

**NOTE:** This guideline is designed to provide an outline of the changes in Wisconsin Administrative Code, Chapter DHS 83, effective April 1, 2009. This guideline does not include all of the changes effective in the new rule. Furthermore, this guideline does not include the entire area of change nor state the exact rule language.

## **SUBCHAPTER 1: GENERAL PROVISIONS**

### **§ DHS 83.02 Definitions**

Reduced overall number of definitions  
Eliminated definitions no longer in use  
Updated definitions to current terminology  
Added definitions

## **SUBCHAPTER II: LICENSING**

### **§ DHS 83.05 Application Requirements**

- (2) An application for initial licensure shall be accompanied by all of the following:
- (c) Fire inspection form
  - (d) All required fees
  - (e) Balance sheet
  - (f) Evidence of 60 days projected operating funds

### **§ DHS 83.06 Program Statement**

- (1) The program statement shall accurately include all of the following:
- (b) Employee availability, including 24 hour staffing patterns and the availability of a licensed nurse, if any
  - (g) Limitations of services, including the criteria for determining who may reside in the CBRF
- (2) Availability
- (a) Before finalizing an agreement to provide care, the CBRF shall provide its program statement to each person seeking placement. CBRF's serving only clients of a government correctional agency are exempt from §83.06(2)(a).

### **§ DHS 83.07 Fit and Qualified**

- (2) Standards
- (a) Compliance history with Wisconsin or any other state's licensing requirements and with any federal certification requirements
  - (b) Criminal history
    - 2. Crimes or acts subject to elder abuse reporting
    - 3. Crimes or acts related to the manufacture, distribution, prescription, use, or dispensing of a controlled substance
  - (c) Financial history
    - 1. Financial history and financial viability of the owner or related organization
    - 2. Outstanding debts or amounts due to the department or other government agencies, including unpaid forfeitures and fines

**§ DHS 83.10 Changes in Ownership**

- (1) Duties of the Transferor
  - (a) Notify the Department within 30 days
  - (b) Remains responsible for the operation
  - (c) Disclose any existing Department waiver, variance, or outstanding deficiencies
  - (d) Follow the requirements for transferring financial responsibility under §83.34(7)
  - (e) Remain liable for all forfeitures assessed against the facility for violations occurring prior to transfer of ownership
  - (f) Notify residents no less than 7 days in advance of the transfer
- (2) Duties of the Transferee
  - (a) Notify the Department within 30 days
  - (b) If no less than 30 days notice given to residents, advanced notice requirements for discharge may not be enforced
- (3) Transferability
  - (b) Notify Department within 30 days
    - 1. Removing, adding, or substituting an individual as a partner, dissolving the existing partnership and creating a new partnership
    - 2. Removing, adding, or substituting any member in a LLC
    - 3. Making a change in corporate structure

**§ DHS 83.11 Facility Closing**

- (1) Any CBRF that intends to close shall notify the Department in writing at least 30 days before closing
- (2) If a CBRF is closing, intends to close, or changes its type or level of service or means of reimbursement and will relocate 5 residents or 5% of the CBRF's residents, whichever is greater, the CBRF shall follow the procedure under §50.03(14), Wis. Stats.

**§ DHS 83.12 Investigation, Notification, and Reporting Requirements**

- (2) Investigating and reporting abuse, neglect, and misappropriation of property
  - (a) Caregiver
    - 1. The CBRF to take immediate steps to ensure safety
    - 2. The CBRF shall report to the department within 7 calendar days
  - (b) Non-caregiver or resident allegation. When there is an allegation of abuse or neglect of a resident, or misappropriation of property by a non-caregiver or resident, the CBRF shall follow the elder abuse reporting or the adult at risk requirements
- (3) Investigating injuries of unknown source
  - (a) A CBRF shall investigate any of the following:
    - 1. An injury that was not observed
    - 2. The source of an injury to a resident that cannot be adequately explained by the resident
    - 3. An injury that appears suspicious because of the extent or the location of the injury
  - (b) The CBRF shall maintain documentation of each investigation
- (4) Other reporting

- (a) Any time a resident's whereabouts are unknown, except those instances when a resident who is competent chooses not to disclose their whereabouts or location to the CBRF
  - (c) Any incident or accident resulting in serious injury requiring emergency room treatment
  - (f) Any time the CBRF must evacuate and temporarily relocate residents and employees
- (6) Documentation. All written reports shall include, at a minimum, the time, date, place, individuals involved, details of the occurrence, and the action taken to ensure resident's health, safety, and well-being

**§ DHS 83.13 General Records, Retention and Posting**

New section

**SUBCHAPTER III: PERSONNEL**

**§ DHS 83.14 Licensee**

(2) Responsibilities

- (b) 30-day written notice to Department of change in client group. May not implement until written approval received from the Department
- (c) Notice to Department of change in capacity or class. May not implement until written approval received from the department
- (g) Information to the Department relating to involuntary administration of psychotropic medication
- (h) Statement of deficiency shall remain posted for 90 days
- (k) Presence of other occupants

**§ DHS 83.15 Administrator**

(1) Qualifications

- (a) Associate degree or higher in a health care related field; OR
- (b) Bachelor's degree in a field other than health care AND one year experience working in a health care related field having direct contact with one or more of the client groups identified in §83.02(16); OR
- (c) Bachelor's degree in a field other than health care AND have completed a department-approved administrator's training course; OR
- (d) At least two years experience working in a health care related field having direct contact with one or more of the client groups identified in §83.02(16) AND have completed a Department-approved administrator's training course; OR
- (e) A valid nursing home administrator's license

(2) Qualified administrators on record with the Department on 4/1/09 are exempt.

(3) Responsibilities:

- (a) Supervise daily operation and ensure residents receive proper care and treatment
- (b) Responsible for the training and competency of all employees

**§ DHS 83.17 Hiring and Employment**

(2) Employee Health

- (a) TB screening shall be conducted using centers for disease control preventions and standards
- (b) Re-screened for clinically apparent communicable disease based on likelihood of exposure

**SUBCHAPTER IV: ORIENTATION AND TRAINING**

**§ DHS 83.19 Orientation.** Before an employee performs any job duties, the CBRF shall provide orientation training in all of the following:

- (2) Prevention and reporting of resident abuse, neglect, and misappropriation
- (3) Information regarding assessed needs and individual services for each resident the employee is responsible
- (5) CBRF policies and procedures
- (6) Recognizing and responding to resident changes of condition

**§ DHS 83.20 Department Approved Training**

(1) Approved Training

- (a) Training for fire safety, first aid and choking, standard precautions and medications shall be approved by the department and shall be provided by trainers approved by the Department. Department approvals issued prior to 4/1/09 will expire 4/1/10.
- (b) The CBRF shall maintain documentation of the training

**§ DHS 83.21 All Employee Training.** The CBRF shall provide, obtain, or otherwise ensure employee training in:

- (1) Resident Rights. Specific training topics required. Training to be completed within 90 days.
- (2) Client Group. Specific training topics required. Training to be completed within 90 days.
- (3) Challenging Behaviors. Specific training topics required. Training to be completed within 90 days.

**§ DHS 83.22 Task Specific Training.** The CBRF shall provide, obtain, or otherwise ensure employee training prior to assuming responsibilities in:

- (1) Assessment of Residents. Specific topic areas required. Training to be completed prior to assuming these job responsibilities.
- (2) ISP Development. Specific topic areas required. Training to be completed prior to assuming these job responsibilities.
- (3) Provision of Personal Care. Specific topic areas required. Training to be completed prior to assuming these job responsibilities.
- (4) Dietary. Specific topic areas required. Training to be completed within 90 days of assuming these job responsibilities.

**§ DHS 83.24 Exemptions**

- (1) Employees who have completed Department approved training prior to 4/1/09 or who receive Department approved training prior to 4/1/10 exempt from training under §83.20
- (2) A practitioner, licensed pharmacist, RN, or LPN is exempt from training as specified in §83.20(2)(a),(c) and (d), §83.21, and §83.22
- (3) Standard Precautions
  - (a) EMTs
  - (b) Employees who can provide documentation of training within previous year
  - (c) Nurse aides certified after 1999 and in good standing on the WI Nurse Aide Registry
- (4) Fire Safety. Firefighters are exempt.
- (5) First Aid and Choking
  - (a) EMTs
  - (b) Student nurses who have completed related training
- (6) Medication Administration and Management
  - (a) Nurse aides who have completed a medication aide training program and are in good standing on the WI Nurse Aide Registry
  - (b) Student nurses currently enrolled in a nursing program and who have completed a medication administration course
  - (c) Licensed persons whose licensure and scope of practice allows medication administration
- (7) Client Group, Resident Rights, and Challenging Behaviors
  - (d) Student nurses who have successfully completed related courses
- (8) Provision of Personal Care. Nurse aides in good standing on the WI Nurse Aide Registry
- (9) Assessment and ISP Development
  - (d) Student nurses who have successfully completed related courses
- (10) Dietary Training
  - (c) Employees who have completed an associate in applied science degree in culinary arts
  - (d) A certified dietary manager

**§ DHS 83.25 Continuing Education.** The administrator and resident care staff shall receive at least 15 hours per calendar year of continuing education. Continuing education shall include, at a minimum, all of the following:

- (1) Standard precautions
- (2) Client group related training
- (3) Medications
- (4) Resident Rights
- (5) Prevention and report of abuse, neglect, and misappropriation
- (6) Fire safety and emergency procedures, including first aid

**DHS 83.26 Documentation**

- (1) Training under §83.21 and §83.22 shall include the name of instructor, dates of training, description of course content, and length of training

**SUBCHAPTER V: ADMISSION, RETENTION AND DISCHARGE**

**§ DHS 83.27 Limitations on Admissions and Retention**

(1) License Capacity

- (a) No CBRF may have more residents, including respite, than the maximum bed capacity on the license
- (b) The CBRF may not have more than 4 residents, or 10% of the licensed capacity who need more than 3 hours of nursing care per week

(2) Admission and Retention Limitations

- (b) A person who is destructive of property or self, or who is physically or mentally abusive, unless the CBRF has sufficient resources to care for such an individual
- (d) Who needs more than 3 hours of nursing care per week except for a temporary condition for no more than 30 days. The Department may grant a waiver if:
  - 1. The resident's condition is stable and predictable...
- (f) A person whose condition requires care above intermediate level nursing care
- (h) A person who is incapacitated as defined under §50.06(1), Wis. Stats., unless...

**§ DHS 83.28 Admission Procedures**

(4) Health Screening

- (a) Resident Health
  - 2. Screening for TB and immunizations shall be conducted using center for disease control and prevention standards
- (b) Respite Health
  - 2. Respite care health screening shall be conducted prior to the second placement in a calendar year
  - 3. Screening for TB and immunizations shall be conducted using center for disease control and prevention standards

(5) Upon admission, the CBRF shall develop a temporary service plan

(7) At the time of admission, the CBRF shall determine if the resident has executed an advanced directive

**§ DHS 83.29 Admission Agreement**

(1) Services and Charges

- (b) Written information to be provided before or at the time of admission to each resident, including respite

(2) To be given in writing and orally in the language of the resident. Admission is contingent upon signing and dating of admission agreement

- (a) Accurate description of basic services provided, the rate and the method of payment
- (b) Information about all additional services offered that are not included in the basic services and the fees charged for each of the services
- (c) Method for notifying residents of change in charges for services
- (d) Terms for resident notification to the CBRF of voluntary discharge
- (e) Terms for refunding charges for services paid in advance, entrance fees, or security deposits in case of transfer, death, or voluntary or involuntary discharge.

(3) Refunds

- (a) All refunds due a resident under terms of the admission agreement shall be returned within 30 days after date of discharge
- (b) Entire entrance fee shall be refunded during the first 6 months following the date of initial admission

**§ DHS 83.30 Family Care**

If a resource center is available for the facility, the CBRF shall provide information to prospective residents and refer residents to an aging and disability resource center

**§ DHS 83.31 Discharge or Transfer**

- (2) Emergency or temporary transfers may not result in involuntary discharge
- (4) Discharge or Transfer Initiated by CBRF
  - (c) Notice requirements
    - 2. Written request within 10 days for review by the Department
  - (d) Department Review
    - 2. Facility may provide additional information to department within 7 days after receiving copy of letter requesting review
    - 3. Department shall complete its review within 10 days
- (6) Disbursement of Funds
  - (b) Resident funds shall be returned within 14 days after discharge

**SUBCHAPTER VI: RESIDENT RIGHTS AND PROTECTIONS**

**§ DHS 83.32 Rights of Residents**

- (3) In addition to the rights under §50.09, Wis. Stats., each resident shall have all of the following rights:
  - (a) – (n)

**§ DHS 83.34 Resident Funds**

- (4) Provide written final accounting of resident funds held and disburse money within 14 days
- (5) Licensee, administrator, or employee may not be appointed POA unless related

**SUBCHAPTER VII: RESIDENT CARE AND SERVICES**

**§ DHS 83.35 Assessment, ISP, and Evaluations**

- (1) Assessment
  - (a) Respite care persons shall be assessed before admission and when there is a change in condition. For emergency admission, the assessment shall be conducted within 5 days
  - (b) Face-to-face interview as appropriate
  - (c) The assessment, at a minimum, shall include:
    - 1. Oral health and mobility status
    - 3. Presence and intensity of pain

- 7. Risks, including choking, falling, and elopement
- (2) Temporary service plan required upon admission for residents and respite
- (3) Comprehensive IS
  - (a) Scope
    - 3. Establish measurable goals with specific time limits for attainment
  - (c) The CBRF shall implement and follow the ISP as written
  - (d) ISP reviewed annually. The resident or legal representative shall sign the ISP acknowledging the involvement in, understanding of, and agreement with the ISP
  - (f) Resident care staff will have continual access to assessment and ISP
- (5) Evacuation Limitations
  - (b) Evaluation of evacuation limitations to be conducted annually

**§ DHS 83.36 Staffing Requirements**

- (1) Adequate Staffing
  - (a) The CBRF shall provide employees in sufficient numbers on a 24-hour basis
  - (b) The CBRF shall ensure the following:
    - 1. The administrator or designee to ensure the CBRF is providing safe and adequate care, treatment, and services
- (2) Maintain a current written schedule for staffing, including employee's full name, job assignment, and time worked

**§ DHS 83.37 Medications**

- (1) General Requirements
  - (a) Written practitioner's order for any prescription, OTC, or dietary supplement administered
  - (b) Prescription medications shall come from a licensed pharmacy or a physician
  - (c) Develop and implement a medication packaging system policy
  - (e) Regimen Review
    - 2. At least annually, a physician, pharmacist, or RN to conduct on-site review
    - 3. Obtain report of written findings and address any irregularities for appropriate action.
  - (f) More than one prescriber
    - 2. For residents who self administer, a list of current medications shall be provided to all practitioners
  - (g) Disposition of medications
    - 1. When a resident is discharged, the resident's medications shall be sent with the resident
    - 2. Changed or discontinued medication may be retained for no more than 30 days unless an order by a physician or a request by a pharmacist is written every 30 days to retain the medication
    - 3. The CBRF shall develop and implement a policy for disposing medications
  - (h) Scheduled psychotropic medications
    - 1. Residents receiving psychotropic meds shall be reassessed by a pharmacist, practitioner, or RN at least quarterly
  - (i) PRN use of psychotropic medications

1. ISP shall include the rationale and detailed description of behaviors which indicate need
  2. Administrator or qualified designee shall monitor at least monthly
  3. Documentation in resident's record
- (L) Written information shall be available to resident care staff on the purpose and side effects of medications taken by residents
- (2) Medication Administration
- (b) Medication Administration supervised
    1. The RN, practitioner, or pharmacist coordinates, directs, and inspects the administration of medications and the administration system
  - (c) Medications available over the-counter may be excluded from unit dose packaging, unless the physician specifies unit dose
  - (e) Injectables, nebulizers, stomal, and enternal medications and medications, treatments, or preparations delivered vaginally or rectally shall be administered by a RN or a LPN within the scope of their license. Medication administration under §83.37(2)(e) may be delegated
- (3) Storage
- (a) Original containers
    1. Transfer of medication to another container may be delegated to other personnel by a practitioner, RN, or pharmacist
    2. Medication transferred to another container shall have a legible label on the new container, including the resident's name, medication name, dose, and instructions. The CBRF shall maintain the original container until the transferred medication is gone
  - (b) Employees who have completed medication administration training may transfer unit doses of medications into packages for the resident for use during unplanned or non-routine events
- (4) CBRFs exclusively serving residents in the custody of a government correctional agency or who are alcohol or drug dependent is exempt from the requirements in §83.37(2)(a)2

**§ DHS 83.38 Program Services**

- (1) As appropriate, the CBRF shall teach residents the necessary skills to achieve and maintain the highest level of functioning
- (c) The CBRF shall develop and post the activity schedule
  - (f) The CBRF shall provide services to meet the resident's communication needs
  - (g) Health monitoring
    1. Each resident shall have an annual physical health examination, unless seen by a physician more frequently
    2. When indicated, the CBRF shall observe residents' food and fluid intake and acceptance of diet and report significant deviations from normal intake patterns to the physician or dietician
    3. The CBRF shall document communication with the resident's physician and other health care providers, and shall record any changes in the resident's condition in the resident's record

February 6, 2009

- (h) The CBRF shall provide medication administration appropriate to the resident's needs
  - (i) The CBRF shall provide services to manage resident's behaviors that may be harmful
  - (k) CBRFs that transport residents shall develop and implement written policies addressing the safe and secure transportation of residents
- (2) Terminally Ill Resident Services
- (a) A CBRF may provide more than 3 hours of nursing care per week if:
    - 2. The resident's primary care provider is not a licensed hospice or licensed home health agency, and the CBRF obtains a waiver from the department

**§ DHS 83.39 Infection Control Program**

- (1) The CBRF shall establish and follow an infection control program
- (2) The infection control program shall include written policies and training for employees
- (3) Employees shall follow hand washing procedures according to centers for disease control and prevention standards
- (4) Other occupants shall comply with infection control requirements in §83.17(2)

**§ DHS 83.40 Oxygen Storage**

New section

**§ DHS 83.41 Food Service**

- (1) General Requirements
  - (a) Food supply
    - 1. The CBRF shall maintain a food supply adequate to meet the needs of the residents
    - 2. Food shall be obtained from acceptable sources
  - (c) All equipment and utensils shall be cleaned using separate steps for pre-washing, washing, rinsing, and sanitizing. Residential dishwashers may be used for kitchens serving 20 or fewer residents
- (2) Nutrition
  - (a) Diets
    - 1. The CBRF shall provide each resident with palatable food
  - (b) Meals
    - 2. The CBRF shall provide at least 3 meals unless otherwise arranged. A nutritious snack shall be offered in the evening or more often as consistent with the resident's dietary needs
  - (c) Menus
    - 2. The CBRF shall prepare weekly menus and shall make menus available for residents. Deviations from the planned menu shall be documented on the menu
- (3) Sanitation and Safety
  - (c) The CBRF is required under § DHS 145.04 to report suspected incidents of food borne disease to the local public health officer

**§ DHS 83.42 Resident Record**

- (1) Each record shall include the following:
  - (j) Documentation to accurately describe the resident's condition, significant changes in condition, changes in treatment, and response to treatment
  - (s) Photocopy of any court order or other document authorizing another person to speak or act on behalf of the resident, or other legal documents
  - (u) Completed notice of pre-admission assessment required under §83.30

**SUBCHAPTER VIII: PHYSICAL ENVIRONMENT**

**§ DHS 83.43 Furnishings and Equipment**

- (1) The CBRF shall provide a living environment that is safe, clean, comfortable, and homelike
- (2) Bedroom Furnishings
  - (c) A clean comfortable pillow, bedspread, and blankets adequate for the season
  - (d) Clean sheets, pillowcases, towels, and washcloths adequate to meet the needs of the resident

**§ DHS 83.44 Housekeeping Services**

- (1) Laundry
  - (a) The CBRF shall make an adequate number of laundry appliances available to residents who choose to do their own laundry. The CBRF shall have a laundry area to sort, process, and store clean and soiled laundry
  - (c) If the clothes dryer requires a vent, the CBRF shall use dryer vent tubing that is of rigid material with a fire rating that exceeds the temperature of the dryer
- (2) Cleanliness
  - (a) The CBRF shall keep all rooms clean and shall make reasonable attempts to keep all rooms free from odors

**§ DHS 83.45 Building Maintenance and Site**

- (3) The CBRF shall ensure that cleaning compounds, polishes, insecticides, and toxic substances are labeled and stored in a secure area

**§ DHS 83.46 Building Support Systems**

- (1) A CBRF shall maintain comfortable and safe temperatures. The CBRF shall provide tempered air to eliminate cold air drafts
- (4) Ground fault interrupt protection shall be required for all outlets within 6 feet of a plumbing fixture

**SUBCHAPTER IX: SAFETY**

**§ DHS 83.47 Fire Safety Requirements**

- (2) Emergency and Disaster Plan
  - (a) Written plan

1. The plan shall include procedures for any resident who refuses to follow evacuation or emergency procedures
3. Procedures to follow when a resident is missing
  - (d) Drills shall be limited to the employees scheduled to work at that time. Documentation shall include the date and time of the drill and the CBRF's total evacuation time
  - (e) Tornado, flooding, or other emergency or disaster evacuation drills shall be conducted at least semi-annually
  - (f) CBRFs using horizontal evacuation shall document the total evacuation time of the fire zone evacuated
  - (h) The phone numbers for emergency services shall be posted near phones used by CBRF employees
- (3) The CBRF shall arrange for an annual inspection by the local fire authority or certified fire inspector and shall retain fire inspection reports for 2 years

**§ DHS 83.48 Fire Protection Systems**

- (1) Interconnected Smoke and Heat Detection System
  - (b) Smoke detectors powered by the CBRF's electrical system shall be tested not less than every other month
- (3) Testing
  - (a) Fire detection systems shall be inspected, cleaned, and tested annually by certified or trained and qualified personnel
  - (b) Sensitivity testing shall be performed at intervals in accordance with NFPA 72
- (4) Location
  - (f) In all non-resident living areas, except the furnace, bathroom, kitchen, and laundry room
- (8) Sprinkler Systems
  - (b) Installation and maintenance
    1. All sprinkler systems shall be maintained, inspected, and tested annually or at intervals determined by NFPA 72
    2. Sprinkler heads shall be placed at the top of each linen or trash chute and in the rooms where the chutes terminates
  - (c) All sprinkler systems shall have a reliable water supply. If the sprinkler system requires a mechanical device such as a compressor, pump, or motor, the device shall be supplied by a reliable source of emergency power

**§ DHS 83.49 Alternative Requirements to a Sprinkler System in a Small Class C CBRF**

- (1) Existing small class CA, small class CS, and small class CNA CBRF's using the exemption under §83.49(2) shall have a complete sprinkler system as required under §83.48(8) within 5 years of the effective date of this section

**§ DHS 83.50 Minimum Type of Construction**

- (2) Minimum Type of Construction for each Class of Licensure
  - (a) Shall meet the construction requirements in Table 83.50
    1. Construction Type IB

2. Construction Type IIA
3. Construction Type VB

**SUBCHAPTER X: BUILDING DESIGN**

**§ DHS 83.52 Common Dining and Living Space**

(1) Space per Resident

- (a) The minimum common dining and living space shall be 60 square feet per ambulatory or semi-ambulatory resident or other occupant, and 90 square feet per non-ambulatory resident or other occupant
- (c) Egress paths through common-use areas may not be counted in the common space calculation
- (d) Common dining space shall be large enough to accommodate all residents in no more than 2 shifts

**§ DHS 83.54 Resident Bedrooms**

(1) Design

- (a) Bedrooms shall be designed and equipped to allow residents to achieve the highest level of independent functioning and shall be fully accessible to the resident
- (c) Bedrooms shall open directly into a corridor, the resident's private living area, or common living space
- (d) Each resident shall have, or be provided within the bedroom, a closet or wardrobe with clothes hanging rods and shelves and drawer space adequate to reasonably meet the needs of the resident

(3) Capacity

- (a) Resident bedrooms shall accommodate no more than 2 residents per room
- (b) Facilities exclusively serving residents in the custody of a government correctional agency or who are alcohol or drug dependent may accommodate up to 3 residents per room if the facility was licensed before the effective date of this section

(5) Windows in the basement shall not be considered exits

**§ DHS 83.55 Bath and Toilet Areas**

(1) Number

- (a) The CBRF shall provide at least one toilet, one sink, and one bath or shower for every 10 residents and other occupants or fraction thereof
- (b) Grab bars shall be provided at toilet and bath fixtures as necessary to meet the needs of the residents

(3) All sink areas shall have dispensers for single use paper towels, cloth towel dispensing units, or electric hand dryers. This requirement does not apply to sink areas located in toilet rooms accessed directly from a resident bedroom

(4) Privacy

- (b) All toilet and bathing areas shall have floor to ceiling walls and door assembly

(6) Water Supply

- (b) The CBRF shall set the temperature of all water heaters connected to sinks, showers, and tubs used by residents at a temperature of at least 140 degrees. The

temperature of water at fixtures used by residents shall be automatically regulated by valves and may not exceed 115 degrees, except for CBRFs serving residents recovering from alcohol or drug dependency or clients of a government correctional agency

**§ DHS 83.57 Multiple Occupancies**

(1) Physical Separation

(c) A small CBRF located in one living unit of a duplex shall be a distinct living area and shall be separated between the 2 occupancies by at least a one hour fire rated construction

(d) If a common lobby and access area of a multiple occupancy building is not provided, the CBRF shall have separate entrance and exit doors

**§ DHS 83.59 Exits and Passageways**

(1) All habitable floors shall have at least 2 exits providing unobstructed travel to the outside. Small class AA CBRFs licensed on or before the effective date of this section with no more than 2 habitable floors may have one exit from the second floor

(d) Exit passageways, stairways, and doors in class AA facilities shall be at least 30 inches clear opening in width. Class AA facilities licensed on or before the effective date of this section shall have a minimum width of 28 inches clear opening

(f) Exit passageways and stairways to outside exits shall be at least 36 inches in width. Exit passageways and stairways to outside exits shall be at least 32 inches in width in facilities licensed on or before the effective date of this section

(g) All other required exits shall have at least a cleared pathway maintained to a public way or safe distance from the building

(h) The exit path from the CBRF through the garage to the outside shall be clear, safe, and unobstructed

(2) Doors

(b) A solid core wood door or an equivalent fire resistive door shall be provided at any interior stair between the basement and the first floor. Enclosed furnace and laundry areas shall have self-closing solid core wood doors or an equivalent fire resistive door when located on a common level with resident bedrooms

(e) Toilet room doors shall not swing into a toilet room unless equipped with 2-way hardware

(4) Delayed Egress

New section

(5) Stairs and Shafts

(a) All required interior and exterior exit stairways shall be in compliance with COMM 61. For small CBRFs, all required interior and exterior stairways shall be in compliance with the Uniform Dwelling Code

(b) One or more handrails shall be provided on all stairways in accordance with COMM 61. For small CBRFs, handrails shall be in compliance with § COMM 21.04

(6) Ramp Requirements

(a) In existing buildings...

(7) Emergency Lighting

February 6, 2009

- (a) All exit passageways and stairways shall be provided with emergency egress lighting with a stand-by power source
- (b) All required exit signs shall be lighted at all times

**§ DHS 83.60 Windows**

(3) Every habitable room shall have shades, drapes, or other covering material or device that affords privacy and light control

**§ DHS 83.61 Interior Surfaces**

(2) Carpet

- (a) Except in a sprinklered CBRF, all newly installed carpeting shall have a minimum Class rating under the tunnel test when tested in accordance with NFPA 255, or a Class II rating under the radiant panel flux test NFPA 253

(3) Exposed polyurethane and polystyrene surfaces are prohibited, except varnished woodwork

**SUBCHAPTER XI: REQUIREMENTS FOR NEW CONSTRUCTION, REMODELING, ADDITIONS, OR NEWLY-LICENSED EXISTING STRUCTURES**

Subchapter XI is an entirely new subchapter.