

**INSPECTIONS AND APPEALS DEPARTMENT[481]**

**Adopted and Filed**

Pursuant to the authority of Iowa Code sections 231C.3(1) and 231D.2(2), the Department of Inspections and Appeals hereby amends Chapter 67, “General Provisions for Elder Group Homes, Assisted Living Programs, and Adult Day Services,” Chapter 69, “Assisted Living Programs,” and Chapter 70, “Adult Day Services,” Iowa Administrative Code.

These amendments are the result of a five-year review of the chapters by the Department. The amendments make the following changes:

- Implement suggestions by the Department of Public Safety, State Fire Marshal Division, related to the submission of blueprints and delayed-egress specialized locking systems; rescind the requirement for minimum square footage of common space in new or remodeled buildings; and rescind the requirement for minimum square footage of operable windows in sleeping rooms.

- Amend certain definitions and add a definition of “restraints.”
- Add a provision that tenants have the right to be free from restraints.
- Add a requirement that medications must be administered as prescribed.
- Add a requirement that dependent adult abuse training must be provided as required by Iowa Code section 235B.16.

- Add clarification of requirements for dementia-specific programs by definition.
- Add a requirement for policies and procedures to address head injuries and certain sexual relationships.

- Amend the rule for involuntary transfer from an assisted living program.
- Add a requirement that service plans updated within 30 days of the tenant’s occupancy in an assisted living program must be signed and dated by all parties.

- Amend the nurse review rule in Chapter 69.
- Amend the rule requiring dementia-specific continuing education in assisted living programs.

The Department does not believe that the amendments pose a financial hardship on any regulated entity or individual.

Notice of Intended Action was published in the Iowa Administrative Bulletin on October 14, 2015, as **ARC 2200C**. Comments were received from the Iowa Health Care Association/Iowa Center for Assisted Living with proposed revisions to language in Items 2 and 26, which specifically deal with restraints and awake staff. After consideration of the proposed revisions, the Department was unable to accept the suggested language offered by the Association to revise the definition of “restraints” in Item 2.

Staff in the Department’s Adult Service Bureau is aware of only a couple of instances when adaptive clothing was used by or for a tenant with impaired decision-making ability. In both cases, it appears that the care needed by the tenants involved clearly exceeded the level of care (LOC) offered by the assisted living programs. In general, by the time a tenant requires the use of adaptive clothing, the tenant may already have exceeded the LOC and might best be cared for in a nursing facility.

Rather than changing the definition of “restraints” in Item 2, the Department suggests that assisted living programs file a request for a waiver of criteria for retention of a tenant in the program pursuant to rule 481—67.7(231B,231C,231D). The waiver process might be the most expedient method to address this issue on a case-by-case basis without amending the definition of “restraints.”

Regarding the Association’s second proposed revision, the Department agrees that expanding the “awake staff” rule from dementia-specific programs to all assisted living programs may be a hardship on programs, especially those operating in rural Iowa. Therefore, the Department accepted the proposed language and has revised subrule 69.29(4) in Item 26 accordingly.

After analysis and review of this rule making, no impact on jobs has been found.

These amendments are intended to implement Iowa Code sections 231B.2(1), 231C.3(1), and 231D.2(2).

These amendments shall become effective April 20, 2016.

The following amendments are adopted.

ITEM 1. Amend rule **481—67.1(231B,231C,231D)**, definitions of “Impaired decision-making ability” and “Part-time or intermittent care,” as follows:

“*Impaired decision-making ability*” means a lack of capacity to make safe and prudent decisions regarding one’s own routine safety as determined by the program manager or nurse or means having a GDS score of ~~four~~ five or above.

“*Part-time or intermittent care*” means licensed nursing services and professional therapies that are provided ~~no more than 5 days per week; or licensed nursing services and professional therapies that are provided 6 or 7 days per week for a temporary period of time with a predictable end within 21 days; or licensed nursing services and professional therapies that~~ in combination with nurse-delegated assistance with medications or activities of daily living and do not exceed 28 hours per week or, for adult day services, 4 hours per day ~~and are provided in combination with nurse-delegated assistance with medications or activities of daily living.~~

ITEM 2. Adopt the following new definition of “Restraints” in rule **481—67.1(231B,231C,231D)**:

“*Restraints*” means any chemical or manual method which restricts freedom of movement or normal access to one’s body or any physical or mechanical device, material or equipment which is attached or adjacent to the tenant’s body that the tenant cannot remove easily and which restricts freedom of movement or normal access to one’s body.

ITEM 3. Adopt the following new subrule 67.3(9):

**67.3(9)** To be free from restraints.

ITEM 4. Adopt the following new paragraph **67.5(6)“d”**:

d. Medications shall be administered as prescribed by the tenant’s physician, advanced registered nurse practitioner or physician assistant.

ITEM 5. Adopt the following new subrule 67.7(5):

**67.7(5) Appeals.** The denial of a waiver request may be appealed by the program pursuant to Iowa Code chapter 17A.

ITEM 6. Adopt the following new subrule 67.9(6):

**67.9(6) Dependent adult abuse training.** Program staff shall receive training relating to the identification and reporting of dependent adult abuse as required by Iowa Code section 235B.16.

ITEM 7. Amend rule **481—69.1(231C)**, definition of “Dwelling unit,” as follows:

“*Dwelling unit*” means ~~an apartment, group of rooms or single room which is occupied as separate living quarters or, if vacant, is intended for occupancy as separate living quarters, in which a tenant can live and sleep separately from any other persons in the building, and which has direct access from the outside of the building or through a common hall~~ a single unit which provides complete, independent living facilities for one or more persons, including permanent provisions for living, sleeping and sanitation, and which may include permanent provisions for eating and cooking. “Sanitation” for purposes of this definition means bathroom fixtures as required by this chapter.

ITEM 8. Amend subrule 69.2(2) as follows:

**69.2(2) Dementia-specific programs and door alarms.** If a program meets the definition of a dementia-specific assisted living program during two sequential certification monitorings, the program shall meet all requirements for a dementia-specific program, including the requirements set forth in rule 481—69.30(231C), subrules 69.29(2) and 69.29(4), paragraph 69.35(1)“d,” and ~~subrule~~ subrules 69.32(2) and 69.32(3), which includes include the requirements relating to door alarms and specialized locking systems.

ITEM 9. Adopt the following new subrule 69.2(3):

**69.2(3) Dementia-specific program by definition.** If a program meets the definition of a dementia-specific assisted living program during two sequential certification monitorings based on the number of tenants served who have dementia between Stages 4 and 7 on the Global Deterioration Scale, the program shall be deemed a dementia-specific program by definition. If the number of tenants served

who have dementia between Stages 4 and 7 on the Global Deterioration Scale goes below that which is required by the definition of dementia-specific program at any time after the program has been deemed dementia-specific by definition and the program is not holding itself out as providing dementia care in a specialized setting, the program will no longer be considered dementia-specific.

ITEM 10. Amend subrule 69.4(7) as follows:

**69.4(7)** The policy and procedure for accidents and emergency response, including provisions related to head injuries.

ITEM 11. Adopt the following **new** subrule 69.4(20):

**69.4(20)** The policy and procedure for addressing sexual relationships between tenants and staff or between tenants with dementia greater than Stage 5 on the Global Deterioration Scale.

ITEM 12. Amend paragraph **69.9(1)“d”** as follows:

*d.* Maintain compliance with life safety requirements pursuant to this chapter the state fire marshal division’s requirements.

ITEM 13. Amend rule 481—69.18(231C) as follows:

**481—69.18(231C) Structural and life safety Plan reviews of a building for a new program.**

**69.18(1)** Before a building is constructed or remodeled for use in a new program, the state fire marshal division of the department of public safety shall review the blueprints for compliance with requirements pursuant to this chapter. Construction or remodeling includes new construction, remodeling of any part of an existing building, addition of a new wing or floor to an existing building, or conversion of an existing building.

**69.18(2)** A program applicant shall submit ~~to the department~~ blueprints wet-sealed by an Iowa-licensed architect or Iowa-licensed engineer and the blueprint plan review fee as stated in Iowa Code section 231C.18 to the Department of Public Safety, State Fire Marshal Division, 215 E. 7th Street, Third Floor, Des Moines, Iowa 50319.

**69.18(3)** Failure to submit the blueprint plan review fee with the blueprints shall result in delay of the blueprint plan review until the fee is received.

**69.18(4)** The state fire marshal division of the department of public safety shall review the blueprints and notify the Iowa-licensed architect or Iowa-licensed engineer in writing regarding the status of compliance with requirements.

**69.18(5)** The Iowa-licensed architect or Iowa-licensed engineer shall respond to the state fire marshal division of the department of public safety to state how any noncompliance will be resolved.

**69.18(6)** Upon final notification by the state fire marshal division of the department of public safety that the blueprints meet ~~structural and life safety~~ the state fire marshal division’s requirements, construction or remodeling of the building may commence.

**69.18(7)** The state fire marshal division of the department of public safety shall schedule an on-site visit of the building site with the contractor, or Iowa-licensed architect or Iowa-licensed engineer, during the construction or remodeling process to ensure compliance with the approved blueprints. Any noncompliance must be resolved prior to approval for certification.

ITEM 14. Amend rule 481—69.19(231C) as follows:

**481—69.19(231C) Structural and life safety Plan review prior to the remodeling of a building for a certified program.**

**69.19(1)** Before a building for a certified program is remodeled, the state fire marshal division of the department of public safety shall review the blueprints for compliance with requirements set forth in rule 481—69.35(231C). Remodeling includes modification of any part of an existing building, addition of a new wing or floor to an existing building, or conversion of an existing building.

**69.19(2)** A certified program shall submit ~~to the department~~ blueprints wet-sealed by an Iowa-licensed architect or Iowa-licensed engineer and the blueprint plan review fee as stated in Iowa

Code section 231C.18 to the Department of Public Safety, State Fire Marshal Division, 215 E. 7th Street, Third Floor, Des Moines, Iowa 50319.

**69.19(3)** Failure to submit the blueprint plan review fee with the blueprints shall result in delay of the blueprint plan review until the fee is received.

~~**69.19(4)** The department shall review the blueprints within 20 working days of receipt and immediately notify the Iowa-licensed architect or Iowa-licensed engineer in writing regarding the status of compliance with requirements.~~

~~**69.19(5)** The Iowa-licensed architect or Iowa-licensed engineer shall respond to the department in 20 working days to state how any noncompliance will be resolved.~~

~~**69.19(6)**~~ **69.19(4)** Upon final notification by the state fire marshal division of the department of public safety that the blueprints meet structural and life safety requirements, remodeling of the building may commence.

~~**69.19(7)**~~ **69.19(5)** The state fire marshal division of the department of public safety shall schedule an on-site visit of the building with the contractor, or Iowa-licensed architect or Iowa-licensed engineer, during the remodeling process to ensure compliance with the approved blueprints. Any noncompliance must be resolved prior to approval for continued certification or recertification of the program.

ITEM 15. Amend subrule 69.20(1) as follows:

**69.20(1)** If a certified program ceases operation, which includes seeking decertification, at any time prior to expiration of the program's certification, the program shall submit the certificate to the department. ~~The program shall provide, at~~ At least 90 days in advance of cessation, which includes seeking decertification, unless there is some type of emergency, written notification or decertification, the program shall provide to the department and the ~~tenant advocate~~ office of long-term care ombudsman ~~written notification of the date on which the program will cease operation, which includes seeking decertification or decertify.~~

ITEM 16. Amend subrule 69.20(2) as follows:

**69.20(2)** If a certified program plans to cease operation, which includes seeking decertification, at the time the program's certification expires, the program shall provide written notice of this fact to the department and the ~~tenant advocate~~ office of long-term care ombudsman at least 90 days prior to expiration of the certification.

ITEM 17. Amend subrule 69.20(6) as follows:

**69.20(6)** When a program ceases operation, which includes seeking decertification, ~~tenant advocates~~ representatives from the office of long-term care ombudsman shall be allowed by the program to privately meet with tenants to provide education and service options.

ITEM 18. Amend paragraph **69.21(2)“b”** as follows:

*b.* The telephone number for the office of the ~~tenant advocate~~ long-term care ombudsman.

ITEM 19. Amend paragraph **69.23(1)“i”** as follows:

*i.* Requires maximal assistance with activities of daily living; or

ITEM 20. Adopt the following new paragraph **69.23(1)“j”**:

*j.* Despite intervention, chronically urinates or defecates in places that are not considered acceptable according to societal norms, such as on the floor or in a potted plant.

ITEM 21. Amend rule 481—69.24(231C) as follows:

**481—69.24(231C) Involuntary transfer from the program.**

**69.24(1) Program initiation of transfer.** If a program initiates the involuntary transfer of a tenant and the action is not the result of a monitoring, including a complaint investigation or program-reported incident investigation, by the department and if the tenant or tenant's legal representative contests the transfer, the following procedures shall apply:

*a.* The program shall notify the tenant or tenant's legal representative, in accordance with the occupancy agreement, of the need to transfer the tenant and of the reason for the transfer and shall include the contact information for the ~~tenant advocate~~ office of long-term care ombudsman.

b. The program shall immediately provide to the tenant-advocate office of long-term care ombudsman, by certified mail, a copy of the notification and notify the tenant's treating physician, if any.

c. Pursuant to statute, the tenant-advocate office of long-term care ombudsman shall offer the notified tenant or tenant's legal representative assistance with the program's internal appeal process. The tenant or tenant's legal representative is not required to accept the assistance of the tenant-advocate office of long-term care ombudsman.

d. If, following the internal appeal process, the program upholds the transfer decision, the tenant or tenant's legal representative may utilize other remedies authorized by law to contest the transfer.

**69.24(2) *Transfer pursuant to results of monitoring or complaint or program-reported incident investigation by the department.*** If one or more tenants are identified as exceeding the admission and retention criteria for tenants and need to be transferred as a result of a monitoring or a complaint or program-reported incident investigation conducted by the department, the following procedures shall apply:

~~a. *Notification of the program.* Within 20 working days of the monitoring or complaint or program-reported incident investigation, the department shall notify the program, in writing, of the identification of any tenant who exceeds admission and retention criteria.~~

~~b. *Notification of others.* Each identified tenant, the tenant's legal representative, if applicable, and other providers of services to the tenant shall be notified of their opportunity to provide responses including: specific input, written comment, information, and documentation directly addressing any agreement or disagreement with the identification. All responses shall be provided to the department within 10 days of receipt of the notice.~~

~~c. a. *Program agreement with the department's finding.* If the program agrees with the department's finding and the program begins involuntary transfer proceedings, the program's internal appeal process in subrule 69.24(1) shall be utilized for appeals.~~

~~d. b. *Program disagreement with the department's finding.* If the program does not agree with the department's finding that the tenant exceeds admission and retention criteria, the program may collect and submit all responses to the department, including those from other interested parties appeal the department's final report as provided in rule 481—67.14(17A,231B,231C,231D,85GA,HF2365). In the program's response, the program shall identify the tenant, list the known responses from others, and note the program's agreement or disagreement with the responses from others. The program's response shall be submitted to the department within 10 working days of the receipt of the notice. Submission of a response does not eliminate the applicable requirements, including submission of a plan of correction under 481—subrule 67.10(5). Other persons may also submit information directly to the department.~~

~~(1) *Consideration of response.* Within 10 working days of receipt of the program's response for each identified tenant, the department shall consider the response and make a final finding regarding the continued retention of a tenant.~~

~~(2) *Amending the regulatory insufficiency.* If the department's determination is to amend the regulatory insufficiency based on the response, the department shall modify the report of findings.~~

~~(3) *Retaining regulatory insufficiency.* If the department retains the regulatory insufficiency, the department shall review the plan of correction in accordance with this chapter and 481—Chapter 67. The department shall notify the program of the opportunity to appeal the report findings as they relate to the admission and retention decision. In addition, the department shall provide to the tenant or the tenant's legal representative the contact information for the tenant advocate. A copy of the final report shall also be sent to the tenant advocate.~~

~~(4) *Effect of the filing of an appeal.* If an appeal is filed, the tenant who exceeds admission and retention criteria shall be allowed to continue living at the program until all administrative appeals have been exhausted. Appeals filed that relate to the tenant's exceeding admission and retention criteria shall be heard within 30 days of receipt, and appropriate services to meet the tenant's needs shall be provided during that period of time.~~

~~(5) c. *Request for waiver of criteria for retention of a tenant in a program.* To allow a tenant to remain in the program, the program may request a waiver of criteria for retention of a tenant pursuant~~

to rule 481—69.7(231B,231C,231D) from the department within 10 working days of the receipt of the report.

ITEM 22. Adopt the following **new** paragraph **69.26(3)“d”**:

*d.* The service plan updated within 30 days of the tenant’s occupancy shall be signed and dated by all parties.

ITEM 23. Amend paragraph **69.26(4)“d”** as follows:

*d.* For tenants who are unable to plan their own activities, including tenants with dementia, a list of person-centered planned and spontaneous activities based on the tenant’s abilities and personal interests; and

ITEM 24. Amend rule 481—69.27(231C) as follows:

**481—69.27(231C) Nurse review.**

**69.27(1)** If a tenant does not receive personal or health-related care, but an observed significant change in the tenant’s condition occurs, a nurse review shall be conducted. If a tenant receives personal or health-related care, the program shall provide for a registered nurse ~~or a licensed practical nurse via nurse delegation~~:

**69.27(1) a.** To monitor, at least every 90 days, or after a significant change in the tenant’s condition, any tenant who receives program-administered prescription medications for adverse reactions to the medications and to make appropriate interventions or referrals, and to ensure that the prescription medication orders are current and that the prescription medications are administered consistent with such orders; and

**69.27(2) b.** To ensure that health care professionals’ orders are current for tenants who receive health care professional-directed care from the program; and

**69.27(3) c.** To assess and document the health status of each tenant, to make recommendations and referrals as appropriate, and to monitor progress relating to previous recommendations at least every 90 days and whenever there are changes in the tenant’s health status; and

**69.27(4) d.** To provide the program with written documentation of the ~~activities under the service plan, as set forth in rule 481—69.26(231C)~~ nurse review, showing the time, date and signature.

**69.27(2)** A licensed practical nurse via nurse delegation may complete the tasks required by this rule, except when a tenant experiences a significant change in condition.

NOTE: Refer to Table A at the end of this chapter. If the program does not provide personal or health-related care to a tenant, nurse review is not required.

ITEM 25. Amend subparagraph **69.28(5)“a”(3)** as follows:

(3) Successfully completing ~~a course~~ an ANSI-accredited certified food protection manager program meeting the requirements for a food protection program included in the Food Code adopted pursuant to Iowa Code chapter 137F. Another ~~course~~ program may be substituted if the ~~course’s~~ program’s curriculum includes substantially similar competencies to a ~~course~~ program that meets the requirements of the Food Code and the provider of the ~~course~~ program files with the department a statement indicating that the ~~course~~ program provides substantially similar instruction as it relates to sanitation and safe food handling.

ITEM 26. Amend subrule 69.29(4) as follows:

**69.29(4)** A dementia-specific assisted living program shall have one or more staff persons who monitor tenants as indicated in each tenant’s service plan. The staff shall be awake and on duty 24 hours a day on site and in the proximate area. The staff shall check on tenants as indicated in the tenants’ service plans.

A non-dementia-specific assisted living program shall have one or more staff persons who monitor tenants as indicated in each tenant’s service plan. The staff shall be able to respond to a call light or other emergent tenant needs and be in the proximate area 24 hours a day on site. The staff shall check on tenants as indicated in the tenants’ service plans.

ITEM 27. Amend subrule 69.30(3) as follows:

**69.30(3)** All Dementia-specific continuing education.

a. Except as otherwise provided in this subrule, all personnel employed by or contracting with a dementia-specific program shall receive a minimum of two hours of dementia-specific continuing education annually.

b. Direct-contact personnel employed by or contracting with a dementia-specific program or employed by a contracting agency providing staff to a dementia-specific program shall receive a minimum of eight hours of dementia-specific continuing education annually.

c. Contracted personnel who have no contact with tenants (e.g., persons providing lawn maintenance or snow removal) are not required to receive the two hours of training required in paragraph "a."

d. The contracting agency may provide the program with documentation of dementia-specific continuing education that meets the requirements of this subrule.

ITEM 28. Amend subrule 69.32(2) as follows:

**69.32(2)** ~~An operating alarm system shall be connected to each exit door in a dementia-specific program. A program serving a person(s) with cognitive disorder or dementia, whether in a general or dementia-specific setting, shall have:~~

~~a. Written procedures regarding alarm systems and appropriate staff response when a tenant's service plan indicates a risk of elopement or a tenant exhibits wandering behavior.~~

~~b. Written procedures regarding appropriate staff response if a tenant with cognitive disorder or dementia is missing.~~

ITEM 29. Renumber subrules **69.32(3)** and **69.32(4)** as **69.32(5)** and **69.32(6)**.

ITEM 30. Adopt the following **new** subrule 69.32(3):

**69.32(3)** The program shall obtain approval from the state fire marshal division of the department of public safety before the installation of any delayed-egress specialized locking systems.

ITEM 31. Adopt the following **new** subrule 69.32(4):

**69.32(4)** A program serving a person(s) with cognitive disorder or dementia shall have:

a. Written procedures regarding alarm systems, if an alarm system is in place.

b. Written procedures regarding appropriate staff response when a tenant's service plan indicates a risk of elopement or when a tenant exhibits wandering behavior.

c. Written procedures regarding appropriate staff response if a tenant with cognitive disorder or dementia is missing.

ITEM 32. Amend paragraph **69.35(1)"e"** as follows:

~~e. The structure in which a program is housed shall be built, at a minimum, of Type V (111) construction as provided in Section 22.3.1.3.3 and Sections 6.2.1A to 6.2.2 of NFPA 101, Life Safety Code, 2003 edition, published by the National Fire Protection Association, 1 Batterymarch Park, Quincy, Massachusetts 02169-7471, or as required in~~ comply with the administrative rules promulgated by the state fire marshal.

ITEM 33. Rescind paragraph **69.35(3)"e."**

ITEM 34. Reletter paragraph **69.35(3)"f"** as **69.35(3)"e."**

ITEM 35. Rescind paragraphs **69.35(4)"d"** and **"f."**

ITEM 36. Reletter paragraph **69.35(4)"e"** as **69.35(4)"d."**

ITEM 37. Amend paragraph **70.9(1)"c"** as follows:

c. Apply for certification or recertification within 90 calendar days following verification of compliance with ~~life safety~~ the requirements of the state fire marshal division of the department of public safety pursuant to this chapter.

ITEM 38. Rescind paragraph 70.9(1)“d.”

ITEM 39. Reletter paragraph 70.9(1)“e” as 70.9(1)“d.”

ITEM 40. Amend rule 481—70.18(231D) as follows:

**481—70.18(231D) ~~Structural and life safety~~ Plan reviews of a building for a new program.**

**70.18(1)** Before a building is constructed or remodeled for use in a new program, the state fire marshal division of the department of public safety shall review the blueprints for compliance with requirements pursuant to this chapter. Construction or remodeling includes new construction, remodeling of any part of an existing building, addition of a new wing or floor to an existing building, or conversion of an existing building.

**70.18(2)** A program applicant shall submit ~~to the department~~ blueprints wet-sealed by an Iowa-licensed architect or Iowa-licensed engineer and the blueprint plan review fee as stated in Iowa Code section 231D.4 to the Department of Public Safety, State Fire Marshal Division, 215 E. 7th Street, Third Floor, Des Moines, Iowa 50319.

**70.18(3)** Failure to submit the blueprint plan review fee with the blueprints shall result in delay of the blueprint plan review until the fee is received.

**70.18(4)** The state fire marshal division of the department of public safety shall review the blueprints and notify the Iowa-licensed architect or Iowa-licensed engineer in writing regarding the status of compliance with requirements.

**70.18(5)** The Iowa-licensed architect or Iowa-licensed engineer shall respond to the state fire marshal division of the department of public safety to state how any noncompliance will be resolved.

**70.18(6)** Upon final notification by the state fire marshal division of the department of public safety that the blueprints meet structural and life safety requirements, construction or remodeling of the building may commence.

**70.18(7)** The state fire marshal division of the department of public safety shall schedule an on-site visit of the building site with the contractor, or Iowa-licensed architect or Iowa-licensed engineer, during the construction or remodeling process to ensure compliance with the approved blueprints. Any noncompliance must be resolved prior to approval for certification.

ITEM 41. Amend rule 481—70.19(231D) as follows:

**481—70.19(231D) ~~Structural and life safety~~ Plan review prior to the remodeling of a building for a certified program.**

**70.19(1)** Before a building for a certified program is remodeled, the state fire marshal division of the department of public safety shall review the blueprints for compliance with requirements set forth in rule 481—70.35(231D). Remodeling includes modification of any part of an existing building, addition of a new wing or floor to an existing building, or conversion of an existing building.

**70.19(2)** A certified program shall submit ~~to the department~~ blueprints wet-sealed by an Iowa-licensed architect or Iowa-licensed engineer and the blueprint plan review fee as stated in Iowa Code section 231D.4 to the Department of Public Safety, State Fire Marshal Division, 215 E. 7th Street, Third Floor, Des Moines, Iowa 50319.

**70.19(3)** Failure to submit the blueprint plan review fee with the blueprints shall result in delay of the blueprint plan review until the fee is received.

**70.19(4)** The state fire marshal division of the department of public safety shall review the blueprints within 20 working days of receipt and immediately notify the Iowa-licensed architect or Iowa-licensed engineer in writing regarding the status of compliance with requirements.

**70.19(5)** The Iowa-licensed architect or Iowa-licensed engineer shall respond to the state fire marshal division of the department of public safety in 20 working days to state how any noncompliance will be resolved.

**70.19(6)** Upon final notification by the state fire marshal division of the department of public safety that the blueprints meet structural and life safety requirements, remodeling of the building may commence.



**70.19(7)** The state fire marshal division of the department of public safety shall schedule an on-site visit of the building with the contractor, or Iowa-licensed architect or Iowa-licensed engineer, during the remodeling process to ensure compliance with the approved blueprints. Any noncompliance must be resolved prior to approval for continued certification or recertification of the program.

ITEM 42. Amend subparagraph **70.28(5)“a”(3)** as follows:

(3) Successfully completing ~~a course~~ an ANSI-accredited certified food protection manager program meeting the requirements for a food protection program included in the Food Code adopted pursuant to Iowa Code chapter 137F. Another ~~course~~ program may be substituted if the ~~course's~~ program's curriculum includes substantially similar competencies to a ~~course~~ program that meets the requirements of the Food Code and the provider of the ~~course~~ program files with the department a statement indicating that the ~~course~~ program provides substantially similar instruction as it relates to sanitation and safe food handling.

ITEM 43. Adopt the following new paragraph **70.32(2)“c”**:

c. The program shall obtain approval from the state fire marshal division before the installation of any delayed-egress specialized locking systems.

ITEM 44. Amend subrule 70.35(10) as follows:

**70.35(10)** The program shall meet other building and public safety codes, including:

- ~~a. The Americans with Disabilities Act.~~
- ~~b. Applicable regulations of the Occupational Safety and Health Administration.~~
- ~~c. Rules~~ rules pertaining to accessibility contained in the state building code in 661—Chapter 302 and provisions of the state building code relating to persons with disabilities.
- ~~d. Other applicable provisions of the state building code and local building codes.~~

[Filed 2/26/16, effective 4/20/16]

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EDITOR'S NOTE: For replacement pages for IAC, see IAC Supplement 3/16/16.