-anesthetic agents, delivery of anesthesia and potential hazards of anesthesia.]:
 - (a) anesthetic agents;
 - (b) delivery of anesthesia; and
 - (c) potential hazards of anesthesia.
 - (3) A clinical staff member shall monitor [patients] a patient who receives anesthesia or analgesics.

R432-550-[19]17. Laboratory Services.

- (1) The [birthing center]facility shall provide direct or contract laboratory and associated services according to [facility] policy and to meet the needs of [patients] a patient.
- (2) [<u>Laboratory</u>] The facility shall ensure laboratory reports or results [<u>shall be</u>] are reported promptly to the attending clinical staff member and documented in the patient's medical record.
- (3) [<u>Laboratory</u>]<u>The facility shall ensure laboratory</u> services [<u>shall be]are</u> provided according to [<u>CLIA</u>]<u>the</u> requirements of 42 U.S.C. 253a, Clinical Laboratory Improvement Amendment.

R432-550-[20]18. Medical Records.

- (1) [Medical records] The facility shall [be]ensure medical records are complete, accurately documented, and systematically organized to facilitate retrieval and compilation of information.
- (2) [An employee designated by the]The administrator shall designate an employee to be responsible and accountable for the processing of medical records.
 - (3) The [medical record and its contents shall be safeguarded from loss, defacement, tampering, fires and floods.
 - (4) Medical records shall be protected against access by unauthorized individuals. Birthing centers facility shall:
 - (a) keep medical records for at least five years after the last date of patient care:
- (b) keep records of minors, including records of newborn infants, for three years after the minor reaches legal age under Utah law, but not less than five years;
 - (c) maintain confidentiality of medical record information [confidential; and];
- ([b]d) obtain consent from the patient before releasing client information identifying the client, including photographs, unless release is [otherwise] allowed or required by law[-];

 [(5) Medical records shall be retained for at least five years after the last date of patient care. Records of minors,
- (5) Medical records shall be retained for at least five years after the last date of patient care. Records of mmors, including records of newborn infants, shall be retained for three years after the minor reaches legal age under Utah law, but in no ease less than five years.
 - (e) protect medical records against access by unauthorized individuals; and
 - (f) safeguard medical records and their content from loss, defacement, tampering, fires, and floods.
- (4) The [birthing center] facility shall maintain an individual medical record for each patient[which shall include but is not limited to], that includes written documentation of the following:
 - (a) admission record with demographic information and patient identification data;
- (b) <u>discharge summary for mother and newborn to include a note of condition, instructions given, and referral as appropriate:</u>
 - (c) documentation that the patient is informed of the statement of patient rights;
 - (d) fetal monitoring record;
 - (e) history and physical examination [which shall be]that is up-to-date upon the patient's admission;
 - ([e) written]f) labor and [signed informed consent;
 - (d) orders by a clinical staff member;
 - (e) delivery record including type of assessments, plan of eare and services provided;
 - (f) <u>delivery</u>, record of [medications and treatments administered] anesthesia, and operative procedures;
 - (g) laboratory and radiology reports;
- (h) [discharge summary for mother]monitoring of progress in labor with assessment of maternal and newborn reaction to [include]the process of labor;
 - (i) orders by a [note of condition, instructions given and referral as appropriate]clinical staff member;
- ([i]i) prenatal care record containing at least prenatal blood serology, Rh factor determination, past obstetrical history, and physical examination and documentation of fetal status;
 - (j) monitoring of progress in labor with assessment of maternal and newborn reaction to the process of labor;

- (k) [fetal monitoring-]record of assessments, plan of care, and services provided;
- (1) [labor and delivery-]record[, including type] of [delivery, record of anesthesia and operative procedures if any medications and treatments administered; and
 - (m) [documentation that the patient is]written and signed informed [of the statement of patient rights]consent.
 - ([7]5) The facility shall ensure records of newborn infants[-shall] include the following:
- (a) date and hour of birth, birth weight and length, period of gestation, gender, and condition of <u>the</u> infant on delivery, including Appar scores and resuscitative measures;
 - (b) mother's name or unique identification;
 - (c) record of ophthalmic prophylaxis; and
- (d) the identification number of the screening kit used to screen for metabolic diseases[3] and documentation that metabolic screening, genetic screening, PKU, or other metabolic disorders reports were completed or refused by the client.
- ([8] $\underline{6}$) An alongside midwifery unit may integrate medical records with the medical record system of the adjoining hospital.

R432-550-[21]19. Housekeeping Services.

- (1) The facility shall provide [adequate]enough housekeeping services to maintain a clean and sanitary environment.
- (2) The facility shall develop and implement written housekeeping policies and procedures.

R432-550-[22]20. Laundry Services.

- (1) The facility shall develop and implement written policies and procedures for the storage and processing of clean and soiled linen.
- (2) [Clean] The facility shall ensure clean linen [shall be] is stored, handled, and transported to prevent contamination. [Linens]
 - (3) The facility shall [be maintained in good repair.
- (3) Soiled lensure soiled linen [shall be] is handled, transported, stored, and processed in a manner to prevent both leakage and the spread of infection.
 - (4) The facility shall ensure linens are clean and in good repair.

R432-550-[23]21. Maintenance, Physical Environment, and Safety.

- (1) The facility shall provide adequate maintenance service to ensure that facility equipment and grounds are maintained in a clean and sanitary condition and in good repair.
- (2) The facility shall develop and implement a written maintenance program [which shall include] that includes a preventive maintenance schedule for major equipment and physical plant systems.

R432-550-[24]22. General Maintenance.

- (1) The facility shall maintain facility buildings, fixtures, equipment, and spaces in operable condition.
- (2) The facility shall provide a safe, clean, and sanitary environment.
- (3) The facility shall conduct a pest-control program that ensures the facility is free from vermin.
- (4) Direct or contract pest-control programs shall comply with Title 4, Chapter 14, Utah Pesticide Control Act.
- (5) [Documentation] The facility shall [be maintained] maintain general maintenance documentation for [Department] OL review.

R432-550-[25]23. Waste Processing Service.

- [————Facilities](1) The facility shall provide facilities and equipment [shall be provided-]for [the-]sanitary storage[-and treatment]
- (2) The facility shall treat or dispos[al]e of [all-categories]any category of waste, including hazardous and infectious waste[s], if applicable, using techniques acceptable to the Department of Environmental Quality[7] and the local health department[having jurisdiction].

R432-550-[26]<u>24</u>. Lighting.

The facility shall provide [adequate and]enough comfortable lighting to meet the needs of patients and personnel.

R432-550-[27]25. Limitations of Services.

- (1) [Birthing center] The facility shall ensure that the facility policy [shall establish] establishes a written risk assessment system to assess the individual risk for each maternal patient.
- (2) A clinical staff member shall perform and document a risk assessment for each maternal patient to ensure the patient's needs:
- (a) fall within the scope of practice and standards of care included in the clinical staff member's professional practice act and within facility policy; and
 - (b) meet the eligibility requirements for a low[-]-risk maternal patient.
 - (3) [Clients] A client [shall become] is ineligible for birthing center care upon development of:

- (a) a clinical need for anesthesia or analgesia other than those used in a setting where anesthesia and analgesia are limited in accordance with the facility's written [protocols]policies; or
- (b) any condition identified intrapartum or postpartum [which]that will be likely to adversely affect the health of the maternal patient or infant and will require management in a general hospital.

R432-550-[28]26. Penalties.

Any person who violates [any provision of]this rule may be subject to the penalties [enumerated] in <u>Title R380-600</u> and Title 26B, Chapter [21, Section 11 and R432-3-]2, Part 7, Penalties and [be punished for violation of a class A misdemeanor as provided in Title 26, Chapter 21, Section 16] Investigations.

KEY: health care facilities

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