

SOUTH CAROLINA STATE REGISTER DISCLAIMER

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SOUTH CAROLINA STATE REGISTER

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This issue contains notices, proposed regulations, emergency regulations, final form regulations, and other documents filed in the Office of the Legislative Council, pursuant to Article 1, Chapter 23, Title 1, Code of Laws of South Carolina, 1976.

SOUTH CAROLINA STATE REGISTER

An official state publication, the *South Carolina State Register* is a temporary update to South Carolina's official compilation of agency regulations--the *South Carolina Code of Regulations*. Changes in regulations, whether by adoption, amendment, repeal or emergency action must be published in the *State Register* pursuant to the provisions of the Administrative Procedures Act. The *State Register* also publishes the Governor's Executive Orders, notices or public hearings and meetings, and other documents issued by state agencies considered to be in the public interest. All documents published in the *State Register* are drafted by state agencies and are published as submitted. Publication of any material in the *State Register* is the official notice of such information.

STYLE AND FORMAT

Documents are arranged within each issue of the *State Register* according to the type of document filed:

Notices are documents considered by the agency to have general public interest.

Notices of Drafting Regulations give interested persons the opportunity to comment during the initial drafting period before regulations are submitted as proposed.

Proposed Regulations are those regulations pending permanent adoption by an agency.

Pending Regulations Submitted to the General Assembly are regulations adopted by the agency pending approval by the General Assembly.

Final Regulations have been permanently adopted by the agency and approved by the General Assembly.

Emergency Regulations have been adopted on an emergency basis by the agency.

Executive Orders are actions issued and taken by the Governor.

2015 PUBLICATION SCHEDULE

Documents will be accepted for filing on any normal business day from 8:30 A.M. until 5:00 P.M. All documents must be submitted in the format prescribed in the *Standards Manual for Drafting and Filing Regulations*.

To be included for publication in the next issue of the *State Register*, documents will be accepted no later than 5:00 P.M. on any closing date. The modification or withdrawal of documents filed for publication must be made **by 5:00 P.M.** on the closing date for that issue.

	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.
Submission Deadline	1/9	2/13	3/13	4/10	5/8	6/12	7/10	8/14	9/11	10/9	11/13	12/11
Publishing Date	1/23	2/27	3/27	4/24	5/22	6/26	7/24	8/28	9/25	10/23	11/27	12/25

REPRODUCING OFFICIAL DOCUMENTS

Documents appearing in the *State Register* are prepared and printed at public expense. Media services are encouraged to give wide publicity to documents printed in the *State Register*.

PUBLIC INSPECTION OF DOCUMENTS

Documents filed with the Office of the State Register are available for public inspection during normal office hours, 8:30 A.M. to 5:00 P.M., Monday through Friday. The Office of the State Register is in the Legislative Council, Fourth Floor, Rembert C. Dennis Building, 1000 Assembly Street, in Columbia. Telephone inquiries concerning material in the *State Register* or the *South Carolina Code of Regulations* may be made by calling (803) 212-4500.

ADOPTION, AMENDMENT AND REPEAL OF REGULATIONS

To adopt, amend or repeal a regulation, an agency must publish in the *State Register* a Notice of Drafting; a Notice of the Proposed Regulation that contains an estimate of the proposed action's economic impact; and, a notice that gives the public an opportunity to comment on the proposal. If requested by twenty-five persons, a public hearing must be held at least thirty days after the date of publication of the notice in the *State Register*.

After the date of hearing, the regulation must be submitted to the General Assembly for approval. The General Assembly has one hundred twenty days to consider the regulation. If no legislation is introduced to disapprove or enacted to approve before the expiration of the one-hundred-twenty-day review period, the regulation is approved on the one hundred twentieth day and is effective upon publication in the *State Register*.

EMERGENCY REGULATIONS

An emergency regulation may be promulgated by an agency if the agency finds imminent peril to public health, safety or welfare. Emergency regulations are effective upon filing for a ninety-day period. If the original filing began and expired during the legislative interim, the regulation can be renewed once.

REGULATIONS PROMULGATED TO COMPLY WITH FEDERAL LAW

Regulations promulgated to comply with federal law are exempt from General Assembly review. Following the notice of proposed regulation and hearing, regulations are submitted to the *State Register* and are effective upon publication.

EFFECTIVE DATE OF REGULATIONS

Final Regulations take effect on the date of publication in the *State Register* unless otherwise noted within the text of the regulation.

Emergency Regulations take effect upon filing with the Legislative Council and remain effective for ninety days. If the original ninety-day period begins and expires during legislative interim, the regulation may be refiled for one additional ninety-day period.

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4372		SR39-6	Certification	5/13/15	South Carolina Criminal Justice Academy
4466		SR39-6	Procedures for Contested Cases	5/13/15	Department of Health and Envir Control
4461		SR39-6	Minimum Standards for Licensing Hospitals and Institutional General Infirmaries	5/13/15	Department of Health and Envir Control
4468		SR39-6	Hypodermic Devices; and Drugs and Devices	5/13/15	Department of Health and Envir Control
4455		SR39-6	Proceedings	5/13/15	Public Service Commission
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4483		SR39-6	Shellfish	5/13/15	Department of Health and Envir Control
4481		SR39-6	Air Pollution Control Regulations and Standards	5/13/15	Department of Health and Envir Control
4345		SR39-6	Adjudication of Misconduct Allegations (Reporting of Misconduct by Law Enforcement Officers)	5/14/15	South Carolina Criminal Justice Academy
4480		SR39-6	Insurance Holding Company Systems	5/14/15	Department of Insurance
4454		SR39-6	Commissioners	5/15/15	Public Service Commission
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4542		SR39-6	Solid Waste Management: Waste Tires	5/20/15	Department of Health and Envir Control
4497		SR39-6	Pasteurized Milk and Milk Products	5/20/15	Department of Health and Envir Control
4496		SR39-6	Athletic Trainers	5/20/15	Department of Health and Envir Control
4541		SR39-6	Hazardous Waste Management Regulations	5/21/15	Department of Health and Envir Control
4499		SR39-6	Applications and Fees	5/22/15	LLR-Board of Architectural Examiners
4500		SR39-6	Fees	5/22/15	LLR-State Athletic Commission
4501		SR39-6	Amend Regulations 8-115, 8-601, 8-602, 8-604, 8-607, and 8-613	5/22/15	LLR-Building Codes Council
4503		SR39-6	Fees	5/22/15	LLR-Board of Registration for Professional Engineers and Surveyors
4508		SR39-6	Fees	5/22/15	LLR- Manufactured Housing Board
4507	R.11	SR39-4	Fees [and Fee Schedule]	5/23/15	LLR-Board of Long Term Health Care Administrators
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4536		SR39-6	Professional Boxing, Wrestling, Kick Boxing, Off the Street Boxing, and Mixed Martial Arts	5/26/15	LLR-State Athletic Commission
4477		SR39-6	Defined Program, Grades 9-12 and Graduation Requirements	5/27/15	State Board of Education
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4461	Minimum Standards for Licensing Hospitals and Institutional General Infirmaries	Medical, Military, Pub & Mun Affairs	Medical Affairs
4468	Hypodermic Devices; and Drugs and Devices	Medical, Military, Pub & Mun Affairs	Medical Affairs
4455	Proceedings	Labor, Commerce and Industry	Judiciary
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4490	Plant Pests	Agriculture and Natural Resources	Agriculture and Natural Resources
4484	Standards for Licensing Community Residential Care Facilities	Medical, Military, Pub & Mun Affairs	Medical Affairs
4485	Standards for Wastewater Facility Construction	Agriculture and Natural Resources	Medical Affairs
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4482	Particle Accelerators (Title C)	Medical, Military, Pub & Mun Affairs	Medical Affairs
4483	Shellfish	Agriculture and Natural Resources	Medical Affairs
4481	Air Pollution Control Regulations and Standards	Agriculture and Natural Resources	Medical Affairs
4345	Adjudication of Misconduct Allegations (Reporting of Misconduct by Law Enforcement Officers)	Judiciary	Judiciary
4480	Insurance Holding Company Systems	Labor, Commerce and Industry	Banking and Insurance
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4555	Article 5, Adjudication of Misconduct Allegations	Judiciary	Judiciary
4474	Article 8, Office of State Fire Marshal	Labor, Commerce and Industry	Labor, Commerce and Industry
4475	Offers of Work	Labor, Commerce and Industry	Labor, Commerce and Industry
4528	Unemployment Trust Fund	Labor, Commerce and Industry	Labor, Commerce and Industry
4549	Prepaid Legal Services Certificate of Registration	Labor, Commerce and Industry	Banking and Insurance
4529	Licensing of Mortgage Brokers	Labor, Commerce and Industry	Banking and Insurance
4531	Assessment Program	Education and Public Works	Education
4546	Test Security	Education and Public Works	Education
4527	Wildlife Management Area Regulations; Turkey Hunting Rules and Seasons; and Either-sex Days and Antlerless Deer Limits for Private Lands in Game Zones 1-6	Regulations and Admin. Procedures	Fish, Game and Forestry
4533	Consumer Credit Counseling Requirements	Labor, Commerce and Industry	Banking and Insurance
4534	South Carolina National Guard College Assistance Program	Education and Public Works	Education
4524	South Carolina National Guard Student Loan Repayment Program	Education and Public Works	Education
4560	Suspension of Certification Due to Criminal Charges and/or Indictment	Judiciary	Judiciary
4543	Regulations for Species or Subspecies of Non-game Wildlife	Regulations and Admin. Procedures	Fish, Game and Forestry
4547	Standards for Licensing Nursing Homes	Regulations and Admin. Procedures	Medical Affairs
4552	Term and Conditions for the Public's Use of State Lakes and Ponds Owned or Leased by the Department of Natural Resources	Regulations and Admin. Procedures	Fish, Game and Forestry
4553	Horse Meat and Kangaroo Meat; Fairs, Camp Meetings, and Other Gatherings; Camps; Mobile/Manufactured Home Park; Sanitation of Schools; and Nuisances	Regulations and Admin. Procedures	Medical Affairs
4562	Standards for Licensing Hospices	Regulations and Admin. Procedures	Medical Affairs
4563	Board of Long Term Health Care Administrators	Regulations and Admin. Procedures	Medical Affairs
4564	Local Emergency Preparedness Standards	Regulations and Admin. Procedures	General
4565	Standards for Licensing Habilitation Centers for Persons with Intellectual Disability or Persons with Related Conditions	Regulations and Admin. Procedures	Medical Affairs
	Underground Storage Tank Control Regulations	Regulations and Admin. Procedures	Medical Affairs
Committee Request Withdrawal			
4539	Consumer Electronic Equipment Collection and Recovery	Labor, Commerce and Industry	Agriculture and Natural Resources
Resolution Introduced to Disapprove			
4551	Certification of Need for Health Facilities and Services	Medical, Military, Pub & Mun Affairs	Medical Affairs
4538	Certification of Need for Health Facilities and Services	Medical, Military, Pub & Mun Affairs	Medical Affairs
Permanently Withdrawn			
4540	Emergency Medical Services	Regulations and Admin. Procedures	Medical Affairs

DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL

NOTICE OF GENERAL PUBLIC INTEREST

In accordance with Section 44-7-200(D), Code of Laws of South Carolina, the public is hereby notified that a Certificate of Need application has been accepted for filing and publication on June 26, 2015 for the following project(s). After the application is deemed complete, affected persons will be notified that the review cycle has begun. For further information, please contact Robert B. "Sam" Phillips, Certificate of Need Program, 2600 Bull Street, Columbia, SC 29201 at (803) 545-4200.

Affecting Beaufort County**Beaufort County Memorial Hospital d/b/a Beaufort Memorial Hospital**

Renovation of an existing facility to modernize and expand portions of its Beaufort Memorial Birthing Center at a total project cost of \$6,105,022.

Affecting Greenwood County**Recovery Concepts of Greenwood Abbeville, LLC**

Establishment of a new Narcotic Treatment Program (NTP) in Greenwood County at a total project cost of \$65,582.

Affecting York County**PruittHealth – Rock Hill, LLC**

Renovation and expansion for the modernization of an existing facility with no change in nursing bed or services at a total project cost of \$3,563,315.

DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL

NOTICE OF GENERAL PUBLIC INTEREST

In accordance with Section 44-7-210(A), Code of Laws of South Carolina, and S.C. DHEC Regulation 61-15, the public and affected persons are hereby notified that for the following projects, applications have been deemed complete, and the review cycle has begun. A proposed decision will be made as early as 30 days, but no later than 120 days, from June 26, 2015. "Affected Persons" have 30 days from the above date to submit requests for a public hearing to Robert B. "Sam" Phillips, Certificate of Need Program, 2600 Bull Street, Columbia, S.C. 29201. If a public hearing is timely requested, the Department's decision will be made after the public hearing, but no later than 150 days from the above date. For further information call (803) 545-4200.

Affecting Charleston County**Medical University Hospital Authority d/b/a Medical University of South Carolina**

Construction of a new Pediatric Outpatient Imaging Center to house its imaging platform and relocate an existing CT scanner and MRI unit at a total project cost of \$39,802,936.

Trident Medical Center, LLC d/b/a Trident Medical Center *

Renovation of an existing facility for the expansion of the Emergency Department (ED), Operation Room (OR) and Post Anesthesia Care Unit (PACU) at a total project cost of \$13,622,000.

6 NOTICES

Affecting Horry County

Grand Strand Regional Medical Center, LLC d/b/a Grand Strand Medical Center

Renovation of an existing facility to add a third CT Scanner (GE Optima CT660) at a total project cost of \$1,026,136.

Affecting Richland County

Palmetto Health d/b/a Palmetto Health Baptist Parkridge Hospital

Renovation of an existing facility to add new interventional radiology (IR) and diagnostic cardiac catheterization (Cath Lab) services at a total project cost of \$2,927,794.

Affecting York County

Amisub of South Carolina, Inc. d/b/a York Imaging Center

Renovation of an existing facility to create an imaging and clinical center at a total project cost of \$1,431,546.

*** Project previously published Deemed Complete on May 22, 2015 as affecting Florence County. It is being republished as Deemed Complete to note the proper affected county as Charleston County. Please note that the review cycle for this Project began on May 22, 2015.**

DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL

NOTICE OF GENERAL PUBLIC INTEREST

NOTICE OF CANCELLATION AND RESCHEDULING OF PUBLIC HEARING

State Register Document 4567

The Department of Health and Environmental Control published a Notice of Proposed Regulation and Opportunity for Public Comment in the *State Register* on April 24, 2015, identified as Document 4567, to repeal Regulation 61-49, *Crabmeat*. The aforementioned Notice scheduled a write-in public comment period that closed May 26, 2015, and gave notice of a Public Hearing scheduled before the Board of Health and Environmental Control for July 9, 2015.

The Public Hearing originally scheduled for July 9, 2015, has been cancelled and rescheduled before the Department's Board for August 13, 2015. The hearing will be held at the regularly-scheduled Board meeting on August 13, 2015, in the Board Room, Third Floor, Aycock Building of the Department of Health and Environmental Control, 2600 Bull St., Columbia, SC. Due to admittance procedures at the DHEC building, all visitors should enter through the Bull Street entrance and register at the front desk.

The Board meeting commences at 10:00 a.m. at which time the Board will consider items on its agenda in the order presented. The order of presentation for public hearings will be noticed in the Board's agenda to be published by the Department twenty-four (24) hours in advance of the meeting at <http://www.scdhec.gov/Agency/docs/AGENDA.PDF>. The agenda will also provide notice of cancellation or any change in meeting times. Persons desiring to make oral comments at the hearing are asked to limit their statements to five minutes and, as a courtesy, are asked to provide written copies of their presentations for the record.

DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL**NOTICE OF GENERAL PUBLIC INTEREST**

DHEC-Bureau of Land and Waste Management, File #53832
Duke East Broad Street Site

**NOTICE OF VOLUNTARY CLEANUP CONTRACT, CONTRIBUTION PROTECTION,
AND COMMENT PERIOD**

PLEASE TAKE NOTICE that the South Carolina Department of Health and Environmental Control (DHEC) intends to enter into a Voluntary Cleanup Contract (VCC) with Duke Energy Carolina, LLC (Responsible Party). The VCC provides that the Responsible Party, with DHEC's oversight, will fund and perform future response actions at the Duke East Broad Street facility located in Greenville County, at 200 East Broad Street, Greenville, South Carolina, and any surrounding area impacted by the migration of hazardous substances, pollutants, or contaminants from the facility property (Site).

Future response actions addressed in the VCC include, but may not be limited to, the Responsible Party funding and performing: a groundwater monitoring plan, conduct groundwater monitoring and, if necessary, conduct a Feasibility Study (FS) to evaluate alternatives to clean-up the Site. Further, the Responsible Party will reimburse the Department's past costs of response of \$4,274.58 and the Department's future costs of overseeing the work performed by the Responsible Party and other Department costs of response pursuant to the VCC.

The VCC is subject to a thirty-day public comment period consistent with the Comprehensive Environmental Response, Compensation, and Liability Act (CERCLA), 42 U.S.C. § 9613, and the South Carolina Hazardous Waste Management Act (HWMA), S.C. Code Ann. § 44-56-200 (as amended). Notice of Contribution Protection and Comment Period will be provided to known potentially responsible parties via email or US mail. The VCC is available:

- (1) On-line at www.scdhec.gov/Apps/Environment/PublicNotices or
- (2) By contacting David Wilkie at 803-898-0882 or wilkietd@dhec.sc.gov.

Any comments to the proposed VCC must be submitted in writing, postmarked no later than July 27, 2015, and addressed to: David Wilkie, DHEC-BLWM-SARR, 2600 Bull Street, Columbia, SC 29201.

Upon the successful completion of the VCC, the Responsible Party will receive a covenant not to sue for the work done in completing the response actions specifically covered in the Contract and completed in accordance with the approved work plans and reports. Upon execution of the VCC, the Responsible Party shall be deemed to have resolved its liability to the State in an administrative settlement for purposes of, and to the extent authorized under CERCLA, 42 U.S.C. 9613(f)(2) and 9613(f)(3)(B), and under S.C. Code Ann. Section 44-56-200, for the response actions specifically covered in the Contract including the approved work plans and reports. Contribution protection is contingent upon the Department's determination that the Responsible Party has successfully and completely complied with the VCC.

8 NOTICES

DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL

NOTICE OF GENERAL PUBLIC INTEREST

Section IV of R.61-98, the State Underground Petroleum Environmental Response Bank (SUPERB) Site Rehabilitation and Fund Access Regulation, requires that the Department of Health and Environmental Control evaluate and certify site rehabilitation contractors to perform site rehabilitation of releases from underground storage tanks under the State Underground Petroleum Environmental Response Bank (SUPERB) Act.

Class I Contractors perform work involving the collection and interpretation of investigative data; the evaluation of risk; and/or the design and implementation of corrective action plans. Class I applicants must satisfy registration requirements for a Professional Engineer or Geologist in South Carolina. Class II Contractors perform work involving routine investigative activities (e.g., soil or ground water sampling, well installation, aquifer testing) where said activities do not require interpretation of the data and are performed in accordance with established regulatory or industry standards.

Pursuant to Section IV.B.1., the Department is required to place a list of those contractors requesting certification on public notice and accept comments from the public for a period of thirty (30) days. If you wish to provide comments regarding the companies and/or individuals listed below, please submit your comments in writing, no later than July 27, 2015 to:

Contractor Certification Program
South Carolina Department of Health and Environmental Control
Bureau of Land and Waste Management - Underground Storage Tank Program
Attn: Michelle Dennison
2600 Bull Street
Columbia, SC 29201

The following company has applied for certification as Underground Storage Tank Site Rehabilitation Contractor:

Class I

Apex Companies, LLC.
Attn: Andrew R. Harrison
203 Wylderoose Court
Midlothian, VA 23113

DEPARTMENT OF LABOR, LICENSING AND REGULATION BUILDING CODES COUNCIL

NOTICE OF GENERAL PUBLIC INTEREST

NOTICE OF PUBLIC HEARING

The South Carolina Department of Labor, Licensing and Regulation and the Building Codes Council do hereby give notice under Section 6-9-40(A)(3) and (4), of the 1976 Code of Laws of South Carolina, as amended, that a public hearing will be held on July 28, 2015, at the South Carolina Fire Academy in the Denny Auditorium, 141 Monticello Trail, Columbia, SC 29203, immediately following the 10:30 a.m. Building Codes Council meeting, at which time interested persons will be given the opportunity to appear and present views to the Council's appointed Study Committee on the following building codes for use in the State of South Carolina:

Mandatory codes include the:

2015 Edition of the International Building Code;
2015 Edition of the International Residential Code;
2015 Edition of the International Fire Code;
2015 Edition of the International Plumbing Code;
2015 Edition of the International Mechanical Code;
2015 Edition of the International Fuel Gas Code;
2014 Edition of the National Electrical Code.

Permissive codes include the:

2015 Edition of the International Property Maintenance Code;
2015 Edition of the International Existing Building Code;
2015 Edition of the International Swimming Pool and Spa Code
2015 Edition of the International Performance Code for Buildings and Facilities.

Any person who wishes to appear before or provide evidence or comments to the committee, or both, must file an intention to appear before the Study Committee by submitting a written or email request to:

Roger K. Lowe, Administrator
SC Building Codes Council
SC Department of Labor, Licensing and Regulation
Post Office Box 11329
Columbia, SC 29211-1329
Roger.lowe@llr.sc.gov

**DEPARTMENT OF LABOR, LICENSING AND REGULATION
OFFICE OF OCCUPATIONAL SAFETY AND HEALTH**

NOTICE OF GENERAL PUBLIC INTEREST

**NOTICE OF PUBLIC HEARING
OCCUPATIONAL SAFETY AND HEALTH STANDARDS**

South Carolina Department of Labor, Licensing and Regulation (SCDLLR) does hereby give notice under Section 41-15-220, SC Code of Laws, 1976, as amended, that a public hearing will be held on July 22, 2015 at 10:00am at the SCDLLR, Room 115, 110 Centerview Drive, Columbia, SC at which time interested persons will be given the opportunity to appear and present views on the occupational safety and health standards being considered for adoption.

The hearing is to determine if the Director of the SCDLLR will promulgate, revoke, or modify Rules and Regulations pursuant to Section 41-15-210, SC Code of Laws, 1976.

OSH Rules and Regulations being considered at the hearing are as follows:

In Subarticle 7 (Construction):

Revisions to Sections: 1926.21, 1926.953, 1926.968, 1926.1200, 1926.1201, 1926.1202, 1926.1203, 1926.1204, 1926.1205, 1926.1206, 1926.1207, 1926.1208, 1926.1209, 1926.1210, 1926.1211, 1926.1212, 1926.1213

10 NOTICES

Summary of changes: SC OSHA is issuing a final rule which adds a new subpart to provide protections to employees working in confined spaces in construction. This new subpart replaces OSHA's one training requirement for confined space work with a comprehensive standard that includes a permit program designed to protect employees from exposure to many hazards associated with work in confined spaces, including atmospheric and physical hazards. The final rule is similar in content and organization to the general industry confined spaces standard, but also incorporates several provisions from the proposed rule to address construction-specific hazards, accounts for advancements in technology, and improves enforceability of the requirements.

Any omissions or corrections to the occupational safety and health standards being considered for adoption published in the FEDERAL REGISTER prior to this hearing may be presented at this hearing. These revisions are necessary to comply with federal law and copies of them can be obtained or reviewed at the SCDLLR during normal business hours by contacting the OSHA office at 803-896-5811.

Persons desiring to speak at the hearing shall file with the Director of LLR a notice of intention to appear and the approximate amount of time required for her/his presentation on the particular matter no later than July 17, 2015. Any person who wishes to express his/her views, but is unable or does not desire to appear and testify at the hearing, should submit those views in writing on or before July 17, 2015.

Richele Taylor, Director
SCDLLR
PO Box 11329
Columbia, SC 29211-1329

STATE BOARD OF EDUCATION

CHAPTER 43

Statutory Authority: 1976 Code Sections 59-5-60, 59-18-310, 59-18-320, 59-18-330, 59-18-350, 59-18-360, 59-18-900, 59-20-60, and 20 U.S.C. 6301 et seq.

Notice of Drafting:

The South Carolina Board of Education (SBE) proposes to amend Regulation 43-262, Assessment Program.

Interested persons may submit their comments in writing to Elizabeth Jones, Director, Office of Assessment, 1429 Senate Street, Room 209-B, Columbia, South Carolina 29201 or by e-mail to ejones@ed.sc.gov on or before 5:00 pm on July 27, 2015. To be considered, all comments must be received no later than 5:00 p.m. on July 27, 2015.

Synopsis:

The SBE proposes to amend Regulation 43-262. This regulation delineates requirements for assessment programs managed by the Office of Assessment. The amendment is being proposed to update the mathematics courses tested in the End-of-Course Examination Program (EOCEP) based on the recent SBE approval of the South Carolina College- and Career-Ready Standards for Mathematics on March 11, 2015.

Legislative review is required.

DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL

CHAPTER 61

Statutory Authority: 1976 Code Section 44-1-140

Notice of Drafting:

The Department is proposing to repeal R.61-57, *Development of Subdivision Water Supply and Sewage Treatment/Disposal Systems*. Interested persons may submit written comments to Leonard Gordon, Onsite Wastewater Management, Bureau of Environmental Health Services, S.C. Department of Health and Environmental Control, 2600 Bull Street, Columbia, S.C. 29201, or by email at gordonla@dhec.sc.gov. Comments submitted must be received by 5:00 p.m. on July 27, 2015, the close of the drafting comment period.

Synopsis:

Regulation 61-57 was last amended in 2004. 1976 S.C. Code Section 44-55-822, which now governs the approval process for onsite wastewater systems in subdivisions, and Regulation 61-56, *Onsite Wastewater Systems*, address any major requirements for subdivision onsite wastewater sewage treatment/disposal systems. In the interest of good government and efficiency, the Department proposes the repeal of Regulation 61-57 as it has become obsolete and is no longer needed.

Legislative review of this repeal will be required.

12 DRAFTING NOTICES

DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL CHAPTER 61

Statutory Authority: 1976 Code Section 44-1-140

Notice of Drafting:

The Department of Health and Environmental Control proposes to draft a new regulation that addresses the manufacture of butter and cheese in South Carolina. Interested persons may submit comments to Mr. Jimmy Williamson, Program Manager, Division of Food Protection and Rabies Prevention (Dairy Foods and Soft Drink/Bottled Water Protection Program), Bureau of Environmental Health Services, South Carolina Department of Health and Environmental Control, 2600 Bull Street, Columbia, SC 29201 or by email at williajs@dhec.sc.gov. Comments submitted must be received by 5:00 p.m. on July 27, 2015, the close of the drafting comment period.

Synopsis:

The number of butter and cheese producers in South Carolina is growing, with an increase in the volume of their manufactured products. The Department's proposed new regulation is needed to ensure the public health is protected and that the products provided to the public are safe by requiring recognized practices, methods and sanitization requirements. The new regulation is proposed to provide standards, guidance and methods for butter and cheese products manufactured in South Carolina. The regulation guidance will be used to determine the use of properly sourced dairy products in manufacturing. The regulation will also require the application of appropriate processing methods and good manufacturing practices (GMPs) in all aspects of the production of butter and cheese products. This new regulation will be derived from the United States Code of Federal Regulations applicable to butter and cheese and good manufacturing practices.

Legislative review of this proposed new regulation will be required.

DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL CHAPTER 61

Statutory Authority: 1976 Code Section 44-1-140

Notice of Drafting:

The Department of Health and Environmental Control proposes to amend R.61-56, *Onsite Wastewater Systems*. Interested persons may submit comments to Mr. Leonard Gordon, Onsite Wastewater Management, Bureau of Environmental Health Services, S.C. Department of Health and Environmental Control, 2600 Bull Street, Columbia, S.C. 29201, or by email at gordonla@dhec.sc.gov. Comments submitted must be received by 5:00 p.m. on July 27, 2015, the close of the drafting comment period.

Synopsis:

R.61-56, *Onsite Wastewater Systems*, was last amended effective May 23, 2008. Regulation 61-56 governs the methods of disposition of sewage and prescribes installation and construction standards for onsite wastewater systems (septic tank systems). The proposed amendments being considered will update and bring R.61-56 in line with current statutes and changes in the technologies of design and installation of onsite wastewater systems since the last revision.

The proposed amendments are:

Adding:

- The requirement for licensed septic tank contractors to sign an installation statement that the system was installed as permitted.
- A definition for “Site Evaluation” in Section 101.
- A definition for “Perched Zone of Saturation” in Section 101.
- A section for low profile septic tanks.
- A section for size reduction of alternative septic tank system drain field products.

Amending:

- The definition of “Critical Area Line” by correction of language to be consistent with the definition and appropriate language of “Critical Area” found in the Coastal Tidelands and Wetlands Act (SC Code Section 48-39-10 et seq.).
- The definition of “Redox Depletions” to clarify the different lighter color or shades of lighter color interspersed with the dominant matrix color.
- The definition of “Zone of Saturation” to clarify the redox depletions of value four (4) or more and chroma two (2) or less using soil color charts in the zone of saturation.
- Section 103.1(2) to clarify when an appropriate easement would be required.
- Section 103.3 by expanding on who can conduct final onsite wastewater system installation inspections.
- Section 300, Wastewater Treatment Facility Accessibility, as necessary to clarify accessibility to wastewater treatment facilities and the corresponding definition of “Accessible” in Section 101 to be consistent with 1976 S.C. Code Section 44-55-1410.
- Section 415, Appendix O – System Standard 610 – Specialized Onsite Wastewater Designs (Less than 1500gpd), to change subsections (2) and (3) to language allowing flexibility for other professionals to conduct site evaluations for specialized designs. Also, add a subsection stating who can evaluate sites for conventional and alternative septic tank systems.
- Section 600.4 to add the minimum installation depth of the force main on an onsite wastewater pump.
- References section placement in regulation for formatting, and updating references for statutes and regulations where necessary.

Amendments may include updates in nomenclature and technology, and clarification of site requirements and system requirements. The Department may make other changes as necessary to improve the overall quality of the regulation, including, but not limited to, stylistic changes for internal consistency, clarification in wording, and corrections of references, grammatical errors, and outlining/codification, pursuant to regulation drafting standards required by the South Carolina Legislative Council.

This amendment will require legislative review.

14 DRAFTING NOTICES

PUBLIC SERVICE COMMISSION
CHAPTER 103
Statutory Authority: 1976 Code Section 58-3-140

Notice of Drafting:

The Public Service Commission of South Carolina proposes to amend Regulation 103-829. The amendments are necessary to address procedural issues related to motions. Interested persons may submit comments to the Public Service Commission, Clerk's Office, 101 Executive Center Drive, Columbia, South Carolina 29210. Please reference Docket Number 2015-214-A. To be considered, comments must be received no later than 4:45 p.m. on August 7, 2015.

Synopsis:

10 S.C. Code Ann. Regs. 103-829 addresses motions. This regulation should be amended to provide a timeframe of less than thirty days for the Commission to schedule oral arguments; to provide that oral arguments may be ordered at the discretion of the Commission; and to correct the timeframes for filing motions, responses, and replies to motions.

Legislative review of this proposal will be required.

PUBLIC SERVICE COMMISSION
CHAPTER 103
Statutory Authority: 1976 Code Section 58-3-140

Notice of Drafting:

The Public Service Commission of South Carolina proposes to repeal Regulation 103-813. The repeal is necessary because the Regulation duplicates the language in the South Carolina Code. Interested persons may submit comments to the Public Service Commission, Clerk's Office, 101 Executive Center Drive, Columbia, South Carolina 29210. Please reference Docket Number 2015-214-A. To be considered, comments must be received no later than 4:45 p.m. on August 7, 2015.

Synopsis:

10 S.C. Code Ann. Regs. 103-813 addresses the composition of the Commission Staff. This regulation should be repealed as it mirrors the language contained in S.C. Code Ann. Section 58-3-60.

Legislative review of this proposal will be required.

Document No. 4571
DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL
 CHAPTER 61
 Statutory Authority: 1976 Code Section 44-55-40

61-71. Well Standards

Preamble:

South Carolina Regulation 61-71, *Well Standards*, was last substantively amended on April 26, 2002. The regulation contains the minimum standards for the construction, maintenance, and operation of the following wells: individual residential, irrigation, monitoring (including non-standard installations), and boreholes to ensure that underground sources of drinking water are not contaminated and public health is protected.

The purpose of this amendment is to update R.61-71 to be consistent with R.61-56, *Onsite Wastewater Systems*, and to clarify that R.61-71 applies to injection wells as specified in R.61-87, *Underground Injection Control Regulations*. Additionally, stylistic changes are made for clarity and consistency to improve the overall quality of the Regulation.

A Notice of Drafting for this proposed regulation was published in the *State Register* on February 27, 2015.

Section-by-Section Discussion of Proposed Regulations

61-71. Well Standards.

The statutory authority citation is moved from below the Table of Contents to the correct location directly under the title of the Regulation for consistency with other Department regulations, and the section symbols are replaced with written text to meet *State Register* standard for drafting regulations. Symbols do not always convert as intended in other electronic formats and writing them out in text form will avoid future software conversion problems. These are non-substantive changes to improve the overall quality of the regulation.

61-71.A. PURPOSE AND SCOPE

Text is added that clarifies the applicability of R.61-71 to the construction and abandonment of injection wells as is currently stated in R.61-87, *Underground Injection Control Regulations*. Additional revisions to the Purpose and Scope include providing more complete regulation citations for clarity and making grammatical changes to improve the readability of the text.

61-71.D.1.

This is a stylistic change to correctly cite the statute for consistency. There is no change in legal meaning.

61-71.D.2.

This amendment adds the title of R.61-81 for clarity and consistency with other cited regulations in R.61-71.

61-71.E. LOCATION OF WELLS.

Section 61-71.E.1(c) is changed from 50 feet to 75 feet to be consistent with the separation distance between a private well (individual residential and irrigation wells) and an onsite wastewater system (septic tank/tile fields) as required in R.61-56, *Onsite Wastewater Systems*.

Notice of Public Comment Period:

Interested persons are provided an opportunity to submit written comments on the proposed regulations by writing to Charles Gorman, P.G., Division of Water Monitoring, Assessment and Protection, Bureau of Water, 2600 Bull Street, Columbia, South Carolina 29201, or by e-mail at gormancm@dhec.sc.gov. To be considered, comments must be received no later than 5:00 p.m. on July 27, 2015, the close of the public comment period.

16 PROPOSED REGULATIONS

Comments submitted in writing by the close of the comment period on July 27, 2015, shall be considered by staff in formulating the final proposed regulations for public hearing on October 8, 2015, as noticed below. Comments received shall be submitted in a Summary of Public Comments and Department Responses for the Board of Health and Environmental Control's consideration at the public hearing.

Copies of the proposed amendments for public comment as published in the State Register on June 26, 2015, may be obtained online in the DHEC Regulation Development Update at <http://www.scdhec.gov/Agency/RegulationsAndUpdates/RegulationDevelopmentUpdate/>. In the Update, click on the Water category and scan down to the proposed amendments of R.61-71. A copy can also be obtained by contacting Charles Gorman at the above address, by calling (803) 898-3112, or by email at gormancm@dhec.sc.gov.

Notice of Public Hearing and Opportunity for Public Comment:

Interested members of the public and regulated community are invited to make oral and/or written comments on the proposed amendments of R.61-71 at a public hearing to be conducted by the Board of Health and Environmental Control at its regularly scheduled meeting on October 8, 2015. The Board will conduct the public hearing in the Board Room, Third floor, Aycock Building of the Department of Health and Environmental Control at 2600 Bull Street, Columbia, South Carolina 29201. The Board meeting commences at 10:00 a.m. at which time the Board will consider items on its agenda in the order presented. The order of presentation for public hearings will be noted in the Board's agenda published by the Department 24 hours in advance of the meeting at the following address: <http://www.scdhec.gov/Agency/docs/AGENDA.PDF>. Persons desiring to make oral comments at the hearing are asked to limit their statements to five minutes or less and, as a courtesy, are asked to provide written copies of their presentation for the record. Due to admittance procedures at the DHEC Building, all visitors should enter through the Bull Street entrance and register at the front desk.

Preliminary Fiscal Impact Statement:

The proposed regulations will have no substantial fiscal or economic impact on the State or its political subdivisions. Implementation of this regulation will not require additional resources beyond those allowed. There is no anticipated additional cost by the Department or State government due to any inherent requirements of this regulation.

Statement of Need and Reasonableness:

The following is based on an analysis of the factors listed in 1976 Code Section 1-23-115(C)(1)-(3) and (9) through (11):

DESCRIPTION OF REGULATION

Purpose: The purpose of these amendments are to update R.61-71 to be consistent with separation distance requirements for private wells and onsite wastewater systems in R.61-56, *Onsite Wastewater Systems* and to clarify the applicability of R.61-71 to injection wells as specified in R.61-87, *Underground Injection Control Regulations*. Additionally, stylistic changes are made for clarity and consistency to improve the overall quality of the Regulation.

Legal Authority: 1976 Code Section 44-55-40.

Plan for Implementation:

Upon approval by the General Assembly and publication in the State Register as final regulations, a copy of R.61-71, to include these amendments, will be available electronically on the Department's internet site at <http://www.scdhec.gov/Agency/RegulationsAndUpdates/LawsAndRegulations/Water/> under the Water

category and subsequently in the Code of Regulations of the S.C. Code of Laws. Printed copies will be available for a fee from the Department's Freedom of Information Office.

DETERMINATION OF NEED AND REASONABLENESS OF THE PROPOSED REGULATION BASED ON ALL FACTORS HEREIN AND EXPECTED BENEFITS:

The proposed amendments are needed and reasonable because they will provide clarification regarding applicability and eliminate any potential inconsistency between Department regulations.

DETERMINATION OF COSTS AND BENEFITS:

Internal Costs: Implementation of these amendments will not require additional resources. There is no anticipated additional cost by the Department or State government due to any inherent requirements of these amendments.

External Costs: There are no anticipated external costs for implementing the proposed amendment to clarify the applicability of R.61-71 to injection wells as currently stated in R.61-87. A 75-foot separation between onsite wastewater systems and private wells is required by R.61-56. Consequently, minimal external costs are anticipated for making this regulation consistent with R.61-56.

External Benefits: These amendments will affect those who install private wells and injection wells. The amendments will eliminate inconsistencies between regulations and provide clarification regarding the applicability of the regulation.

UNCERTAINTIES OF ESTIMATES:

None.

EFFECT ON ENVIRONMENT AND PUBLIC HEALTH:

The amendments will have no anticipated effect on the environment.

The amendments seek to benefit human health by increasing the separation distance between private wells and onsite wastewater systems (septic tanks/tile fields).

DETRIMENTAL EFFECT ON THE ENVIRONMENT AND PUBLIC HEALTH IF THE REGULATION IS NOT IMPLEMENTED:

There is no anticipated detrimental effect on the environment.

If the amendments are not implemented, owners of private wells will not benefit from the increased separation distance between their wells and onsite wastewater systems.

Statement of Rationale:

The Department is amending this regulation in the interest of consistency with the requirements for the separation between private wells and onsite wastewater systems listed in R.61-56, *Onsite Wastewater Systems*, and to provide clarification regarding applicability of the regulation to injection wells as specified in R.61-87, *Underground Injection Control Regulations*.

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Text:

The full text of this regulation is available on the South Carolina General Assembly Home Page: <http://www.scstatehouse.gov/regnsrch.php>. Full text may also be obtained from the promulgating agency.

Document No. 4525

OFFICE OF THE ATTORNEY GENERAL**CHAPTER 13**

Statutory Authority: 1976 Code Sections 35-1-101 et seq.

- 13-203. Recognized Securities Manuals.
- 13-206. Intrastate Offering Exemption.
- 13-304. Underwriting Expenses, Underwriter Warrants, Selling Expenses, and Selling Security Holders.
- 13-401. Examinations for Securities Agents, Investment Advisers, and Investment Adviser Representatives.
- 13-403. Broker-Dealer, Agent, Investment Adviser, and Investment Adviser Representative Registrations, Terminations, and Brochure Delivery.
- 13-404. Criminal Record Requirement for Agents and Investment Adviser Representatives.
- 13-406. Investment Adviser Minimum Capital and Bonding Requirements.
- 13-408. Recordkeeping Requirements for Investment Advisers.
- 13-409. Sole Proprietor Investment Advisers.
- 13-410. Investment Adviser Representatives Registered with Multiple Investment Advisers.
- 13-411. The Use of Senior-Specific Certifications and Professional Designations.
- 13-412. Fees.
- 13-502. Dishonest or Unethical Practices by Investment Advisers, Investment Adviser Representatives and Federal Covered Advisers.
- 13-503. Advertising Filing Requirement.
- 13-601. Financial Statements Submitted with an Application to Register Securities or used in a Prospectus.
- 13-603. Consent to Service of Process.

Synopsis:

The Office of the Attorney General proposes to amend certain current Regulations and promulgate additional regulations to implement the South Carolina Uniform Securities Act of 2005 and to reflect other developments in securities regulation since 2005. The Notice of Drafting regarding these regulations was published on August 22, 2014, in the *State Register*.

Instructions:

The following sections of Chapter 13 are to be modified and added as provided below. All other sections of Chapter 13 not mentioned below are to remain unchanged.

Text:

- 13-203. Recognized Securities Manuals.

The following securities manuals are recognized under the provisions of Section 35-1-202(2)(D) of the South Carolina Uniform Securities Act of 2005, and the inclusion in any one of these manuals of the information specified in this Section concerning the issuer of the security, exempts such security from the requirements of Sections 35-1-301 through 35-1-306 and 35-1-504 of the South Carolina Uniform Securities Act of 2005: S&P Capital IQ Standard Corporation Descriptions; Mergent's Manuals.

- 13-206. Intrastate Offering Exemption.

A. The offer or sale of a security by an issuer, conducted solely in this state to residents of this state, shall be exempt from the requirements of Sections 35-1-301 through 35-1-306 and 35-1-504 of the Act, if the offer or sale is conducted in accordance with each of the following requirements:

(1) The issuer of the security shall be a for-profit business entity formed under the laws of the state of South Carolina and registered with the Secretary of State.

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(2) The transaction shall meet the requirements of the federal exemption for intrastate offerings in Section 3(a)(11) of the Securities Act of 1933 (15 U.S.C. Section 77c(a)(11)), and SEC Rule 147 (17 C.F.R. 230.147). As such, prior to any offer or sale pursuant to this exemption, the seller shall obtain, from each prospective purchaser, documentary evidence that provides the seller with a reasonable basis to believe that such investor is a resident of the state of South Carolina.

(3) The sum of all cash and other consideration to be received for all sales of the security in reliance upon this exemption shall not exceed one million (\$1,000,000) dollars, less the aggregate amount received for all sales of securities by the issuer within the 12 months before the first offer or sale made in reliance upon this exemption.

(4) The issuer shall not accept more than five thousand (\$5,000) dollars from any single purchaser unless the purchaser is an accredited investor as defined by Rule 501 of SEC Regulation D (17 C.F.R. 230.501).

(5) The issuer must reasonably believe that all purchasers of securities are purchasing for investment purposes.

(6) A commission or other remuneration shall not be paid or given, directly or indirectly, for any person's participation in the offer or sale of securities unless the person is registered as a broker-dealer or agent under the Act.

(7) All funds received from investors shall be deposited into a bank or depository institution authorized to do business in South Carolina, and all of the funds shall be used in accordance with representations made to investors.

(8) Not less than five days prior to the use of any general solicitation, or within fifteen days after the first sale of the security pursuant to this exemption (provided no general solicitation has been used prior to such sale), whichever occurs first, the issuer shall provide a notice to the Securities Commissioner in writing. The notice shall specify that the issuer is conducting an offering in reliance upon this exemption and shall contain the names and addresses of the following persons:

- (a) The issuer;
- (b) Officers, directors, and any control person of the issuer;
- (c) All persons who will be involved in the offer or sale of securities on behalf of the issuer; and
- (d) The bank or other depository institution in which investor funds will be deposited.

(9) The issuer shall not be, either before or as a result of the offering, an investment company as defined in Section 3 of the Investment Company Act of 1940 (15 U.S.C. Section 80a-3), or subject to the reporting requirements of Section 13 or 15(d) of the Securities Exchange Act of 1934 (15 U.S.C. Section 78m and 78o(d)).

(10) The issuer shall inform all purchasers that the securities have not been registered under the Act and, therefore, cannot be resold unless the securities are registered or qualify for an exemption from registration under the Act, subject to the provisions of Subsection (e) of SEC Rule 147 (17 C.F.R. 230.147(e)). In addition, the issuer shall make the disclosures required by R.13-204E.

(11) This exemption shall not be used in conjunction with any other exemption under these Rules or the Act, except for offers and sales to officers, directors, partners, or similar controlling persons of the issuer. Sales to such controlling persons shall not count toward the limitation in subsection A(3) above.

(12) Disqualifications. This exemption shall not be available if the issuer, or any of its officers, controlling persons, or promoters is subject to a disqualifying event specified in Subsection (d) of Rule 506 of SEC Regulation D (17 C.F.R. 230.506(d)).

(13) Nothing in this exemption is intended to relieve or should be construed as in any way relieving the issuers or persons acting on behalf of issuers from the anti-fraud provisions of the Act.

(14) Every notice of exemption provided for in Subsection A(8) above is effective for one year from the date of its filing with the Securities Commissioner and shall be accompanied by a non-refundable filing fee of three hundred (\$300.00) dollars.

13-304. Underwriting Expenses, Underwriter Warrants, Selling Expenses, and Selling Security Holders.

A. An offer or sale of securities may be disallowed by the Securities Commissioner if the underwriting expenses to be incurred exceed seventeen (17%) percent of the gross proceeds from the public offering.

B. Underwriting expenses may include but are not limited to:

- (1) Commissions to underwriters or broker-dealers;
- (2) Non-accountable fees or expenses to be paid to the underwriter or broker-dealer;

(3) Underwriter warrants, which shall be valued using the following formula:

$$\frac{\{[(165\% \times \text{Aggregate Offering Price}) - (\text{Exercise Price} \times \text{the number of shares offered to public})] / 2\}}{[(\text{the number of shares underlying warrants}) / (\text{the number of shares offered to public})]}$$

The value may be reduced by twenty percent (20%) if the exercise period of the warrants is extended from one (1) year after the public offering to two (2) years after the public offering and by forty percent (40%) if the exercise period of the warrants is extended from one (1) year after the public offering to three (3) years after the public offering. Warrants may be granted to underwriters only under the following conditions and subject to the following restrictions:

- (a) The underwriter is a managing underwriter;
 - (b) The public offering is either a firmly underwritten offering or a “minimum-maximum” offering.
- Options or warrants may be issued in a “minimum-maximum” public offering only if:
- (i) The options or warrants are issued on a pro rata basis; and
 - (ii) The “minimum” amount of securities has been sold;
 - (c) The exercise price of the warrants must be at least equal to the public offering price;
 - (d) The number of shares covered by underwriter options or warrants may not exceed ten percent (10%) of the shares of common stock actually sold in the public offering;
 - (e) The life of the options or warrants may not exceed a period of five (5) years from the completion date of the public offering;
 - (f) The options or warrants are not exercisable for the first year after the completion date of the public offering;
 - (g) Options or warrants may not be transferred, except:
 - (i) To partners of the underwriter, if the underwriter is a partnership;
 - (ii) To officers and employees of the underwriter, who are also shareholders of the underwriter, if the underwriter is a corporation;
 - (iii) By will, pursuant to the laws of descent and distribution; or
 - (iv) By the operation of law.
 - (h) The warrant agreement may not allow for a reduction in the exercise price of the options or warrants resulting from the subsequent issuance of shares by the issuer except where such issuances are pursuant to a:
 - (i) Stock dividend or stock split; or
 - (ii) merger, consolidation, reclassification, reorganization, recapitalization, or sale of assets.
- (4) Rights of first refusal, which shall be valued at one percent (1%) of the public offering or the amount payable to the underwriter if the issuer terminates the right of first refusal;
- (5) Solicitation fees payable to the underwriter, which shall be valued at the lesser of actual cost or one percent (1%) of the public offering if the fees are payable within one (1) year of the offering;
- (6) Financial consulting or financial advisory agreements with an underwriter or any other similar type of agreement or fees, however designated, which shall be valued at actual cost;
- (7) Underwriter due diligence expenses;
- (8) Payments made either six (6) months prior to or required to be made six (6) months following the public offering to investor relations firms designated by the underwriter; and
- (9) Other underwriting expenses incurred in connection with the public offering of securities as determined by the Securities Commissioner.

C. Underwriting expenses shall not include financial consulting or financial advisory agreements with the underwriter payable at the time the services are rendered provided that such agreement was entered into at least twelve (12) months prior to the registration being filed with the Securities and Exchange Commission.

D. An offer or sale of securities may be disallowed by the Securities Commissioner if the direct and indirect selling expenses of the offering exceed twenty percent (20%) of the gross proceeds from the public offering.

E. Selling expenses may include but are not limited to:

- (1) Commissions to underwriters or broker-dealers;
- (2) Non-accountable fees or expenses to be paid to the underwriters or broker-dealers;
- (3) Auditor’s and accountant’s fees;
- (4) Legal fees;

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(5) The cost of printing prospectuses, circulars and other documents required to comply with securities laws and regulations;

(6) Charges of transfer agents, registrars, indenture trustees, escrow holders, depositories, engineers, appraisers, and other experts;

(7) The cost of authorizing and preparing the securities, including issue taxes and stamps;

(8) Financial consulting or financial advisory agreements with an underwriter or any similar type agreement or fees, however designated, which shall be valued at actual cost, excluding financial and consulting agreements which are entered into at least twelve (12) months before the registration is filed with the Securities and Exchange Commission;

(9) Payments made either six (6) months prior to or required to be made six (6) months following the public offering to investor relations firms designated by the underwriter; and

(10) Other cash expenses incurred in connection with the public offering of securities as determined by the Securities Commissioner.

F. A public offering or sale of securities that includes selling security holders offering more than ten percent (10%) of the securities to be sold in the public offering may be disallowed by the Securities Commissioner unless:

(1) Selling security holders offering or selling more than ten percent (10%) but less than fifty percent (50%) of the securities to be sold in the public offering pay a pro-rata share of all selling expenses of the public offering, excluding the legal and accounting expenses of the public offering;

(2) Selling security holders offering more than fifty percent (50%) of the securities to be sold in the offering pay a pro-rata share of all selling expenses of the public offering; and

(3) The prospectus or offering document discloses the amount of selling expenses which the selling security holders will pay.

G. With the exception of underwriter or broker-dealer compensation, Subsections F (1), (2), and (3) above shall not apply if the selling security holders have a written agreement with the issuer, that was entered into in an arm's length transaction, whereby the issuer has agreed to pay all of the selling security holder's selling expenses.

13-401. Examinations for Securities Agents, Investment Advisers, and Investment Adviser Representatives.

A. Examinations for securities agents. A passing grade on an examination appropriate based upon the type of securities being sold, and the Uniform Securities Agent State Law Examination (Series 63) or the Uniform Combined State Law Exam (Series 66) or such other examination as may be designated by the Securities Commissioner by rule or order, must be furnished, as proof, in any application for registration as a principal of a broker-dealer or registration as an agent. No person who has passed the designated examinations shall again be required to pass another examination unless for a period of twenty-four (24) or more consecutive months immediately preceding the date of filing of the application he shall not have been registered as an agent, or as a principal, officer or director of a broker-dealer. An upgrading in the type of business being conducted by the agent or broker-dealer may require the passing of a new examination.

B. Examinations for investment advisers. As a condition of initial or renewal registration, every applicant for registration as an investment adviser, an investment adviser representative, or as a broker-dealer acting or proposing to act as an investment adviser, shall furnish the Securities Commissioner proof that he or she has obtained a passing score on the following examinations:

(1) The Uniform Investment Adviser Law Examination (Series 65);

(2) The General Securities Representative Examination (Series 7) and the Uniform Combined State Law Examination (Series 66); or

(3) Such other examination as may be designated by the Securities Commissioner by rule or order.

C. Exceptions from examination requirements.

(1) If a person was registered as an investment adviser or investment adviser representative in any jurisdiction in the United States on January 1, 2000, and there has been no period longer than two years since that date in which the person was not registered as an investment adviser or investment adviser representative, that person shall not be required to satisfy the examination requirements for initial or continued registration, provided that the Securities Commissioner may require additional examinations if the person is found to have violated the South Carolina Uniform Securities Act of 2005.

(2) Any person who has been registered as an investment adviser or investment adviser representative in any state requiring the licensing, registration, or qualification of investment advisers or investment adviser representatives within the two-year period immediately preceding the date of filing of an application shall not be required to comply with the examination requirement set forth in subsection B above, provided that the person previously met the examination requirement in subsection B above.

(3) An applicant who has complied with the examination requirements in subsection B above within two years prior to the date the application is filed with the Securities Commissioner shall not be required to take and pass the required examination(s) again.

(4) An applicant who is an agent for a broker-dealer/investment adviser and who is not required by the agent's home jurisdiction to make a separate filing on the Central Registration Depository (CRD) system as an investment adviser representative, but who has previously met the examination requirement in subsection B above, necessary to provide advisory services on behalf of the broker-dealer/investment adviser, shall not be required to take and pass the required examinations again.

D. Waivers. The examination requirements of Subsection B of this Rule are waived for an individual who currently holds one or more of the following professional designations:

- (1) Certified Financial Planner (CFP) issued by the Certified Financial Planner Board of Standards, Inc.;
- (2) Chartered Financial Consultant (ChFC) awarded by the American College, Bryn Mawr, Pennsylvania;
- (3) Personal Financial Specialists (PFS) administered by the American Institute of Certified Public

Accountants;

(4) Chartered Financial Analyst (CFA) granted by the Association for Investment Management and Research;

(5) Chartered Investment Counselor (CIC) granted by the Investment Counsel Association of America; or

(6) Such other professional designation as the Securities Commissioner may by rule or order recognize.

13-403. Broker-Dealer, Agent, Investment Adviser, and Investment Adviser Representative Registrations, Terminations, and Brochure Delivery.

A. Investment Advisers.

(1) Initial Registration: The application for initial registration as an investment adviser pursuant to Sections 35-1-403(a) and 35-1-406(a) of the Act shall be made by completing the Form ADV (Uniform Application for Investment Adviser Registration) Parts 1 and 2 in accordance with the form instructions, and by filing the form electronically with the Investment Adviser Registration Depository (IARD) system. The application for initial registration shall also include the following:

(a) A consent to service of process complying with R.13-603;

(b) Proof of compliance by the investment adviser with the examination requirements of R.13-401;

(c) The fee required by Section 35-1-702 of the Act;

(d) The fees charged by the IARD or other designee of the Securities Commissioner for processing the filing;

(e) The proposed client contract(s) that complies with R.13-502A(16), which shall be filed directly with the Securities Commissioner;

(f) a balance sheet and an income statement as of a date within forty-five days from the date of filing of the application, which need not be audited, but which must be prepared in accordance with generally accepted accounting principles in the United States, or such other basis of accounting acceptable to the Securities Commissioner, and represented by the investment adviser as true and accurate using a form of verification acceptable to the Securities Commissioner, which shall be filed directly with the Securities Commissioner;

(g) Proof of compliance, if applicable, with the minimum financial bonding requirements of R.13-405, which shall be filed directly with the Securities Commissioner; and

(h) Any other information the Securities Commissioner may reasonably require.

(2) Annual Renewal: The application for annual renewal registration as an investment adviser pursuant to Sections 35-1-403(a) and 35-1-406(d) of the Act shall be filed before the current registration expires on December 31, and shall be filed electronically with the IARD. The application for annual renewal registration shall include the following:

(a) The fee required by Section 35-1-702 of the Act;

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(b) The fees charged by the IARD or other designee of the Securities Commissioner for processing the filing; and

(c) Any other information the Securities Commissioner may reasonably require.

(3) Updates and Amendments:

(a) An investment adviser must file electronically with the IARD, in accordance with the instructions for the Form ADV, any amendments to the investment adviser's Form ADV;

(b) An amendment will be considered to be filed promptly if the amendment is filed within thirty days of the event that requires the filing of the amendment; and

(c) Within ninety days of the end of the investment adviser's fiscal year, an investment adviser must file electronically with the IARD an Annual Updating Amendment to the Form ADV.

(4) Complete Filing: An application for initial registration or renewal is not considered complete for the purposes of Sections 35-1-403(a), 35-1-406(a), and 35-1-406(d) of the Act, until the required fee and all required submissions have been received by the Securities Commissioner.

(5) Withdrawal: The application for withdrawal of registration as an investment adviser pursuant to Section 35-1-409 of the Act shall be completed by following the instructions for the Form ADV-W (Notice of Withdrawal from Registration as an Investment Adviser) and by filing the Form ADV-W electronically with the IARD.

B. Investment Adviser Representatives.

(1) Initial Application: The application for initial registration as an investment adviser representative pursuant to Sections 35-1-404(a) and 35-1-406(a) shall be made by completing the Form U-4 (Uniform Application for Securities Industry Registration or Transfer) in accordance with the form instructions, and by filing the Form U-4 electronically with the Central Registration Depository (CRD) system. The application for initial registration shall also include the following:

(a) A consent to service of process complying with R.13-603;

(b) Proof of compliance by the investment adviser representative with the examination requirements of R.13-401;

(c) The fee required by Section 35-1-702 of the Act;

(d) The fees charged by the CRD or other designee of the Securities Commissioner for processing the filing;

(e) A criminal record history in compliance with R.13-404; and

(f) Any other information the Securities Commissioner may reasonably require.

(2) Annual Renewal: The application for annual renewal registration as an investment adviser representative pursuant to Sections 35-1-404(a) and 35-1-406(d) shall be filed before the current registration expires on December 31, and shall be filed electronically with the CRD. The application for annual renewal registration shall include the following:

(a) The fee required by Section 35-1-702 of the Act;

(b) The fees charged by the CRD or other designee of the Securities Commissioner for processing the filing; and

(c) Any other information the Securities Commissioner may reasonably require.

(3) Updates and Amendments:

(a) The investment adviser representative is under a continuing obligation to update information required by the Form U-4 as changes occur;

(b) An investment adviser representative and the investment adviser must electronically file promptly with the CRD any amendments to the representative's Form U-4; and

(c) An amendment will be considered to be filed promptly if the amendment is filed within thirty days of the event that requires the filing of the amendment.

(4) Complete Filing: An application for initial registration or renewal is not considered complete for the purposes of Sections 35-1-404(a), 35-1-406(a), and 35-1-406(d) of the Act, until the required fee and all required submissions have been received by the Securities Commissioner.

(5) Withdrawal: The application for withdrawal of registration as an investment adviser representative pursuant to Section 35-1-409 of the Act shall be completed by following the instructions on the Form U-5 (Uniform Termination Notice for Securities Industry Registration) and by filing the Form U-5 electronically with the CRD.

C. Brochure Delivery. Investment advisers must comply with the terms of SEC Rule 204-3 of the Investment Adviser Act of 1940 (17 C.F.R. 275.204-3) regarding the delivery of brochures and brochure supplements.

D. Registration of FINRA Member Firms and their agents. FINRA member firms and their agents shall file all applications and amendments and pay all fees required for registration under the South Carolina Uniform Securities Act of 2005 with the CRD.

E. Registration of non-FINRA member broker-dealers and agents. Non-FINRA member firms and agents who cannot file via the CRD System must register directly with the Securities Commissioner, providing the information and using any form required for the filing of a uniform application and, upon request by the Securities Commissioner, by providing any other financial or information or record that the Securities Commissioner determines is appropriate.

13-404. Criminal Record Requirement for Agents and Investment Adviser Representatives.

Pursuant to Section 35-1-406 (a)(2), every person applying for registration as an agent or investment adviser representative in this State must request the South Carolina Law Enforcement Division to submit directly to the Securities Commissioner a criminal record history. This requirement is waived for FINRA registered broker-dealer agents.

13-406. Investment Adviser Minimum Capital and Bonding Requirements.

A. Minimum financial requirements for investment advisers.

Unless an investment adviser posts a bond pursuant to 35-1-411(e) and Section B below an investment adviser registered or required to be registered pursuant to the South Carolina Uniform Securities Act of 2005 who has custody of client funds or securities shall maintain at all times a minimum net worth of fifty thousand (\$50,000.00) dollars, and every investment adviser registered or required to be registered under the South Carolina Uniform Securities Act of 2005 who has discretionary authority over client funds or securities but does not have custody of client funds or securities, shall maintain at all times a minimum net worth of thirty five thousand (\$35,000.00) dollars. Should net worth fall below those levels after an investment adviser is registered, notice must be given to the Securities Commissioner by the close of business the next day. Investment activities also must cease until net worth is restored to the required levels. The term "net worth" is the excess of assets over liabilities as determined by generally accepted accounting principles, less the following:

(1) Deferred charges, goodwill, franchise rights, organizational expenses, patents, copyrights, marketing rights, unamortized debt discounts and expenses, and all other assets of an intangible nature;

(2) Homes, home furnishings, automobiles, personal items not readily marketable, advances or loans to a related party, and assets owned or the portion of assets partially owned by another person (e.g., a spouse, if the asset is jointly owned), if net worth is being determined for an individual; and

(3) Advances or loans to stockholders and officers in the case of a corporation; advances or loans to members and managers in the case of a limited liability company; advances or loans to partners in the case of a partnership; and similar advances and loans.

B. Bonding requirements.

Every investment adviser having custody of or discretionary authority over client funds or securities and not meeting the minimum financial requirements required of such adviser pursuant to Section A above shall post cash or securities (in accordance with Rule 13-407 or such other rule or order promulgated by the Securities Commissioner) or a surety bond in the amount of fifty thousand (\$50,000.00) dollars for investment advisers having custody and thirty five thousand (\$35,000.00) dollars for investment advisers having discretionary authority but not custody of client funds or securities. Surety bonds required to be posted pursuant to this Rule must be posted by a bonding company qualified to do business in this State.

C. An investment adviser that has its principal place of business in a state other than this State shall be exempt from the requirements of Sections A and B above provided that the investment adviser is registered as an investment adviser in the state where it has its principal place of business and is in compliance with such state's requirements relating to net worth or bonding.

D. The Securities Commissioner may, by order, exempt certain registered investment advisers from the surety bond posting requirements.

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13-408. Recordkeeping Requirements for Investment Advisers.

A. Every investment adviser registered or required to be registered under the South Carolina Uniform Securities Act of 2005 shall make and keep true, accurate and current the following books, ledgers and records:

(1) A journal or journals, including cash receipts and disbursement records, and any other records of original entry forming the basis of entries in any ledger;

(2) General and auxiliary ledgers (or other comparable records) reflecting asset, liability, reserve, capital, income and expense accounts;

(3) A memorandum of each order given by the investment adviser for the purchase or sale of any security, of any instruction received by the investment adviser from a client concerning the purchase, sale, receipt or delivery of a particular security, and of any modification or cancellation of any such order or instruction. The memoranda shall show the terms and conditions of the order, instruction, modification or cancellation; shall identify the person connected with the investment adviser who recommended the transaction to the client and the person who placed the order; and shall show the account for which entered, the date of entry, and the bank or broker-dealer by or through who executed where appropriate. Orders entered pursuant to the exercise of discretionary power shall be so designated;

(4) All check books, bank statements, canceled checks and cash reconciliations of the investment adviser;

(5) All bills or statements (or copies of), paid or unpaid, relating to the investment adviser's business as an investment adviser;

(6) All trial balances, financial statements and internal audit working papers relating to the investment adviser's business as an investment adviser;

(7) Originals of all written communications received and copies of all written communications sent by the investment adviser relevant to (a) any recommendation made or proposed to be made and any advice given or proposed to be given, (b) any receipt, disbursement or delivery of funds or securities, or (c) the placing or execution of any order to purchase or sell any security, provided, however, (i) that the investment adviser shall not be required to keep any unsolicited market letters or other similar communications of general public distribution not prepared by or for the investment adviser, and (ii) that if the investment adviser sends any notice, circular or other advertisement offering any report, analysis, publication or other investment advisory service to more than ten persons, the investment adviser shall not be required to keep a record of the names and addresses of the persons to whom it was sent; except that if the notice, circular or advertisement is distributed to persons named on any list, the investment adviser shall retain with the copy of the notice, circular or advertisement a memorandum describing the list and its source;

(8) A list or other record of all accounts which identifies the accounts in which the investment adviser is vested with any discretionary power with respect to the funds, securities or transactions of any client;

(9) A copy of all powers of attorney and other evidences of the granting of any discretionary authority by any client to the investment adviser;

(10) A copy in writing of each agreement entered into by the investment adviser with any client, and all other written agreements otherwise relating to the investment adviser's business as an investment adviser;

(11) A file containing a copy of each notice, circular, advertisement, newspaper article, investment letter, bulletin, or other communication, including those by electronic media, that the investment adviser circulates or distributes, directly or indirectly, to two or more persons (other than persons connected with the investment adviser), and if the notice, circular, advertisement, newspaper, newspaper article, investment letter, bulletin, or other communication recommends the purchase or sale of a specific security and does not state the reasons for the recommendation, a memorandum of the investment adviser indicating the reasons for the recommendation;

(12) Records of Beneficial ownership (investment adviser or investment adviser representative)

(a) A record of every transaction in a security in which the investment adviser or any advisory representative (as hereinafter defined) of the investment adviser has, or by reason of any transaction acquires, any direct or indirect beneficial ownership, except:

(i) transactions effected in any account over which neither the investment adviser nor any advisory representative of the investment adviser has any direct or indirect influence or control; and

(ii) transactions in securities which are direct obligations of the United States.

The record shall state the title and amount of the security involved; the date and nature of the transaction (i.e. purchase, sale or other acquisition or disposition); the price at which it was effected; and the name of the broker-

dealer or bank with or through whom the transaction was effected. The record may also contain a statement declaring that the reporting or recording of any transaction shall not be construed as an admission that the investment adviser or advisory representative has any direct or indirect beneficial ownership in the security. A transaction shall be recorded not later than ten (10) days after the end of the calendar quarter in which the transaction was effected.

(b) For purposes of Subsection A (12) above, the following definitions will apply:

(i) “advisory representative” shall mean any partner, officer or director of the investment investment adviser; any employee who participates or participated in any way in the determination of which recommendations shall or should be made; any employee who, in connection with his duties, obtains any information concerning which securities are being recommended prior to the effective dissemination of the recommendations; and any of the following persons who obtain information concerning securities recommendations being made by the investment adviser prior to the effective dissemination of the recommendations:

- (A) any person in a control relationship to the investment adviser;
- (B) any affiliated person of a controlling person; and
- (C) any affiliated person of an affiliated person;

(ii) “control” shall mean the power to exercise a controlling influence over the management or policies of a company, unless such power is solely the result of an official position with such company. Any person who owns beneficially, either directly or through one or more controlled companies, more than twenty-five percent (25%) of the voting securities of a company shall be presumed to control such company.

(c) An investment adviser shall not be deemed to have violated the provisions of Subsection A (12) above because of the failure to record securities transactions of any advisory representative if the investment adviser establishes that it instituted adequate procedures and used reasonable diligence to promptly obtain reports of all transactions required to be recorded;

(13) Records of Beneficial ownership (other)

(a) Notwithstanding the provisions of Subsection A (12) above, where the investment adviser is primarily engaged in a business or businesses other than advising investment advisory clients, a record must be maintained of every transaction in a security in which the investment adviser or any advisory representative (as hereinafter defined) of the investment adviser has, or by reason of any transaction acquires, any direct or indirect beneficial ownership, except:

(i) transactions effected in any account over which neither the investment adviser nor any advisory representative of the investment adviser has any direct or indirect influence or control; and

(ii) transactions in securities which are direct obligations of the United States.

The record shall state the title and amount of the security involved; the date and nature of the transaction (i.e. purchase, sale, or other acquisition or disposition); the price at which it was effected; and the name of the broker-dealer or bank with or through whom the transaction was effected. The record may also contain a statement declaring that the reporting or recording of any transaction shall not be construed as an admission that the investment adviser or advisory representative has any direct or indirect beneficial ownership in the security. A transaction shall be recorded not later than 10 days after the end of the calendar quarter in which the transaction was effected.

(b) An investment adviser is “primarily engaged in a business or businesses other than advising investment advisory clients” when, for each of its most recent three (3) fiscal years or for the period of time since organization, whichever is lesser, the investment adviser derived from such other business or businesses, on an unconsolidated basis, more than fifty percent (50%) of:

- (i) its total sales and revenues; and
- (ii) its income (or loss) before income taxes and extraordinary items.

(c) For purposes of Subsection A (13) above, the following definitions will apply:

(i) “advisory representative”, when used in connection with a company primarily engaged in a business or businesses other than advising investment advisory clients, shall mean any partner, officer, director, or employee of the investment adviser who participates in any way in the determination of which recommendation shall be made, or whose functions or duties relate to the determination of which securities are being recommended prior to the effective dissemination of the recommendations; and any of the following persons,

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who obtain information concerning securities recommendations being made by the investment adviser prior to the effective dissemination of such recommendations or of the information concerning the recommendations:

- (A) any person in a control relationship to the investment adviser;
- (B) any affiliated person of a controlling person; and
- (C) any affiliated person of an affiliated person;

(ii) “control” shall mean the power to exercise a controlling influence over the management or policies of a company, unless such power is solely the result of an official position with such company. Any person who owns beneficially, either directly or through one or more controlled companies, more than twenty five percent (25%) of the voting securities of a company shall be presumed to control such company.

(d) An investment adviser shall not be deemed to have violated the provisions of Subsection A (13) above because of the failure to record securities transactions of any advisory representative if the investment adviser establishes that it instituted adequate procedures and used reasonable due diligence to promptly obtain reports of all transactions required to be recorded;

(14) A copy of each written statement and each amendment or revision, given or sent, to any client or prospective client of the investment adviser, and a record of the dates that each written statement and each amendment or revision, was given, or offered to be given, to any client or prospective client who subsequently became a client;

(15) For each client that was obtained by the adviser by means of a solicitor to whom a cash fee was paid by the adviser:

- (a) evidence of a written agreement to which the adviser is a party related to the payment of such fee;
- (b) a signed and dated acknowledgment of receipt from the client evidencing the client’s receipt of the investment adviser’s disclosure statement and a written disclosure statement of the solicitor; and
- (c) a copy of the solicitor’s written disclosure statement. The written agreement, acknowledgment and solicitor disclosure statement will be considered to be in compliance if such documents are in compliance with Rule 275.206(4)-3 of the Investment Advisers Act of 1940.

For purposes of this Rule, the term “solicitor” shall mean any person or entity who, for compensation, acts as an agent of an investment adviser in referring potential clients;

(16) All accounts, books, internal working papers, and any other records or documents that are necessary to form the basis for or demonstrate the calculation of the performance or rate of return of all managed accounts or securities recommendations in any notice, circular, advertisement, newspaper article, investment letter, bulletin, or other communication including but not limited to electronic media that the investment adviser circulates or distributes, directly, or indirectly, to two (2) or more persons (other than persons connected with the investment adviser); provided, however, that, with respect to the performance of managed accounts, the retention of all account statements, if they reflect all debits, credits, and other transactions in a client’s account for the period of the statement, and all worksheets necessary to demonstrate the calculation of the performance or rate of return of all managed accounts shall be deemed to satisfy the requirements of this paragraph;

(17) A file containing a copy of all written communications received or sent regarding any complaints or litigation involving the investment adviser or any investment adviser representative or other employee, and any current or former customer or client;

(18) Written information about each investment advisory client that is the basis for making any recommendation or providing any investment advice to such client;

(19) Written procedures to supervise the activities of employees and investment adviser representatives that are reasonably designed to achieve compliance with applicable securities laws and regulations; and

(20) A file containing a copy of each document (other than any notices of general dissemination) that was filed with or received from any state or federal agency or self regulatory organization and that pertains to the registrant or its investment adviser representatives. The file should contain, but is not limited to, all applications, amendments, renewal filings, and correspondence.

(21) A copy, with original signatures of the investment adviser’s appropriate signatory and the investment adviser representative, of each initial Form U-4 and each amendment to Disclosure Reporting Pages (DRPs Form U-4). Each copy must be retained by the investment adviser (filing on behalf of the investment adviser representative) and must be made available for inspection upon regulatory request.

(22) Where the investment adviser inadvertently held or obtained a client’s securities or funds and returned them to the client within three business days, or has forwarded third-party checks within three business days, a

ledger or other listing of all securities or funds held or obtained. Such ledger or other listing shall include the following information:

- (a) Issuer;
- (b) Type of Security and series;
- (c) Date of issue;
- (d) For debt instruments, the denomination, interest rate, and maturity date;
- (e) Certificate number, including any alphabetical or other prefix or suffix;
- (f) Name in which registered;
- (g) Date given to the adviser;
- (h) Date securities or funds were sent to client or sender, or date third-party checks were forwarded;
- (i) Name and address to whom the securities or funds were sent, or third-party checks were forwarded;
- (j) Form of delivery to client or sender, or copy of the form of delivery to client or sender; and
- (k) Mail confirmation number, if applicable, or confirmation by client or sender of the fund's or security's

return.

(23) If an investment adviser obtains possession of securities that are acquired from the issuer in a transaction or chain of transactions not involving any public offering that comply with the exception from custody, the investment adviser shall keep and maintain the following records:

(a) A record showing the issuer's or current transfer agent's name, address, phone number, and other applicable contact information pertaining to the party responsible for recording client interests in the securities; and

(b) A copy of any legend, shareholder agreement, or other agreement, showing that those securities are transferable only with prior consent of the issuer or holders of the outstanding securities of the issuer.

B. If an investment adviser subject to Section A of this Rule has custody or possession of securities or funds of any client, the records required to be made and kept under Section A above shall include:

(1) A journal or other record showing all purchases, sales, receipts and deliveries of securities (including certificate numbers) for all accounts and all other debits and credits to the accounts;

(2) A separate ledger account for each client showing all purchases, sales, receipts and deliveries of securities, the date and price of each purchase and sale, and all debits and credits;

(3) Copies of confirmations of all transactions effected by or for the account of any client; and

(4) A record for each security in which any client has a position, which record shall show the name of each client having an interest in the security, the amount or interest of each client, and the location of each security.

(5) A copy of any and all documents executed by the client (including a limited power of attorney) under which the investment adviser is authorized or permitted to withdraw a client's funds or securities maintained with a custodian upon the investment adviser's instruction to the custodian;

(6) A copy of each client's quarterly account statements, as generated and delivered by the qualified custodian. If the investment adviser also generates a statement that is delivered to the client, the adviser shall also maintain copies of such statements along with the date such statements were sent to the clients;

(7) If applicable to the adviser's situation, a copy of the special examination report verifying the completion of the examination by an independent certified public accountant and describing the nature and extent of the examination; and

(8) A record of any finding by the independent certified public accountant of any material discrepancies found during the examination.

C. Every investment adviser subject to Subsection A of this Rule who renders any investment supervisory or management service to any client shall, with respect to the portfolio being supervised or managed and to the extent that the information is reasonably available to or obtainable by the investment adviser, make and keep true, accurate and current:

(1) Records showing separately for each client the securities purchased and sold, and the date, amount and price of each purchase and sale; and

(2) For each security in which any client has a current position, information from which the investment adviser can promptly furnish the name of each client and the current amount or interest of the client.

D. Any books or records required by this Rule may be maintained by the investment adviser in such manner that the identity of any client to whom the investment adviser renders investment supervisory services is indicated by numerical or alphabetical code or some similar designation.

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E. Every investment adviser subject to Section A of this rule shall preserve the following records in the manner prescribed:

(1) All books and records required to be made under the provisions of Subsections A to C (1), inclusive, of this Rule (except for books and records required to be made under the provisions of Subsections A (11) and A (16) of this Rule), shall be maintained and preserved in an easily accessible place for a period of not less than five years from the end of the fiscal year during which the last entry was made on the record, the first two (2) years in the principal office of the investment adviser;

(2) Partnership articles and any amendments, articles of incorporation, charters, minute books, and stock certificate books of the investment adviser and of any predecessor, shall be maintained in the principal office of the investment adviser and preserved for at least three (3) years after termination of the enterprise;

(3) Books and records required to be made under the provisions of Subsections A (11) and A (16) of this Rule shall be maintained and preserved in an easily accessible place for a period of not less than five (5) years, the first two (2) years in the principal office of the investment adviser, from the end of the fiscal year during which the investment adviser last published or otherwise disseminated, directly or indirectly, the notice, circular, advertisement, newspaper article, investment letter, bulletin, or other communication, including communications made by electronic media; and

(4) Notwithstanding other record preservation requirements of this Rule, the following records or copies shall be required to be maintained at the business location of the investment adviser from which the customer or client is being provided or has been provided with investment advisory services: (a) records required to be preserved under Subsections A (3), A (7)-(10), A (14)-(15), A (17)-(19), B and C inclusive, of this Rule, and (b) the records or copies required under the provision of Subsections A (11) and A (16) of this Rule, which records or related records identify the name of the investment adviser representative providing investment advice from that business location, or which identify the business locations physical address, mailing address, electronic mailing address, or telephone number. The records will be maintained for the period described in Subsection E (1) of this Rule.

F. An investment adviser subject to Section A of this Rule, before ceasing to conduct or discontinuing business as an investment adviser shall arrange for and be responsible for the preservation of the books and records required to be maintained and preserved under this Rule for the remainder of the period specified in this Rule, and shall notify the Securities Commissioner in writing of the exact address where the books and records will be maintained during the period.

G. Preservation and reproduction of records

(1) The records required to be maintained and preserved pursuant to Sections A through F above may be immediately produced or reproduced, and maintained and preserved for the required time by an investment adviser on:

- (a) Paper or hard copy form, as those records are kept in their original form;
- (b) Micrographic media, including microfilm, microfiche, or any similar medium; or
- (c) Electronic storage media, including any digital storage medium or system that meets the terms of this section.

(2) The investment adviser must:

(a) Arrange and index the records in a way that permits easy location, access, and retrieval of any particular record;

(b) Promptly provide any of the following that the Securities Commissioner, through one of its examiners or other representatives, may request:

- (i) A legible, true, and complete copy of the record in the medium and format in which it is stored;
- (ii) A legible, true, and complete printout of the record; and
- (iii) Means to access, view, and print the records; and

(c) Store separately from the original record, for the time required for the original record, a duplicate copy of the record in any medium allowed by this section.

(3) With respect to records created or maintained on electronic storage media, the investment adviser must establish and maintain procedures:

(a) To maintain and preserve the records, so as to reasonably safeguard records from loss, alteration, or destruction;

(b) To limit access to the records to properly authorized personnel and the Securities Commissioner, including one or more of its examiners or other representatives; and

(c) To reasonably ensure that any reproduction of a non-electronic original record on electronic storage media is complete, true, and legible when retrieved.

H. For purposes of this Rule, “investment supervisory services” means the giving of continuous advice as to the investment of funds on the basis of the individual needs of each client; and “discretionary power” shall not include discretion as to the price at which or the time when a transaction is to be effected, if, before the order is given by the investment adviser, the client has directed or approved the purchase or sale of a definite amount of the particular security.

I. Any book or other record made, kept, maintained and preserved in compliance with Rules 17a-3 [17 C.F.R. 240.17a-3] and 17a-4 [17 C.F.R. 240.17a-4] under the Securities Exchange Act of 1934, which is substantially the same as a book or other record required to be made, kept, maintained and preserved under this Rule, shall be deemed to be made, kept, maintained and preserved in compliance with this Rule.

J. Every investment adviser registered or required to be registered in this State that has its principal place of business in a state other than this State shall be exempt from the requirements of this Rule, provided the investment adviser is licensed in such state and is in compliance with such state’s recordkeeping requirements.

13-409. Sole Proprietor Investment Advisers.

An individual acting as a sole proprietor who meets the definitions of investment adviser in Section 35-1-102(15) of the Act, and investment adviser representative in Section 35-1-102(16) of the Act, must register in South Carolina as both an investment adviser and an investment adviser representative.

13-410. Investment Adviser Representatives Registered with Multiple Investment Advisers.

A. An individual may apply to be registered as an investment adviser representative for more than one investment adviser or federal covered investment adviser by the filing of a separate Form U-4 application through the CRD by each investment adviser or federal covered investment adviser, and the payment of separate application fees as required through the CRD. By having multiple registration applications submitted on his or her behalf, the investment adviser representative affirmatively represents that he or she will make all disclosures to his or her clients and the affected investment adviser or federal covered investment adviser regarding potential conflicts of interests.

B. Each investment adviser or federal covered investment adviser that employs a multiple registered investment adviser representative shall comply with the requirements of the CRD and IARD regarding the multiple registrations of the investment adviser representative.

C. The Securities Commissioner may deny the multiple registration applications if he determines that it is not in the best interests of the public.

13-411. The Use of Senior-Specific Certifications and Professional Designations.

A. The use of senior-specific certification or designation by any person in connection with the offer, sale, or purchase of securities, or the provision of advice as to the value or the advisability of investing in, purchasing, or selling securities, either directly or indirectly or through publications or writings, or by issuing or promulgating analyses or reports relating to securities, that indicates or implies that the user has special certification or training in advising or servicing senior citizens or retirees, in such a way as to mislead any person, shall be a dishonest and unethical practice. The prohibited use of such certifications or professional designations includes, but is not limited to, the following:

(1) use of a certification or professional designation by a person who has not actually earned or is otherwise ineligible to use such certification or designation;

(2) use of a nonexistent or self-conferred certification or professional designation;

(3) use of a certification or professional designation that indicates or implies a level of occupational qualification obtained through education, training, or experience that the person using the certification or professional designation does not have; or

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(4) use of a certification or professional designation that was obtained from a designating or certifying organization that:

- (a) is primarily engaged in the business of instruction in sales and/or marketing;
- (b) does not have reasonable standards or procedures for assuring the competency of its designees or certificants;
- (c) does not have reasonable standards or procedures for monitoring and disciplining its designees or certificants for improper or unethical conduct; or
- (d) does not have reasonable continuing education requirements for its designees or certificants in order to maintain the designation or certificate.

B. There is a rebuttable presumption that a designation or certifying organization is not disqualified solely for purposes of subsection A(4) above when the organization has been accredited by:

- (1) The American National Standards Institute;
- (2) The National Commission for Certifying Agencies;
- (3) an organization that is on the United States Department of Education's list entitled "Accrediting Agencies Recognized for Title IV Purposes" and the designation or credential issued therefrom does not primarily apply to sales and/or marketing; or
- (4) any other nationally recognized accreditation organization designated by the Securities Commissioner by rule or order.

C. In determining whether a combination of words (or an acronym standing for a combination of words) constitutes a certification or professional designation indicating or implying that a person has special certification or training in advising or servicing senior citizens or retirees, factors to be considered shall include:

- (1) Use of one or more words such as "senior," "retirement," "elder," or like words, combined with one or more words such as "certified," "registered," "chartered," "adviser," "specialist," "consultant," "planner," or like words, in the name of the certification or professional designation; and
- (2) The manner in which those words are combined.

D. (1) For purposes of this rule, a certification or professional designation does not include a job title within an organization that is licensed or registered by a state or federal financial services regulatory agency, when that job title:

- (a) indicates seniority or standing within the organization; or
- (b) specifies an individual's area of specialization within the organization, unless the facts and circumstances associated with the provision or use of a job title indicate that it improperly suggests or implies certification or training beyond that which the titleholder possesses, or otherwise misleads investors.

(2) For purposes of this subsection, "financial services regulatory agency" includes, but is not limited to, an agency that regulates broker-dealers, investment advisers, or investment companies as defined under the Investment Company Act of 1940.

E. Nothing in this rule shall limit the Securities Commissioner's authority to enforce existing provisions of law.

13-412. Fees.

Every applicant applying for registration as an agent of the issuer shall pay the below specified, non-refundable fees:

- A. Agent of the Issuer (initial filing fee): One hundred ten dollars;
- B. Agent of the Issuer (renewal): One hundred ten dollars.

13-502. Dishonest or Unethical Practices by Investment Advisers, Investment Adviser Representatives and Federal Covered Advisers.

A. Each investment adviser and investment adviser representative shall observe high standards of commercial honor and just and equitable principals of trade in the conduct of their business. Acts and practices, including but not limited to the following, are considered contrary to such standards and may constitute grounds for denial, suspension or revocation of registration, imposition of administrative fines, or such other action authorized by statute:

(1) Recommending to a client to whom investment supervisory, management or consulting services are provided the purchase, sale or exchange of any security without reasonable grounds to believe that the recommendation is suitable for the client on the basis of information furnished by the client after reasonable inquiry concerning the client's investment objectives, financial situation and needs, and any other information known or acquired by the adviser after reasonable examination of the client's records as may be provided to the adviser.

(2) Placing an order to purchase or sell a security for the account of a client without authority to do so.

(3) Placing an order to purchase or sell a security for the account of a client upon instruction of a third-party without first having obtained a written third-party trading authorization from the client.

(4) Exercising any discretionary power in placing an order for the purchase or sale of securities without first obtaining written discretionary authority unless the discretionary power relates solely to the price at which, or the time when, an order involving a definite amount of specified securities shall be executed, or both.

(5) Inducing trading in a client's account that is excessive in size and frequency in view of the financial resources, investment objectives and character of the account.

(6) Borrowing money or securities from a client unless the client is a broker-dealer, an affiliate of the adviser, or a financial institution engaged in the business of loaning funds or securities.

(7) Loaning money to a client unless the adviser is a financial institution engaged in the business of loaning funds or the client is an affiliate of the adviser.

(8) Misrepresenting to any advisory client, or prospective advisory client, the qualifications of the adviser, its representatives or any employees or misrepresenting the nature of the advisory services being offered or fees to be charged for such services or omitting to state a material fact necessary to make the statements made regarding qualifications, services or fees, in light of the circumstances under which they are made, not misleading.

(9) Providing a report or recommendation to any adviser client prepared by someone other than the adviser, without disclosing that fact except that this prohibition does not apply to a situation where the adviser uses published research reports or statistical analyses to render advice or where an adviser orders such a report in the normal course of providing service.

(10) Charging a client an advisory fee that is unreasonable.

(11) Failing to disclose to a client in writing before entering into or renewing an advisory agreement with that client any material conflict of interest relating to the adviser, its representatives or any of its employees, which could reasonably be expected to impair the rendering of unbiased and objective advice including:

(a) Compensation arrangements connected with advisory services to clients which are in addition to compensation from such clients for such services; and

(b) Charging a client an advisory fee for rendering advice without disclosing that a commission for executing securities transactions pursuant to such advice will be received by the adviser, its representatives or its employees or that such advisory fee is being reduced by the amount of the commission earned by the adviser, its representatives or employees for the sale of securities to the client.

(12) Guaranteeing a client that a specific result will be achieved (gain or no loss) as a result of the advice which will be rendered.

(13) Publishing, circulating or distributing any advertisement which does not comply with Rule 206(4)-1 under the Investment Advisers Act of 1940.

(14) Disclosing the identity, affairs, or investments of any client to any third party unless required by law to do so, or unless consented to by the client.

(15) Taking any action, directly or indirectly, with respect to those securities or funds in which any client has any beneficial interest, where the adviser has custody or possession of such securities or funds when the adviser's action does not comply with the requirements of Rule 206(4)-2 under the Investment Advisers Act of 1940.

(16) Entering into, extending or renewing any investment advisory contract unless such contract is in writing and discloses, in substance, the services to be provided, the term of the contract, the advisory fee or the formula for computing the fee, the amount or the manner of calculation of the amount of the prepaid fee to be returned in the event of contract termination or non-performance, whether the contract grants discretionary power to the adviser or its representatives and that no assignment of such contract shall be made by the adviser without the consent of the other party to the contract.

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(17) Failing to establish, maintain, and enforce written policies and procedures reasonably designed to prevent the misuse of material nonpublic information in violation of Section 204A of the Investment Advisers Act of 1940.

(18) Entering into, extending, or renewing any advisory contract which would violate section 205 of the Investment Advisers Act of 1940. This provision shall apply to all investment advisers registered or required to be registered under the South Carolina Uniform Securities Act of 2005, notwithstanding whether such investment adviser would be exempt from federal registration pursuant to section 203(b) of the Investment Advisers Act of 1940.

(19) Indicating, in an advisory contract, any condition, stipulation, or provisions binding any person to waive compliance with any provision of the South Carolina Uniform Securities Act of 2005 or of the Investment Advisers Act of 1940, or any other practice that would violate section 215 of the Investment Advisers Act of 1940.

(20) Engaging in any act, practice, or course of business which is fraudulent, deceptive, or manipulative in contravention of section 206(4) of the Investment Advisers Act of 1940, notwithstanding the fact that such investment adviser is not registered or required to be registered under section 203 of the Investment Advisers Act of 1940.

(21) Employing any device, scheme, or artifice to defraud or engaging in any act, practice or course of business which operates or would operate as a fraud or deceit.

(22) Engaging in conduct or any act, indirectly or through or by any other person, which would be unlawful for such person to do directly under the provisions of this act or any rule or order thereunder.

B. The conduct set forth above is not inclusive. Engaging in other conduct such as non-disclosure, incomplete disclosure, or deceptive practices shall also be grounds for denial, suspension or revocation of registration, imposition of administrative fines, or such other action authorized by statute.

C. The provisions of this rule apply to federal covered advisers to the extent that the conduct alleged is fraudulent, deceptive, or other conduct not excluded from regulation pursuant to the National Securities Markets Improvement Act of 1996 (Pub. L. 104-290). The federal statutory and regulatory provisions referenced in this Rule shall apply to investment advisers, investment adviser representatives and federal covered advisers, regardless of whether the federal provision limits its application to advisers subject to federal registration.

13-503. Advertising Filing Requirement.

Any prospectus, pamphlet, circular, form letter, advertisement, sales literature, or other advertising relating to a security, addressed or intended for distribution to prospective investors under the South Carolina Uniform Securities Act of 2005, must be filed with the Securities Commissioner at least ten (10) business days prior to use in this State. The filing of an advertisement (or receipt thereof) does not constitute approval or a finding by the Securities Commissioner that the document is true, complete, or not misleading.

13-601. Financial Statements Submitted with an Application to Register Securities or used in a Prospectus.

A. All financial statements submitted with an application to register securities or for inclusion in a Prospectus used in this State, except a Prospectus relating to a federal covered security, shall be audited by an Independent Certified Public Accountant regularly engaged in business as such; provided, however (1) that interim statements prepared since the close of the last fiscal year shall not be required to be audited if prepared on a basis comparable to those audited, and (2) that financial statements approved by the South Carolina Department of Insurance or the United States Securities and Exchange Commission ("SEC") may be accepted by the Securities Commissioner in his discretion.

B. Where a company has been in business for less than one (1) year and submits one statement only which covers a period of less than one (1) year, such statement shall be audited.

C. A report signed by the Independent Certified Public Accountant should accompany the statements.

D. Financial statements filed with an application for registration of securities shall be updated when necessary so that the Prospectus as finally approved and in definitive form shall contain statements as of a date not more than six (6) months prior to the date of the Prospectus.

E. A Prospectus relating to securities in registration should be amended or supplemented whenever necessary to reflect any material changes, but in any event at least once in any period of twelve (12) consecutive months, in order to bring financial data up to date. Failure of the registrant to do so shall be considered cause for suspension of registration. The Securities Commissioner shall have discretion to determine whether to require the reprinting of the entire Prospectus.

F. The Securities Commissioner by rule or order, may waive any or all of the provisions of this Order.

13-603. Consents to Service of Process

The following forms constitute compliance with Section 35-1-611(a) of the South Carolina Uniform Securities Act of 2005:

A. For broker-dealers, a fully executed Execution Page of the Form BD, Uniform Application for Broker-Dealer Registration;

B. For investment advisers, a fully executed Execution Page of the Form ADV, Uniform Application for Investment Adviser Registration;

C. For agents and investment adviser representatives, a fully executed Form U-4, Uniform Application for Securities Industry Registration or Transfer;

D. For any offer or sale of securities made in compliance with Rules 501 through 508 of SEC Regulation D under the Securities Act of 1933, a fully executed Form D, Notice of Exempt Offering of Securities; and

E. For other filings, a fully executed Form U-2, Uniform Consent to Service of Process or such other form acceptable to the Securities Commissioner.

Fiscal Impact Statement:

There will be no increased costs to the State or its political subdivisions.

Statement of Rationale:

The regulations are being added to reflect developments in securities regulation since 2005, promote capital formation, and to better implement provisions of the South Carolina Uniform Securities Act of 2005.

Document No. 4459
CLEMSON UNIVERSITY
STATE CROP PEST COMMISSION
 CHAPTER 27

Statutory Authority: 1976 Code Section 46-26-30

27-180. Minimum Screening and Calcium Carbonate Equivalent Standards

28-181. Investigational Allowances or Tolerances and Penalties

Synopsis:

The proposed amendments will clarify and provide standards related to the quality of landplaster, as well as the inspection and registration of commercially sold landplaster used for agricultural purposes.

The Notice of Drafting was published in the *State Register* on December 27, 2013.

Instructions:

Replace Regulation 27-180 as listed below.

Replace Regulation 27-181 as listed below.

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Text:

27-180. Minimum Screening, Calcium Carbonate Equivalent and Landplaster Standards.

All agricultural liming materials shall be classified and labeled in terms of fineness and calcium carbonate equivalent with no less than the following minimum fineness and minimum calcium carbonate equivalent standards. All landplaster offered for sale or distribution shall meet minimum labeled guarantees for calcium and sulfur.

A. Standards for Classifications in Terms of Fineness

1. Pulverized

Mesh Screen	Minimum Guaranteed to Pass
20	95%
100	75%

2. Standard Ground

Mesh Screen	Minimum Guaranteed to Pass
10	90%
50	50%
100	25%

3. Coarse Ground

Mesh Screen	Minimum Guaranteed to Pass
10	90%
50	40%
100	25%

B. Standards for classifications in terms of calcium carbonate equivalent of agricultural liming materials.

Material	Calcium Carbonate Equivalent
Burnt lime	Not less than 140%
Hydrated lime	Not less than 110%
Shells	Not less than 85%
Limestone	Not less than 85%
Limestone (75% neutralizing value)	Not less than 75%
Industrial slag	Not less than 50%

C. Minimum nutrient guarantees for Landplaster

The minimum labeled guarantees for Landplaster shall be 16% for Calcium and 13% for Sulfur.

27-181. Investigational Allowances or Tolerances and Penalties.

A. A penalty shall be assessed when the found analysis indicates a deficiency of five percent (5%) or more of the guarantee for calcium carbonate equivalent. The registrant shall refund to the purchaser a penalty equal to two times the actual cash value of the deficiency based on the delivered retail price. The minimum penalty shall be \$1.00 per ton.

B. A penalty of \$1.00 per ton shall be assessed for each 5% or portion thereof decrease in the amount passing the 10 mesh screen below the minimum guarantee. A penalty of \$0.75 per ton shall be assessed for each 5% or portion thereof decrease in the amount passing the 50 mesh screen below the minimum guarantee. A penalty of \$0.50 per ton shall be assessed for each 5% or portion thereof decrease in the amount passing the 100 mesh screen below the minimum guarantee.

C. A penalty shall be assessed when the found analysis indicates a deficiency of ten percent (10%) or more of the guarantee for one or more of the following: Calcium or Magnesium. The registrant shall refund the purchaser a penalty equal to 2 times the relative commercial value of the deficiency.

D. In the case of landplaster, a penalty shall be assessed when the found analysis indicates a deficiency of five percent (5%) plus 0.2 units of the guarantees for sulphur and calcium. The registrant shall refund to the purchaser a penalty equal to two times the actual cash value of the deficiency based on the delivered retail price. The minimum penalty shall be \$1.00 per ton.

E. The term "unit" as described in Section 46-25-20 shall include any and every substance or mixtures of agricultural liming materials and landplaster.

Fiscal Impact Statement:

There will be no increased cost to the State or its political subdivisions.

Statement of Rationale:

Since 2012 land plaster has been regulated through the Agricultural Liming Materials and Landplaster Act (S.C. Code Ann. Section 46-26-10 et al.). Each year approximately 65,000 tons of land plaster is sold in South Carolina. This regulation will give Clemson University’s Department of Plant Industry the ability to adapt and follow the Association of American Plant Food Control Officials (AAPFCO) guidelines for land plaster investigational allowances. By analyzing land plaster samples, South Carolina farmers will have assurance they are receiving the proper amounts of gypsum as the guaranteed analysis of each product suggests.

Document No. 4490
CLEMSON UNIVERSITY
STATE CROP PEST COMMISSION
 CHAPTER 27

Statutory Authority: 1976 Code Sections 46-9-40 and 46-9-50

- 27-50. Regulated Areas
- 27-55.9. Infested Areas
- 27-70. Regulated Areas
- 27-75.7. Addition/deletion of lands from Regulation in South Carolina
- 27-75.9. Regulated Areas
- 27-135. Designation of Plant Pests
- 27-137. Designation of Asian Citrus psyllid as plant pest and quarantine
- 27-140. [Regulations Promulgated]
- 27-141. Pests

Synopsis:

The proposed amendments will update the language to define plant pests in South Carolina, it will define the process for annual evaluation of plant pests and quarantine areas in South Carolina, as well as establishing an official listing of plant pests and quarantine areas on the Clemson University website.

Instructions:

- Replace Regulation 27-50 as listed below.
- Replace Regulation 27-55.9 as listed below.
- Replace Regulation 27-70 as listed below
- Replace Regulation 27-75.7 as listed below.
- Replace Regulation 27-75.9 as listed below.
- Correct heading from Article 10 to reflect “Designation of Plant Pests” rather than “Seed Irish Potatoes.”
- Replace Regulation 27-135 as listed below.
- Add Article 10a “Asian Citrus Psyllid”.
- Add Article 10b “Seed Irish Potato”.
- Replace Regulation 27-140 as listed below.
- Replace Regulation 27-141 as listed below.

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Text:

ARTICLE 5 WITCHWEED QUARANTINE

27-50. Regulated Areas.

The official listing of quarantined areas in SC shall be maintained and made publicly available on Clemson's website located at: www.clemson.edu/invasives.

ARTICLE 5A TROPICAL SODA APPLE QUARANTINE

27-55.9. Infested Areas.

The official listing of quarantined areas in SC shall be maintained and made publicly available on Clemson's website located at: www.clemson.edu/invasives.

ARTICLE 6 SWEET POTATO WEEVIL QUARANTINE

27-70. Regulated Areas.

The official listing of regulated areas in SC shall be maintained and made publicly available on Clemson's website located at: www.clemson.edu/invasives.

ARTICLE 6B PLUM POX VIRUS QUARANTINE

27-75.7. Addition/deletion of lands from Regulation in South Carolina.

The official listing of regulated areas in SC shall be maintained and made publicly available on Clemson's website located at: www.clemson.edu/invasives.

27-75.9. Regulated Areas.

Any infested area in the United States as designated by USDA APHIS PPQ on their webpage: http://www.aphis.usda.gov/wps/portal/aphis/ourfocus/planthealth/sa_domestic_pests_and_diseases/sa_pests_and_diseases!/ut/p/a1/vVFnc4IwEP0tPFTIZI18HvGjikrbqeNUuGQ2gJIWA5Lo1H9fZLy1or0018y-ffvx9pGYrEks8Si2qEUpsTjHsc1mL1PaGwANJpPxAILnp8WrM59RCK2GEHUQ5tZ99cOJPzWdBQCYLoVgNJiOHC8ECOxb9e8kJnEidaVzEmGVC8WSUupMalYIXmN9egSFrDzUbfMmB9VGVYFNPs-w0HkLpOUuU1okrGo-xVCmLBUqQ5VdCn7A57FVllSeZmVcIujwVNwDZNzaniuRw2OPddzkJr91L7lhCvPh7tk3jh0S-i6ZEvo2CFqInSujhjbZPIH1bM73Bcf-33sNx6eXfvSZP2fJjbzaR0Ow20jC3VuCLkpybq7V5v_Ba52q9XO7Z-MzzcX-lZxXPgP38Lra8A!/?1dmy&urile=wcm%3apath%3a%2Faphis_content_library%2Fsa_our_focus%2Fsa_plant_health%2Fsa_domestic_pests_and_diseases%2Fsa_pests_and_diseases%2Fsa_plant_disease%2Fsa_plum_pox%2Fct_plum_pox

ARTICLE 10 DESIGNATION OF PLANT PESTS

27-135. Designation of Plant Pests.

1. The Commission hereby delegates to the Director the authority to determine and implement appropriate measures to eradicate, control, or slow the spread of plant pests in South Carolina. This authority extends to a decision that a plant pest has become so widespread that the initiation or continuation of control measures would be ineffective.

2. An advisory committee made up of at least 5 members will meet at least annually to review and make recommendations on the official listing of plant pests in SC. The committee members will be: the State Plant Regulatory Official for South Carolina (or designee), the USDA State Plant Health Director for South Carolina (or designee), a Clemson University Cooperative Extension Service Representative, and at least 2 at large representatives from other stakeholder agencies, such as the SC Department of Natural Resources, the SC Forestry Commission, or the SC Department of Agriculture. At large members shall be nominated and voted on by the advisory committee at its annual meeting. Additional at large members may be nominated and voted in at the annual advisory committee meeting. At large members from stakeholder agencies shall each serve a three-year term.

3. The official listing of plant pests in SC shall be maintained and made publicly available on Clemson's website located at: www.clemson.edu/invasives.

ARTICLE 10a
ASIAN CITRUS PSYLLID

27-137. Designation of Asian Citrus psyllid as plant pest and quarantine.

1. Asian citrus psyllid (ACP), *Diaphorina citri* Kuwayama, is hereby designated a plant pest, pursuant to Title 46, Chapter 9, Section 15, SC Code of Laws.

2. Effective immediately, a quarantine is placed on Charleston County, Beaufort County and Colleton County for ACP. Regulated articles as cited below may not be moved into or within unregulated areas of South Carolina from these counties except as outlined hereafter.

3. The following are regulated articles based on the fact that they are plants or plant parts that are hosts of ACP: All plants, budwood, cuttings, or other fresh or live plant parts, except seed and fruit, of: *Aegle marmelos*, *Aeglopsis chevalieri*, *Afraegle gabonensis*, *A. paniculata*, *Atalantia monophylla*, *Atalantia* spp., *Balsamocitrus dawaei*, *Bergera* (=Murraya) *koenigii*, *Calodendrum capense*, *X Citroncirus webberi*, *Citropsis articulata*, *Citropsis gilletiana*, *C. schweinfurthii*, *Citrus madurensis* (= *X Citrofortunella microcarpa*), *Citrus* spp., *Clausena anisum olens*, *C. excavata*, *C. indica*, *C. lansium*, *Eremocitrus glauca*, *Eremocitrus hybrid*, *Fortunella* spp., *Limonia acidissima*, *Merrillia caloxylon*, *Microcitrus australasica*, *Microcitrus australis*, *M. papuana*, *X Microcitronella* spp., *Murraya* spp., *Naringi crenulata*, *Pamburus missionis*, *Poncirus trifoliata*, *Severinia buxifolia*, *Swinglea glutinosa*, *Tetradium ruticarpum*, *Toddalia asiatica*, *Triphasia trifolia*, *Vepris* (=Toddalia) *lanceolata*, and *Zanthoxylum fagara*.

4. In order to be eligible to move interstate or intrastate from ACP quarantined areas, regulated articles must meet the following requirements:

A. Treatment. All regulated articles moving from quarantined counties must be treated with any approved treatment for ACP either listed in 7 CFR 305 or listed below in this Order using an Environmental Protection Agency (EPA) approved product labeled for use in nurseries. Persons applying treatments must follow the product label, its applicable directions, and all restrictions and precautions, including statements pertaining to Worker Protection Standards.

i. Regulated articles not intended for consumption must be treated with a drench containing imidacloprid as the active ingredient within 30 days prior to shipping and also be treated with a foliar spray with a product containing either acetamiprid, chlorpyrifos, or fenpropathrin as the active ingredient within 10 days prior to movement.

ii. Or, in the case of regulated articles intended for consumption or decorative use, such as fresh curry leaf (*Bergera Murraya koenigii*), or mock orange (*Murraya paniculata*) leaves that are incorporated into leis or floral arrangements, this plant material must be treated prior to the interstate movement in accordance with APHIS treatment schedule T101 n 2 (methyl bromide fumigation treatment for external feeding insects on fresh herbs) at the times and rates specified in the treatment manual and safeguarded until movement. As an alternative to methyl bromide fumigation, regulated materials originating from an area not quarantined for CG may be irradiated in accordance with 7 CFR 305.

B. Inspection. All regulated articles that have been treated as provided above must be inspected by an inspector and found free of the ACP within 72 hours prior to shipping. Inspection of curry leaf that is treated with methyl bromide fumigation will not be required since the treatment is considered to be effective in killing all life stages of ACP that might be present.

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C. Compliance Agreements. Any person engaged in the business of growing or handling regulated articles for intrastate movement shall enter into a compliance agreement with the Department of Plant Industry to facilitate the movement of regulated articles in accordance with all of the requirements of the above requirements. Such persons must agree to handle, pack, process, treat, and move regulated articles in accordance with state regulations; to use all permits and certificates in accordance with instructions; and to maintain and offer for inspection such records as may be required.

D. Cancellation. Any compliance agreement may be cancelled by an inspector if the inspector finds that the person who entered into the compliance agreement has failed to comply with all of the regulatory requirements.

ARTICLE 10b SEED IRISH POTATOES

27-140. Seed Irish Potatoes

The South Carolina State Crop Pest Commission, to protect the yield and quality of Irish Potatoes, does hereby promulgate the following regulation, declaring the pests, regulated area, restricted material, conditions governing the issuance and use of certificates for the movement of restricted material, inspections and tolerances governing certification, and penalties.

27-141. Pests.

The official listing of Seed Irish Potato pests in SC shall be maintained and made publicly available on Clemson's website located at: www.clemson.edu/invasives.

Fiscal Impact Statement:

There will be no increased cost to the State or its political subdivisions.

Statement of Rationale:

New plant pests may arrive at any time, necessitating the implementation of a plant pest quarantine. Likewise, new plant pests and invasive plant species may be detected at any time, or may be so designated by USDA APHIS PPQ. In either case, the South Carolina state plant pest list would need to be updated in a timely manner to reflect the current plant pest status. Posting the plant pest list and plant quarantines on the Clemson University website, would allow for immediate updates and greater ease for the public to access this information, as well as creating an official review committee providing annual review of the plant pest listing.

Document No. 4549
DEPARTMENT OF CONSUMER AFFAIRS
CHAPTER 28
Statutory Authority: 1976 Code Sections 40-58-10 et seq.,
Particularly Section 40-58-100

28-400. Licensing of Mortgage Brokers

Synopsis:

The Department proposes to amend and modify Regulation 28-400. The purpose of the proposed amendments is to revise and edit regulatory language to conform to changes of state and federal law and delete the previous regulation.

Section 40-58-100 authorizes the department to promulgate regulations necessary to effectuate the purposes of the chapter.

Notice of Drafting for the proposed regulation was published in the *State Register* on September 26, 2014. Comments were solicited for consideration in drafting the proposed regulation. Proposed regulation was published in the *State Register* on December 26, 2014.

Instructions:

Replace Regulation 28-400 as printed below.

Text:

28-400. Licensing of Mortgage Brokers.

(Statutory Authority: 1976 Code Section 40-58-100 (as amended), 12 USC 5101 et seq., and 12 CFR Part 1008)

A. Definitions – Definitions shall be those contained in the Licensing of Mortgage Brokers Act, S.C. Code Ann. Section 40-58-10 et seq.; Secure and Fair Enforcement for Mortgage Licensing Act of 2008, 12 USC 5101 et seq.; S.A.F.E. Mortgage Licensing Act, 12 CFR Part 1008 and the following:

- (1) Act – means the Licensing of Mortgage Brokers Act, S.C. Code Ann. Section 40-58-10 et seq.
- (2) Co-brokering – means any sharing, regardless of percentage, of mortgage broker services or fees by two or more licensed mortgage brokers on behalf of a borrower.
- (3) Day – means all calendar days including Saturdays, Sundays and legal public holidays.
- (4) Employee for purposes of compliance with the federal income tax laws – means a natural person whose manner and means of performance of work are subject to the right of control of, or are controlled by, a person, and whose compensation for Federal income tax purposes is reported, or required to be reported, on a W-2 form issued by the controlling person. (See IRS Publication 1779 and Form SS-8).
- (5) Loan correspondent – means a person engaged in the business of making mortgage loans as a third party originator and who does not engage in all three of the following activities with respect to each mortgage loan: underwrite the mortgage loan by their employees, approve the mortgage loan, and fund the mortgage loan utilizing an unrestricted warehouse or credit line. A loan correspondent is not a mortgage lender for purposes of compliance with S.C. Code Section 37-22-110 et seq.
- (6) Loss mitigation – means the practice of offering to provide or providing, in a for profit context, a service, plan, or program that is represented expressly or by implication to assist the borrower to prevent, delay, or otherwise avoid foreclosure, including, but not limited to, loan modifications, short sales, and deeds in lieu of foreclosure. This definition does not include persons acting exclusively for or as a bona fide nonprofit organization as determined by the Department or mortgage lenders/servicers licensed pursuant to S.C. Code Section 37-22-110 et seq., when acting for mortgage loans they own or service.

B. Licensing of Independent Contractor Processors or Underwriters

(1) Independent contractor processors or underwriters, including those currently licensed as mortgage lenders/servicers pursuant to S.C. Code Section 37-22-110 et seq., shall comply with the Act, except for the following provisions:

- (a) Section 40-58-65(A) maintaining a mortgage log;
- (b) Section 40-58-65(B) maintaining an in-state office;

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(c) Section 40-58-75 completing a mortgage broker fee agreement;

(d) Section 40-58-78 additional disclosures on mortgage broker fee agreement;

(e) Sections 40-58-120(A), (B) and (C) annual report for loans originated, however an annual report for gross revenue is required.

(2) Independent Contractor Processors or Underwriters shall not originate mortgage loans.

C. All South Carolina mortgage loans are subject to the provisions of all South Carolina and federal law related to mortgage loans, including, but not limited to, the Real Estate Settlement Procedures Act of 1974 (RESPA) 12 USC Section 2601 et seq.

D. Reports

(1) Mortgage log required pursuant to Section 40-58-65(A) shall:

(a) be completed electronically as required by the Department. The licensee is responsible for all costs associated with the electronic filing, and

(b) include all mortgage loans or applications where a credit report is requested, regardless of whether a mortgage loan is originated or modified.

(2) Annual report required by Section 40-58-120 shall be:

(a) completed as a mortgage call report (MCR) (See Secure and Fair Enforcement for Mortgage Licensing Act of 2008, 12 USC 5101 et seq.; Safe Mortgage Licensing Act, 24 CFR Part 3400 and Staff Commentary), and

(b) submitted electronically on a quarterly basis as required by the Nationwide Mortgage Licensing System and Registry (NMLS&R) by the mortgage broker for all locations and loan originators.

(3) The Department at its discretion may require or accept an Expanded Mortgage Call Report filed through the Nationwide Mortgage Licensing System & Registry (NMLS&R) or similar filing in lieu of the annual report required by Section 40-58-120.

E. Licensing for loss mitigation activities. Persons providing or offering to provide loss mitigation shall comply with the Act unless the Department has determined the person is exempt pursuant to Section 40-58-20(16) and Sections (A)(6) and (F) herein.

F. Bona fide Nonprofit Organizations (12 CFR 1008.103(e)(7)).

(1) The Department may consider an organization a bona fide nonprofit organization based on but not limited to the following minimum criteria:

(a) Has the status of a tax-exempt organization under section 501(c)(3) of the Internal Revenue Code of 1986;

(b) Promotes affordable housing or provides homeownership education, or similar services;

(c) Conducts its activities in a manner that serves public or charitable purposes, rather than commercial purposes;

(d) Receives funding and revenue and charges fees in a manner that does not incentivize it or its employees to act other than in the best interests of its clients;

(e) Compensates its employees in a manner that does not incentivize employees to act other than in the best interests of its clients; and

(f) Provides or identifies for the borrower mortgage loans with terms favorable to the borrower and comparable to mortgage loans and housing assistance provided under government housing assistance programs.

(2) Bona fide nonprofit organizations must file for an initial determination and annually for renewal of this determination by the Department. Annual renewals must be filed by December 31st using forms and procedures as required by the Department.

(3) Bona fide nonprofit organizations may use the Nationwide Mortgage Licensing System for initial and renewal filings; however, they will be required to pay any associated processing fees.

Fiscal Impact Statement:

The department estimates the costs incurred by the State in complying with the proposed regulation will be approximately \$0.

Statement of Rationale:

The South Carolina *Licensing of Mortgage Brokers Act* specifically provides for the department to promulgate regulations necessary to effectuate the purposes of the Act. The Act also permits and/or contemplates the drafting of licensing requirements for independent contractor processors and underwriters and reporting requirements. Such modifications and additions are necessary to effectuate the consumer protection purpose of the Act and to guide businesses with compliance.

Document No. 4528

DEPARTMENT OF CONSUMER AFFAIRS

CHAPTER 28

Statutory Authority: 1976 Code Sections 37-16-10 et seq.,
Particularly Section 37-16-90

28-1100. Prepaid Legal Services Certificate of Registration

Synopsis:

The department proposes to promulgate Regulation 28-1100 to clarify registration requirements and processes regarding prepaid legal services companies and representatives and to provide for summary submission of representatives for renewal.

Section 37-16-90 authorizes the Department to promulgate regulations necessary to effectuate the purposes of Title 37, Chapter 16.

Notice of Drafting for the proposed regulation was published in the *State Register* on September 26, 2014. Comments were solicited for consideration in drafting the proposed regulation. Proposed regulation was published in the *State Register* on November 28, 2014.

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Instructions:

Promulgate Regulation 28-1100. (Prepaid Legal Services Certificate of Registration) as printed below.

Text:

28-1100. Prepaid Legal Services Certificate of Registration.

A. Definitions

Definitions shall be those contained in S.C. Code Ann. S. 37-16-10 et seq. (1976 as amended).

B. Registration of Prepaid Legal Company

(1) All persons or entities wishing to offer prepaid legal services to the general public or a segment of the general public in this State must first obtain a Certificate of Registration from the Administrator of the Department of Consumer Affairs. Initial applications for the Certificate will be made on the forms prescribed by the Administrator and must be accompanied by a fee of \$800.00.

(2) Certificates of Registration will be renewed upon payment of an annual renewal fee of \$800.00 on or before March 1. The renewal period will be between February 1 and March 1 of each year. Renewal requests may be made by letter and must be accompanied by a copy of the company's most recent financial statement certified by two principal officers of the company, or in the case of partnerships or sole proprietorships, by a partner or the proprietor.

C. Prepaid Legal Representatives

(1) Prepaid legal representatives must be registered with the Administrator before commencing any sales or solicitation activity in this State. Each representative must submit an application for registration on forms prescribed by the Administrator.

(2) Companies will consolidate all representative registration applications, prepare a prepaid legal representative appointment summary form prescribed by the Administrator, and submit the summary, all application forms and a non-refundable fee of \$40.00 for each representative listed on the summary form for approval by the Administrator.

(3) Prepaid legal representatives registration will be renewed upon payment of an annual, non-refundable fee of \$40.00 per representative on or before October 1. The renewal period will be between August 1 and October 1 of each year. Renewal requests will be made on the prepaid legal representative appointment summary form prescribed by the Administrator. Individual application forms are not required for the renewal of prepaid legal representatives. The renewal summary form must be accompanied by a check for the total amount of fees due.

(4) When a prepaid legal representative is terminated, the company must notify the Administrator by filing a representative registration cancellation form prescribed by the Administrator within thirty days of termination.

Fiscal Impact Statement:

The Department of Consumer Affairs estimates the costs incurred by the State in complying with the proposed regulation will be approximately \$0.

Statement of Rationale:

Section 37-16-90 specifically provides for the department to promulgate regulations necessary for the implementation of Chapter 16. It is necessary to promulgate a regulation to clarify licensing requirements and provide for summary submission of representatives for renewal.

Document No. 4345

SOUTH CAROLINA CRIMINAL JUSTICE ACADEMY
CHAPTER 37

Statutory Authority: 1976 Code Sections 23-23-10 et seq.

37-112. Reporting to the National Decertification Index

Synopsis:

S.C. Code §23-23-80 authorizes the Law Enforcement Training Council to make regulations necessary for the administration of S.C. Code §23-23-10 et seq. The proposed additions to the regulations will allow for reporting of misconduct by law enforcement officers to the National Decertification Index once a case is finalized (no more appeals pending or possible).

Notice of Drafting for the proposed amendments was published in the *State Register* on January 25, 2013.

Instructions:

Add new regulation as shown below.

Text:

37-112. Reporting to the National Decertification Index.

A. After the Council has issued its final agency action and the time for appeal has lapsed or the appeal rights have been exhausted, if a candidate/officer/operator is found to have committed misconduct as defined by R.37-025, R.37-026, R.37-073, and/or R.37-074 or if a candidate/officer/operator consents to sanctions under R.37-108, no matter the sanction issued by the Council pursuant to R.37-108, that candidate/officer/operator's information shall be entered in the National Decertification Index by the Academy.

B. Entry of a candidate/officer/operator's information into the National Decertification Index in compliance with R.37-112(A) must not be the subject of or basis for any action at law or in equity in any court of the State.

Fiscal Impact Statement:

There will be a minimal increase in costs to the state with these changes, but these costs can be absorbed by the Academy.

Statement of Rationale:

Revisions to these regulations are necessary to allow for reporting of misconduct by law enforcement officers to the National Decertification Index once a case is finalized (no more appeals pending or possible).

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Document No. 4523
SOUTH CAROLINA CRIMINAL JUSTICE ACADEMY
CHAPTER 37
Statutory Authority: 1976 Code Sections 23-23-10 et seq.

37-101 through 37-110. Article 5, Adjudication of Misconduct Allegations

Synopsis:

S.C. Code §23-23-80 authorizes the Law Enforcement Training Council to make regulations necessary for the administration of S.C. Code §23-23-10 et seq. The proposed additions to the regulations will formalize the agency level contested case hearing process, including requests for contested case hearing, failure to request a contested case hearing, docketing, discovery, hearing format and requirements; failure to appear at contested case hearing, final decision by the Law Enforcement Training Council, sanctions, recusal of Council members, and right to be represented by counsel.

Notice of Drafting for the proposed amendments was published in the *State Register* on August 22, 2014. Proposed Regulations were published in the *State Register* on November 28, 2014. Public Hearing regarding the Proposed Regulations was held on January 28, 2015 before the Law Enforcement Training Council.

Section-by-Section Discussion

Article 5 (New)

- 37-101 This section deals with requests for contested case hearings.
- 37-102 This section deals with what happens is an officer fails to request a contested case hearing.
- 37-103 This section deals with prosecution of the allegation of misconduct and docketing of the contested case hearing.
- 37-104 This section deals with discovery in preparation for the contested case hearing.
- 37-105 This section deals with the mechanics of how the contested case hearing will run, including notice of the hearing and issuance of a recommendation after the hearing.
- 37-106 This section deals with failure of the agency or the officer to appear at the contested case hearing.
- 37-107 This section deals with the Council's issuance of the final agency decision.
- 37-108 This section outlines the sanctions available in cases of misconduct, including a voluntary consent to sanctions provision.
- 37-109 This section deals with recusal of Council members and/or the Director in certain situations.
- 37-110 This section deals with a candidate/officer's right to be represented by Counsel.

Instructions:

Add new regulations.

Text:

ARTICLE 5

ADJUDICATION OF MISCONDUCT ALLEGATIONS

37-101. Request for Contested Case Hearing.

A. Any candidate/officer/operator whom has an allegation of misconduct as defined by R.37-025, R.37-026, R.37-073 and/or R.37-074 made against them, upon being employed as a law enforcement officer as defined in S.C. Code 23-23-10(E)(1), may request a contested case hearing on a form prescribed by the Council. A request for contested case hearing must be served on the Academy within thirty (30) days after receipt of the written notice advising them of their right to a contested case hearing due to the allegation of misconduct. The written notice advising the candidate/officer/operator of their right to a contested case hearing due to the allegation of misconduct shall be sent by certified mail to the candidate/officer/operator's address currently on file at the Academy, return receipt requested, as soon as practicable after the Academy has received notice the candidate/officer/operator is employed as a law enforcement officer as defined in S.C. Code 23-23-10(E)(1). It is the responsibility of every candidate/officer/operator as described in Chapter 37 of these regulations to notify the Academy of his or her current address. All such notices required to be made to the candidate/officer/operator as prescribed in Chapter 37 of these regulations is effective upon mailing as required in this section.

B. A request for contested case hearing under this section must satisfy Rule 262(a), SCACR and Rule 263, SCACR.

37-102. Failure to Request Contested Case Hearing.

Any candidate/officer/operator who fails to request a contested case hearing pursuant to R.37-101, shall have a judgment by default made against him/her and the Council may immediately proceed with determining a final agency action.

37-103. Prosecution and Docketing.

A. When a candidate/officer/operator has requested a contested case hearing pursuant to R.37-101, the Agency making the allegation of misconduct shall handle the prosecution of the claim during the contested case hearing as provided below.

B. Upon receipt of a request for contested case hearing pursuant to R.37-101, a docket number shall be assigned to the case.

37-104. Discovery.

A. Any party to a contested case hearing requested pursuant to R.37-101 may engage in discovery only as allowed by this section or the Administrative Procedures Act.

B. Discovery shall be conducted pursuant to Rules 26-37, SCRCP, except:

1. Requests for Admission pursuant to Rule 36, SCRCP are not allowed;
2. Interrogatories pursuant to Rule 33, SCRCP shall be limited to twenty-five (25) interrogatories. In determining the number of interrogatories subparts shall be included, but the standard interrogatories contained in Rule 33(b), SCRCP shall not be included;

3. Physical and mental examinations pursuant to Rule 35, SCRCP do not need to meet the \$100,000 amount in controversy;

4. No more than three (3) depositions may be taken by either party unless the parties consent, with specificity, in writing, to the taking of additional depositions.

C. All discovery must be concluded at least thirty (30) days prior to the contested case hearing provided for in R.37-105.

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37-105. Contested Case Hearing.

A. The contested case shall be held upon thirty (30) days notice to the candidate/officer/operator and Agency making the allegation of misconduct.

B. The contested case hearing shall conform to Rule 43(a), (c)(1), (d), (e), (f), (h), (i), SCRCPP, except, counsel is not required to stand during examination.

C. Subpoenas may be issued by the candidate/officer/operator or the Agency making the allegation of misconduct to compel attendance and/or production of evidence at the contested case hearing so long as the subpoena complies with Rule 45, SCRCPP and is on a form prescribed by the Council.

D. During the contested case hearing both parties are entitled to cross examine witness and are entitled to present evidence. The candidate/officer/operator is not required to present evidence during the hearing.

E. The contested case hearing shall follow the format of:

1. Opening Statement by the Agency making the allegation of misconduct;
2. Opening Statement by candidate/officer/operator;
3. Presentation of case in chief by the Agency making the allegation of misconduct;
4. Presentation of case in chief by the candidate/officer/operator;
5. Rebuttal evidence as appropriate;
6. Closing Argument by the Agency making the allegation of misconduct; and
7. Closing Argument by candidate/officer/operator.

F. The hearing officer may accept evidence that conforms to Rule 6, SCRCrim.P. All other evidence accepted by the hearing officer shall conform to the South Carolina Rules of Evidence, unless otherwise agreed to by the parties.

G. All testimony must be presented under oath.

H. All documentary evidence accepted shall be numbered and labeled "State" or "Respondent" as appropriate.

I. The contested case hearing shall be documented by a court reporter.

J. Any objections during the contested case hearing shall be ruled on by the hearing officer.

K. In order for a candidate/officer/operator to have a recommendation made against them finding they did commit misconduct pursuant to R.37-025, R.37-026, R.37-073 and/or R.37-074, the hearing officer must find misconduct has been proven by substantial evidence.

L. The hearing officer shall issue a recommendation to the Council based on the evidence accepted during the hearing. The recommendation must include the following:

1. Recommended Findings of Fact;
2. Recommended Conclusions of Law; and
3. If appropriate, recommended sanction pursuant to R.37-108.

M. A copy of the hearing officer's recommendation to the Council shall be provided to the both parties, sent by certified mail to the candidate/officer/operator's address currently on file at the Academy or to the candidate/officer/operator's counsel and sent by certified mail to the Agency's address currently on file at the Academy or the Agency's counsel, return receipt requested, as soon as practicable after the recommendation has been issued. It is the responsibility of every candidate/officer/operator and Agency as described in Chapter 37 of these regulations to notify the Academy of his, her, or its current address. All such notices required to be made to the candidate/officer/operator and Agency as prescribed in Chapter 37 of these regulations is effective upon mailing as required in this section.

N. Duplicate of such notice shall be sent, in the same manner as prescribed in paragraph (M) above, to the current sheriff or chief executive officer of the employing agency or department of the law enforcement officer.

37-106. Failure to Appear at the Contested Case Hearing.

A. Any candidate/officer/operator or Agency making the allegation of misconduct notified pursuant to R.37-105(A) who fails to appear at the contested case hearing, shall have a judgment by default made against them by the hearing officer, shall have waived their right to present evidence at the contest case hearing, and the hearing officer shall not be required to issue a recommendation pursuant to R.37-105(L). Additionally, when the candidate/officer/operator notified pursuant to R.37-105(A) fails to appear at the contested case hearing, the Council may immediately proceed with determining whether the candidate/officer/operator committed

misconduct pursuant to R.37-025, R.37-026, R.37-073 and/or R.37-074 and, if misconduct has been committed, a sanction pursuant to R.37-108 for the misconduct. When the candidate/officer/operator notified pursuant to R.37-105(A) fails to appear, the evidence submitted to the Council shall not be required to conform to the Rules of Evidence.

37-107. Final Decision by Law Enforcement Training Council.

A. All Council members, unless recused, shall be provided with a complete transcript of the contested case hearing, copies of all exhibits accepted into evidence during the contested case hearing, and a copy of the hearing officer's recommendation.

B. A quorum of the Council must be present for a final agency decision to be made. A simple majority vote of the quorum of Council members present shall be binding for a final decision issued pursuant to R.37-107(D).

C. In order for a candidate/officer/operator to have a final decision issued finding that they did commit misconduct pursuant to R.37-025, R.37-026, R.37-073 and/or R.37-074, the Council must find misconduct has been proven by substantial evidence.

D. The Council shall issue a final decision based on the evidence accepted during the contested case hearing and the applicable statutes and regulations. The Council may consider the hearing officer's recommendation. The Council's final decision must include the following:

1. Findings of Fact;
2. Conclusions of Law; and
3. If appropriate, sanction(s) pursuant to R.37-108.

The Council may adopt the hearing officer's recommendation as the Council's final decision.

E. The Council may refer the matter back to the hearing officer for further proceedings or may order further evidentiary proceedings before the Council.

F. A copy of the Council's final decision shall be provided to the candidate/officer/operator and the Agency making the allegation of misconduct, sent by certified mail to the candidate/officer/operator's address currently on file at the Academy or to the candidate/officer/operator's counsel and sent by certified mail to the Agency's address currently on file at the Academy or to the Agency's counsel, return receipt requested, as soon as practicable after the final decision has been issued. The candidate/officer/operator shall be informed of his/her right to appeal the Council's final decision pursuant to Sections 1-23-380(B) and 1-23-600(D) of the South Carolina Code of Laws. It is the responsibility of every candidate/officer/operator and Agency as described in Chapter 37 of these regulations to notify the Academy of his, her, or its current address. All such notices required to be made to the candidate/officer/operator and Agency as prescribed in Chapter 37 of these regulations is effective upon mailing as required in this section.

G. Duplicate of such notice shall be sent, in the same manner as prescribed in paragraph (F) above, to the current sheriff or chief executive officer of the employing agency or department of the law enforcement officer.

37-108. Sanctions.

A. If any candidate/officer/operator is found by substantial evidence to have committed misconduct as defined by R.37-025, R.37-026, R.37-073 and/or R.37-074, such candidate/officer/operator may be sanctioned by the Council as follows, in any combination:

1. Permanent denial and/or revocation (withdrawal) of certification;
2. Denial and/or revocation (withdrawal) of certification for a specified amount of time;
3. Certification granted with probation;
4. Certification granted with any additional requirements deemed just and proper by the Council; and/or
5. Public reprimand.

B. Any candidate/officer/operator may at any time voluntarily consent to sanctions under this section. Any such consent must:

1. Be in writing on a form prescribed by the Council;
2. Be signed by the candidate/officer/operator;

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3. If the candidate/officer/operator has legal counsel at the time they consent to sanctions, then the candidate/officer/operator must be allowed to consult with their legal counsel regarding the consent to sanctions and the consent to sanctions must be signed by the legal counsel;

4. If criminal prosecution is declined in consideration of the consent to sanctions, then the consent to sanctions must specifically state the same;

5. Must be notarized; and

6. Must be approved by Council.

37-109. Recusal of Council Members.

A. If a member of the Council filed the allegation of misconduct or is the current sheriff or chief executive officer of the employing agency or department of the candidate/officer/operator, that Council member shall recuse themselves from participating in any hearing, final agency decision, or consent agreement entered into after allegations of misconduct have been filed regarding the matter. That member of the Council shall also be prohibited from discussing the issue with other Council members, except as a witness or party, until after the Council has issued its final agency action and the time for appeal has lapsed or the appeal rights have been exhausted. These prohibitions should not be construed as prohibiting the filing of any documents as required or allowed under Chapter 23 of Title 23 or Chapter 37 of the South Carolina Code of Regulations.

B. If any member of the Council has a personal relationship to the candidate/officer/operator or some other personal connection to the issue before them, then that Council member shall recuse themselves from participating in any hearing, final agency decision, or consent agreement entered into after allegations of misconduct have been filed regarding the matter. That member of the Council shall also be prohibited from discussing the issue with other Council members, except as a witness or party, until after the Council has issued its final agency action and the time for appeal has lapsed or the appeal rights have been exhausted. These prohibitions should not be construed as prohibiting the filing of any documents as required or allowed under Chapter 23 of Title 23 or Chapter 37 of the South Carolina Code of Regulations.

37-110. Right to be Represented by Counsel.

A. During all stages under R.37-100 through R.37-108, the candidate/officer/operator and Agency is entitled to be represented by legal counsel.

B. If the candidate/officer/operator or Agency are represented by legal counsel, a notice of such representation must be sent to the Academy and other party.

Fiscal Impact Statement:

There will be no increase in costs to the Academy as the requirements put forth by these regulations track those created by the Administrative Procedures Act.

Statement of Rationale:

Revisions to these regulations are necessary to formalize the agency level contest case hearing process, including requests for contested case hearing, failure to request a contested case hearing, docketing, discovery, hearing format and requirements; failure to appear at contested case hearing, final decision by the Law Enforcement Training Council, sanctions, recusal of Council members, and right to be represented by counsel.

Document No. 4372
SOUTH CAROLINA CRIMINAL JUSTICE ACADEMY
 CHAPTER 37
 Statutory Authority: 1976 Code Section 23-47-20(C)(15)

37-065. Certification

Synopsis:

S.C. Code §23-47-20(C)(15) authorizes the Law Enforcement Training Council to make regulations necessary for the training of telecommunication operators or dispatchers. The proposed additions to the regulations will clarify when certification takes place.

Notice of Drafting for the proposed amendments was published in the *State Register* on January 25, 2013.

Instructions:

Add new regulation as shown below.

Text:

37-065. Certification.

Certification will occur upon the successful completion of the prescribed training course as set out in R.37-066.

Fiscal Impact Statement:

There will be no fiscal impact as a result of this change.

Statement of Rationale:

Revisions to these regulations are necessary to clarify when certification takes place.

Document No. 4350
SOUTH CAROLINA CRIMINAL JUSTICE ACADEMY
 CHAPTER 37
 Statutory Authority: 1976 Code Sections 23-23-10 et seq. and 23-47-20(C)(15)

38-001. Authority of Director through 38-065. Cost of Training

Synopsis:

S.C. Code §23-23-80 authorizes the Law Enforcement Training Council to make regulations necessary for the administration of S.C. Code §23-23-10 et seq. S.C. Code §23-47-20(C)(15) authorizes the Law Enforcement Training Council to promulgate regulations necessary for the training of telecommunication operators or dispatchers. The regulations are currently housed in Chapter 38 South Carolina Department of Public Safety. The General Assembly passed Act 317 and Act 335 (South Carolina Code §23-23-10, et seq.) separating the South Carolina Criminal Justice Academy from the Department of Public Safety. The Act allows the Criminal Justice Academy to promulgate regulations as are necessary for the administration of Act 317. As part of this separation, the regulations must be moved to a new chapter titled “Law Enforcement Training Council.” Additionally, for ease of use, the regulations order should be reorganized.

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The proposed changes to the regulations will remove the regulations from Chapter 38, renumber them and place them in a new chapter titled “Law Enforcement Training Council.” The proposed changes to the regulations will also be reorganized to make them easier to use. The proposed changes to the regulations will also address other forms of speed measurement device training and operator certification. The proposed changes would remove the word “jailers” from the regulations. The proposed changes to the regulations will add consistency within the regulations and clarify the amount of continuing education requirements required for re-certification. The proposed changes to the regulations will remove unnecessary language from the regulations. The proposed changes to the regulations will also clarify the meaning of the regulations. The proposed changes to the regulations will also change the term “emergency services dispatcher” to “operator.” The proposed changes to the regulations will also clarify that some types of driving training must administered by an Academy certified Driving Instructor and CLEE credit will only be given if the training is administered by an Academy certified Driving Instructor.

Notice of Drafting for the proposed amendments was published in the *State Register* on January 25, 2013 and Proposed Regulations were published in the *State Register* on March 22, 2013. Final Regulations for General Assembly review were filed on April 2, 2014 and were automatically withdrawn at the conclusion of the Legislative Session.

Section-by-Section Discussion

37-001 This section moves part of the former section 38-028 to 37-001 and makes conforming clean up changes regarding regulation chapter and number changes.

37-002 This section moves the former section 38-001 to 37-002.

37-003 This section moves the former section 38-003 to 37-003 and makes conforming clean up changes regarding regulation chapter and number changes.

37-004 This section moves the former section 38-006 to 37-004 and makes conforming clean up changes regarding regulation chapter and number changes.

37-005 This section moves the former section 38-007 to 37-005. The proposed changes to this regulation would also remove the word “jailers” from the regulation.

37-006 This section moves the former section 38-008 to 37-006 and makes conforming clean up changes regarding regulation chapter and number changes. This section also adds some clarifying language and removes unnecessary language.

37-007 This section moves the former section 38-002 to 37-007.

37-008 This section moves the former section 38-014 to 37-008.

37-009 This section moves the former section 38-012 to 37-009 and makes conforming clean up changes regarding regulation chapter and number changes.

37-010 This section moves the former section 38-013 to 37-010 and makes conforming clean up changes regarding regulation chapter and number changes. This section also contains changes that will add consistency within the regulation itself and clarify the amount of continuing education requirements required for re-certification.

37-011 This section moves the former section 38-015 to 37-011 and makes conforming clean up changes regarding regulation chapter and number changes.

37-012 This section moves the former section 38-011 to 37-012 and makes conforming clean up changes regarding regulation chapter and number changes. This section will also change the words “traffic radar” to “speed measurement device” so that this training and certification may include many forms of speed measurement devices, including, but not limited to radar and lidar.

37-013 This section moves part of the former section 38-028 to 37-013 and makes conforming clean up changes regarding regulation chapter and number changes.

37-014 This section moves the former section 38-021 to 37-014 and makes conforming clean up changes regarding regulation chapter and number changes. The proposed changes will also delete section B as it is no longer necessary. This section will also remove unnecessary language from the regulation.

37-015 This section moves the former section 38-022 to 37-015 and makes conforming clean up changes regarding regulation chapter and number changes. This section also contains changes to clarify the meaning of the regulation, including providing that some types of training must administered by an Academy certified Driving Instructor.

37-016 This section moves the former section 38-023 to 37-016 and makes conforming clean up changes regarding regulation chapter and number changes. This section also has one clean up change to reflect the split of CJA from DPS.

37-017 This section moves the former section 38-014 to 37-017 and makes conforming clean up changes regarding regulation chapter and number changes. This section also contains changes to clarify that CLEE credit will only be given for training administered by an Academy certified Driving Instructor.

37-018 This section moves the former section 38-025 to 37-018. This section also contains changes to clarify the meaning of the regulation.

37-019 This section moves the former section 38-026 to 37-019 and makes conforming clean up changes regarding regulation chapter and number changes.

37-020 This section moves the former section 38-027 to 37-020 and makes conforming clean up changes regarding regulation chapter and number changes. This section also contains changes to clarify the meaning of the regulation.

37-021 This section moves the former section 38-005 to 37-021.

37-022 This section moves the former section 38-009 to 37-022.

37-023 This section moves the former section 38-017 to 37-023 and makes conforming clean up changes regarding regulation chapter and number changes.

37-024 This section moves the former section 38-018 to 37-024 and makes conforming clean up changes regarding regulation chapter and number changes.

37-025 This section moves the former section 38-004 to 37-025 and makes conforming clean up changes regarding regulation chapter and number changes.

37-026 This section moves the former section 38-016 to 37-026 and makes conforming clean up changes regarding regulation chapter and number changes.

37-027 This section moves the former section 38-019 to 37-027 and makes conforming clean up changes regarding regulation chapter and number changes.

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37-028 New.

37-029 This section moves the former section 38-020 to 37-029 and makes conforming clean up changes regarding regulation chapter and number changes.

37-030 This section moves the former section 38-010 to 37-030 and makes conforming clean up changes regarding regulation chapter and number changes.

37-060 This section renumbers the former section 38-060 to 37-060.

37-066 This section moves the former section 38-062 to 37-066. This section also changes the term “emergency services dispatcher” to “operator.”

37-067 This section moves the former section 38-063 to 37-067 and makes conforming clean up changes regarding regulation chapter and number changes.

37-069 This section moves the former section 38-065 to 37-069.

37-070 This section moves the former section 38-064 to 37-070.

Instructions:

Print regulation as shown below.

Text:

ARTICLE 1

LAW ENFORCEMENT TRAINING

37-001. Definitions.

A. For purposes of R. 37-002 – 37-030, the following definitions shall apply:

1. “Agency” means local government or public safety agency employing law enforcement officers.
2. “Director” means the Director of the South Carolina Criminal Justice Academy.
3. “Academy” means the South Carolina Criminal Justice Academy.
4. “Council” means the Law Enforcement Training Council.

37-002. Authority of Director.

A. The Director is authorized to issue orders directing that public law enforcement agencies and law enforcement officers certified in this state comply with Chapter 23 of Title 23, Code of Laws of South Carolina, 1976, as amended, and the regulations promulgated pursuant thereto.

B. All orders so issued shall be reviewed and ratified by the Council prior to their issuance.

37-003. Requirement of Good Character.

A. Background Investigations.

Every agency who requests certification of any class of law enforcement officer shall conduct a background investigation in accordance with guidelines issued by the Council.

B. Certification to the Council.

Every agency who requests certification of any class of law enforcement officer shall certify to the Council that, in the opinion of the employing agency, the candidate is of good character and has not engaged in misconduct as defined in R.37-025.

C. Availability of Background Information.

Information obtained in any background investigation made in response to these regulations, shall be available, upon request, to the Academy and/or Council for its review and to any future prospective law enforcement employers to assist them in a determination of an applicant's good character for law enforcement certification.

37-004. Certification.

Certification will occur upon the successful completion of the prescribed training course as set out in R.37-005. No candidate may be certified in more than one class at any one time and certification shall be that required for the most recent employing agency.

37-005. Training Requirements for Basic Law Enforcement Certification.

A. Class 1 Certifications

1. Candidates for basic certification as law enforcement officers with full powers shall successfully complete a training program as approved by the Council and will be certified as Class 1-LE.

2. Candidates for basic certification as both law enforcement officers with full powers and as local detention facility officers shall successfully complete the requirements to be certified as Class 1-LE and Class 2-LCO and will be certified as Class 1-LECO.

B. Class 2 Certifications

1. Candidates for basic certification as local detention facility officers shall successfully complete a training program as approved by the Council and will be certified as Class 2-LCO.

2. Candidates for basic certification as correctional officers with the Department of Corrections shall successfully complete a training program as approved by the Council and will be certified as Class 2-SCO.

3. Candidates for basic certification as juvenile correction officers with the Department of Juvenile Justice shall successfully complete a training program as approved by the Council and will be certified as Class 2-JCO.

C. Class 3 Certifications. Candidates for basic certification as law enforcement officers with limited powers of arrest or special duties shall successfully complete a training program as approved by the Council and will be certified as Class 3-SLE.

37-006. Equivalent Training.

A. Other States

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All candidates who have received law enforcement training in other states shall submit satisfactory proof of successful completion and a verified copy of the courses taken. Training will be reviewed on a case by case basis and each candidate will be given credit for any training deemed to be equivalent to training offered by the Academy. All candidates must successfully complete a training program approved by the Council .

B. Federal Training

All candidates who have received law enforcement training with U.S. federal agencies shall submit satisfactory proof of successful completion and a verified copy of the courses taken. Training will be reviewed on a case by case basis and each candidate will be given credit for any training deemed to be equivalent to training offered by the Academy. All candidates must successfully complete a training program approved by the Council .

C. Military Training

All candidates who have received law enforcement training as U.S. military police shall submit satisfactory proof of successful completion and a verified copy of the courses taken. Training will be reviewed on a case by case basis and each candidate will be given credit for any training deemed to be equivalent to training offered by the Academy. All candidates must successfully complete a training program approved by the Council .

D. Prior Training with Break in Service

1. All certification lapses when an individual terminates active law enforcement duty and break in service time immediately begins to accrue.

2. A candidate with a break in service of less than one year will be re-certified by the Academy upon receiving a request by his or her department and upon providing proof of no disabilities at law.

3. A candidate with a break in service of one year but less than three years will be re-certified upon submission of the application with appropriate documents as set out in Section 23-23-60 of the South Carolina Code of Laws, R.37-007 and successful completion of a training program approved by the Council

4. A candidate with a break in service of three years or more must complete all the requirements of Section 23-23-60 of the South Carolina Code of Laws, R.37-005, R.37-007, and R.37-021.

5. When a candidate becomes subject to new training requirements, as set forth in R.37-005, as a result of a transfer from one agency to another with different training requirements, the candidate must successfully complete the training requirements for the class of certification the candidate will occupy with the new agency.

6. A candidate who has been certified in this state, in any class, and who has a break in service of less than one year and who transfers to a class in which he/she has been previously certified, will be certified in the prior class upon successful completion of the firearms qualification requirement.

37-007. Application for Re-issuance of Certification.

All applications for re-issuance of law enforcement certification shall be submitted to the Academy within fifteen days after hiring on a form prescribed by the Council.

37-008. Approval of Continuing Law Enforcement Education Hours for Re-certification Requirements.

A. The Academy shall approve courses for CLEE hours toward officer re-certification upon application made on a form approved by the Academy and containing the following information concerning the courses.

1. The name of the course sponsor and its address;
2. The course agenda showing the actual number of hours of instruction;
3. A listing of course faculty with educational and professional credentials for each faculty member;
4. A copy of the course written materials, including a lesson plan and any test instruments which will be used;
5. Any supporting material which the course offeror wishes to submit for the Academy's consideration.

B. The Academy shall maintain a listing of courses which are approved for CLEE hours towards officer re-certification and shall indicate after each course the number of CLEE hours for which the course is approved. The listing shall be updated on an annual basis.

C. Courses, once approved, shall be added to the listing maintained by the Academy. In order to receive continuing approval for course offerings, the offeror of each course must provide, on each successive second anniversary of the course's being placed on the listing, an updated application form and supporting documentation as stated in paragraph (A) of this section. Failure to comply with this requirement shall result in the course being removed from the listing and having its approval withdrawn.

37-009. Application for Re-certification.

An application for re-certification must be submitted on a form approved by the Council and is deemed complete when the form, with the necessary information as set out in R.37-010, is received by the Academy.

37-010. Continuing Law Enforcement Education Requirements for Re-certification.

A. Eligibility

No law enforcement officer is eligible for re-certification unless, in addition to the requirements of R.37-009, the officer has successfully completed, at a minimum, the number of approved continuing law enforcement education hours as appropriate for the officer's certification class, as specified in R.37-005. Such education hours shall be designated as Continuing Law Enforcement Education (CLEE) hours in the context of these regulations.

B. Class 1 Re-certification Requirements:

1. Officers possessing a current Class 1-LE Certification shall be required to obtain forty CLEE hours in a three year period. The forty CLEE hours shall consist of at least one legal update course and one domestic violence course, presented or approved by the Academy, each year of the three year period. The remaining required CLEE hours in the three year period may come from any source approved by the Academy.

2. Officers possessing a current Class 1-LECO certification shall be required to complete a standard course of in-service training hours per year as specified by the Jail Standards Committee and approved by the Academy. Each officer shall also be required to complete at least one legal update course and one domestic violence course, presented or approved by the Academy, each year of the three year period.

C. Class 2 Re-certification Requirements:

1. Officers possessing a current Class 2-LCO Certification shall be required to complete a standard course of in-service training hours per year as specified by the Jail Standards Committee and approved by the Academy.

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2. Officers possessing a current Class 2-SCO Certification shall be required to complete a Academy approved agency in-service program every three years. At least one course each year shall be a legal update course presented or approved by the Academy.

3. Officers possessing a current Class 2-JCO certification shall be required to complete a Academy approved agency in-service program every three years. At least one course each year shall be a legal update course presented or approved by the Academy.

D. Class 3 Re-certification Requirements:

Officers possessing a current Class 3 Certification shall be required to complete at least one legal update course, presented or approved by the Academy, each year of the three year period.

37-011. Extension of Certification Renewal Date.

A certified law enforcement officer who is unable to complete the requirements of R.37-010 within the three year period specified will be granted an extension to his/her renewal date in the following cases:

A. Military Leave. Any officer called to active military duty for a period of more than thirty consecutive days shall be granted an extension to his/her renewal date, as specified in Section 23-23-60(C) of the South Carolina Code of Laws, for the duration of the active duty, plus ninety days.

B. Medical, Disability or Administrative Leave.

1. Any officer who is on disability leave, medical leave, administrative leave as a result of an assault by an inmate, patient or client, or other administrative leave granted by the employing agency, with or without pay, for a period of more than thirty consecutive days, shall be granted an extension to his/her renewal date, as specified in Section 23-23-60(C) of the South Carolina Code of Laws, for the duration of the leave, provided such extension does not exceed one year.

2. Any officer on medical leave, disability leave, administrative leave as a result of an assault by an inmate, patient or client, or other administrative leave granted by the employing agency, for a period of one year or more shall be treated under R.37-006(D)(3) or (4).

C. Eligibility and Application for Extension of Renewal Date.

1. Only officers whose law enforcement responsibilities have been suspended will be eligible for an extension of renewal date.

2. Application by the employing agency for an extension of renewal date shall be made within forty-five days of the beginning of military leave, medical leave, disability leave, administrative leave as a result of an assault by an inmate, patient or client, or other administrative leave granted by the employing agency, on a form prescribed by the Council.

3. Notification by the employing agency of a return to active law enforcement duty shall be made within fifteen days of return to active law enforcement duty on a form prescribed by the Council.

37-012. Speed Measurement Device Operator.

A. Qualification

Only Class 1 certified law enforcement officers and appointed reserve officers may be accredited as speed measurement device operators.

B. Accreditation

To be accredited as a speed measurement device operator, a law enforcement officer must complete a course of training taught by a certified law enforcement speed measurement device instructor.

37-013. Definitions for R.37-015 and R.37-016.

For purposes of R.37-015 and 37-016, the following definitions shall apply:

1. "Emergency" means a sudden or unexpected occurrence involving an imminent threat to human life or immediate potential for extreme property damage under conditions requiring immediate response to curtail imminent harm to human life.

With respect to the suspected commission of a criminal offense and law enforcement response to such offense, the classification of the crime as felony or misdemeanor shall not be the sole determinative factor of whether an emergency is present; but rather all known factors, in accordance with the first paragraph above, will be weighed in a determination of whether an emergency exists.

2. "Non-Emergency" means a situation involving conditions routinely encountered in line of law enforcement duty which does not pose an imminent threat to human life or immediate potential for extreme property damage which would require immediate response to curtail harm to human life.

3. "Pursuit" means an event involving a law enforcement officer attempting to apprehend a person in a motor vehicle while that person is trying to avoid capture by willfully failing to yield to the officer's signal to stop. It also includes the closing of the distance between a law enforcement vehicle and the violator's vehicle under circumstances where the violator is not yet aware of the law enforcement action.

4. "Emergency Response" means the driving of a law enforcement emergency vehicle by a law enforcement officer in response to an emergency, as defined herein, where the response is conducted in accordance with state law and department policy.

5. "Non-Emergency Response" means the driving of a law enforcement emergency vehicle by a law enforcement officer in response to a non-emergency, as defined herein. This response involves operation of the law enforcement emergency vehicle in all modes other than emergency response or pursuit mode.

6. "Law Enforcement Emergency Vehicle" means a motor vehicle, as defined by the laws of this state, whether marked or unmarked, used by a law enforcement agency in the conduct of law enforcement operations, in accordance with state law and department policy.

37-014. Law Enforcement Emergency Vehicle Training Requirement.

Every agency which uses emergency vehicles shall make provision for the training set out in R.37-015 as appropriate for each such officer's law enforcement duty requirements prior to any officer's certification as qualified by the Council.

37-015. Law Enforcement Emergency Vehicle Training Programs.

A. Non-Emergency Response Training

1. Every law enforcement officer who drives or operates an emergency vehicle shall successfully complete a course of instruction as approved by the Academy relating to non-emergency operation of the law enforcement emergency vehicle.

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2. Every law enforcement agency shall make provision for the training prescribed in R.37-015(A)(1) and shall promulgate written policy and procedure concerning non-emergency vehicle response, consistent with the provisions of the course of instruction as approved by the Academy, which shall be included as part of the training provided to its officers.

B. Emergency Response Training

1. Every Class 1 law enforcement officer and any other law enforcement officer who drives or operates a law enforcement emergency vehicle in response to an emergency, as defined in these regulations, shall successfully complete a course of instruction administered by an Academy certified Driving Instructor and as approved by the Academy relating to emergency response operation of the law enforcement emergency vehicle.

2. Every agency required to make provision for the training prescribed in R.37-015(B)(1) shall promulgate written policy and procedure concerning emergency response with the law enforcement emergency vehicle, consistent with the provisions of the course of instruction as approved by the Academy, which shall be included as part of the training provided to its officers by an Academy certified Driving Instructor.

C. Pursuit Training

1. Every Class 1 law enforcement officer and any other law enforcement officer who drives or operates a law enforcement emergency vehicle in pursuit of an actual or suspected violator of the law, as defined in these regulations, shall successfully complete a course of instruction administered by an Academy certified Driving Instructor and as approved by the Academy relating to pursuit operation of the law enforcement emergency vehicle.

2. Every agency required to make provision for the training prescribed in R.37-015(C)(1) shall promulgate written policy and procedure concerning pursuit operation of the law enforcement emergency vehicle, consistent with the provisions of the course of instruction as approved by the Academy which shall be included as a part of the training provided to its officers by an Academy certified Driving Instructor.

37-016. Notification of Training Compliance.

A. Every agency required to conduct training pursuant to R.37-015 shall provide proof of completion of the required training programs, including appropriate instruction in the written policies and procedures of the agency concerning operation of the law enforcement emergency vehicle as required by R.37-015.

B. A law enforcement officer who transfers from one agency to another shall be required to successfully complete the training program appropriate for the agency to which transfer has occurred, in accordance with R.37-015. Provided, however, that an officer who has successfully completed a training program pursuant to R.37-015 within a period of one year of the date of transfer to another agency, where the successfully completed program is appropriate for the officer's law enforcement duty with the agency to which transferred, shall not be required to complete another training program upon such a transfer, but rather the employing agency to which transferred shall provide appropriate instruction to the transferred officer in the written policies and procedures of the agency concerning operation of the law enforcement emergency vehicle as required by R.37-015. This training shall be reported to the Academy as required in R.37-016(A).

37-017. Continuing Training Requirement.

A. The training required by R.37-015 shall be conducted on a continuing basis no less frequently than annually. Every agency shall report, on the form prescribed by the Academy, the provision of appropriate training on or before the expiration of the current certification. Nothing in these regulations shall be construed to prohibit such training on a basis more frequently than annually.

B. Officers successfully completing appropriate required emergency vehicle training administered by an Academy certified Driving Instructor shall be provided CLEE hours in accordance with R.37-010 appropriate for the number of hours of instruction received.

37-018. Approval of Training Programs.

A. All agencies required to conduct training programs pursuant to R.37-015 shall, prior to initiation of the required training, submit training materials as required by the Academy for review and approval as required by R.37-008.

B. CLEE hours shall be awarded only for materials properly submitted and approved by the Academy.

37-019. Equivalent Law Enforcement Emergency Vehicle Training.

Training provided by other states, the federal government or private training providers, will be evaluated in a fashion consistent with the provisions of R.37-006. In each instance where an agency or officer submits a request for credit for equivalent training, the employing agency must provide verification that appropriate instruction in the written policies and procedures of the agency has occurred, in accordance with the directives of R.37-016(B) regarding transferred officers.

37-020. Effect of Failure to Comply.

A. Any agency which willfully fails to comply with the directives of R.37-014 through 37-019, shall be subject to a civil penalty as provided by law pursuant to Section 23-23-100 of the South Carolina Code of Laws.

B. Any law enforcement officer found not to be in compliance with the directives of R.37-014 through 37-019, shall have his or her certification as a law enforcement officer withdrawn in accordance with R.37-026(B) and his or her authority to exercise law enforcement powers shall cease, and the officer's certification shall be deemed to have lapsed.

37-021. Firearms Qualification Requirement.

Each law enforcement agency shall maintain proof of completion of a firearms qualification program and keep on file, available for inspection, proof that the firearms qualification program was administered by an Academy accredited firearms instructor.

37-022. Separation from Law Enforcement Employment.

A. All law enforcement agencies and other employers of law enforcement officers are required to notify the Academy when an officer leaves the employment of the agency/employer, regardless of the reason for the separation within 15 days of separation.

B. Such notification shall take place on a form as prescribed by the Council, contain the facts and circumstances leading to the separation, and be for the Academy and Council's confidential use and subsequent safekeeping.

C. In the event that such notification contains allegations of misconduct, a copy of such notice shall be sent to the law enforcement officer and the officer shall be informed of the provisions of Section 23-23-90 and allowed to file a response for the Academy and Council's use and safekeeping.

D. A willful failure by law enforcement agencies and other employers of law enforcement officers to supply the facts and circumstances of separation shall subject the violator to a civil penalty as provided by law.

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37-023. Reporting of Events Requiring Withdrawal of Certification.

A. It shall be the responsibility of the sheriff or the chief executive officer of every law enforcement agency or department within the State to report to the Academy the occurrence of any event, or series of events, set forth in R.37-025 or R.37-026 which requires the withdrawal of certification of a law enforcement officer who is currently or was last employed by his or her agency.

B. The report shall be made within fifteen days of the final agency or department action resulting from the internal investigation conducted by the agency or department, and shall be on a form prescribed by the Council.

C. A willful failure to report information shall subject the violator to a civil penalty as provided by the Council.

D. Only events which are determined as founded by the department or agency shall be reported as provided herein above.

37-024. Investigation of Events Requiring Withdrawal of Certification; Notification to Officer.

A. Upon receipt of a report pursuant to R.37-023, the Council shall initiate an investigation into reported events which require withdrawal of the law enforcement officer's certification.

B. The Director and/or Council may suspend the certification of any law enforcement officer pending the outcome of an investigation initiated pursuant to paragraph (A) above.

C. A law enforcement officer who is the subject of an investigation shall be notified of its initiation on a form prescribed by the Council, sent by certified mail to the current address on file at the Academy, return receipt requested, as soon as practicable after the investigation is initiated.

D. Duplicate of such notice shall be sent, in the same manner prescribed in paragraph (C) above, to the current sheriff or chief executive officer of the employing agency or department of the law enforcement officer.

E. The Council may direct that the investigation, on its behalf, be conducted. The investigation shall be sent to the Council for its confidential use and review.

F. Where the Council's investigation indicates that withdrawal of the law enforcement officer's certification is not warranted, the Council shall notify the law enforcement officer and the sheriff or chief executive officer of the employing law enforcement agency of its finding, in accordance with the notice provisions of paragraphs (C) and (D) above.

G. Where the Council's investigation indicates that withdrawal of the law enforcement officer's certification is warranted, the Council shall proceed in accordance with R.37-027.

37-025. Denial of Certification for Misconduct.

A. The Council may deny certification based on evidence satisfactory to the Council that the candidate has engaged in misconduct. For purposes of this section, misconduct means:

1. Conviction, plea of guilty, plea of no contest or admission of guilt (regardless of withheld adjudication) to a felony, a crime punishable by a sentence of more than one year (regardless of the sentence actually imposed, if any), or a crime of moral turpitude in this or any other jurisdiction;

2. Unlawful use of a controlled substance;

3. The repeated use of excessive force in dealing with the public and/or prisoners;

4. Dangerous and/or unsafe practices involving firearms, weapons, and/or vehicles which indicate either a willful or wanton disregard for the safety of persons or property;
5. Physical or psychological abuses of members of the public and/or prisoners;
6. Misrepresentation of employment-related information;
7. Dishonesty with respect to his/her employer;
8. Untruthfulness with respect to his/her employer.

B. In considering whether to deny certification based on misconduct, the Council may consider the seriousness, the remoteness in time and any mitigating circumstances surrounding the act or omission constituting or alleged to constitute misconduct.

37-026. Withdrawal of Certification of Law Enforcement Officers.

A. A law enforcement officer, certified pursuant to the provisions of R.38-007 and R.38-008, shall have his or her certification as a law enforcement officer withdrawn by the Council upon the occurrence of any one or more of the following events:

1. The officer is found to have falsified any application for certification and training based upon which the officer was admitted for training.
2. The officer is found to be ineligible for service as a law enforcement officer because of his or her failure to meet prerequisite qualifications for training and certification, as set by law, even though such ineligibility is not discovered until after the officer's initial certification.
3. The officer is convicted of a criminal offense under the law of any jurisdiction which would, by the laws of this State, disqualify the officer from obtainment of certification as provided for in R.38-007 and R.38-008.
4. Evidence satisfactory to the Council that the officer has engaged in misconduct. For purposes of this section, misconduct means:
 - a. Conviction, plea of guilty, plea of no contest or admission of guilt (regardless of withheld adjudication) to a felony, a crime punishable by a sentence of more than one year (regardless of the sentence actually imposed, if any), or a crime of moral turpitude;
 - b. Unlawful use of a controlled substance;
 - c. The repeated use of excessive force in dealing with the public and/or prisoners;
 - d. Dangerous and/or unsafe practices involving firearms, weapons, and/or vehicles which indicate either a willful or wanton disregard for the safety of persons or property;
 - e. Physical or psychological abuses of members of the public and/or prisoners;
 - f. Misrepresentation of employment-related information;
 - g. Dishonesty with respect to his/her employer;
 - h. Untruthfulness with respect to his/her employer.

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i. Violations of criminal law resulting from administrative inquiries.

Provided however that in considering whether to withdraw certification based on misconduct, the Council may consider the seriousness, frequency and any mitigating circumstances surrounding the act or omission constituting or alleged to constitute misconduct.

B. The officer's certification expires due to the officer's failure to meet re-certification requirements as set out in R.37-010.

37-027. Notification of Withdrawal of Certification.

A. Prior to the withdrawal of a law enforcement officer's certification pursuant to R.37-025 and/or R.37-026, the Council shall notify the officer whose certification is to be withdrawn on a form prescribed by the Council sent by registered mail, to the current address on file at the Academy, return receipt requested, to the officer.

B. Such notice shall be provided to the officer ten days in advance of the effective date of withdrawal of the certification.

C. Duplicate of such notice shall be sent in the same manner as in paragraph (A) above, to the current sheriff or the chief executive officer of the law enforcement agency or department of the law enforcement officer.

37-028. Notification of Denial of Certification.

A. The Council shall notify any candidate whose certification is denied pursuant to R.37-025 on a form prescribed by the Council sent by registered mail, to the current address on file at the Academy, return receipt requested. It is the responsibility of every candidate as described in Chapter 37 of these regulations to notify the Academy of his or her current address. All such notices required to be made to the candidate as prescribed by Chapter 37 of these regulations is effective upon mailing as required in this section.

B. Duplicate of such notice shall be sent in the same manner as in paragraph (A) above, to the current sheriff or chief executive officer of the law enforcement agency or department of the candidate.

37-029. Confidentiality of Notification.

All notifications to law enforcement officers and their respective employing law enforcement agencies pursuant to R.37-023, R. 37-024, R.37-027, and R.37-028 shall be handled in a confidential and sensitive manner.

37-030. Reserve Police.

A. Definition

In addition to the definition required by law, a "reserve" officer is not paid by the agency for which the officer performs law enforcement duties.

B. Documentation and Reporting

1. Each agency having a reserve law enforcement officer program shall keep on file, available for inspection, all documentation required for regularly salaried law enforcement officers and as set out in R.37-007.

2. Each agency shall certify to the Academy, using a form as prescribed by the Council, that such documentation is on file in the agency.

C. In-Service Requirement

Each agency having a reserve law enforcement officer program shall keep on file, and make available for inspection, documentation that each reserve officer has completed the in-service requirement as required by law.

D. Transfers

1. A reserve officer who desires to transfer to regular law enforcement status shall complete all the requirements as set forth by law and under R.37-005 as appropriate for the class of certification which the reserve officer will occupy.

2. A certified law enforcement officer who transfers to reserve status for a period of time not to exceed three years, shall be deemed to have no break in service as defined in R.37-006. Should the period of time exceed three years, the officer shall be deemed to have a break in service and shall complete all the requirements as set forth by law and under R.37-005, as appropriate for the class of certification which the reserve officer will occupy.

E. Operational Procedures

Any law enforcement agency wishing to establish a Reserve Officer program must meet minimum department sponsored certification criteria as required by the Academy Standards Section.

ARTICLE 3

E-911 SYSTEM

37-060. Definitions.

- A. "Operator" means a telecommunications operator or dispatcher employed in an E-911 system.
- B. "Agency" means local government or public safety agency employing operators.
- C. "Director" means the Director of the South Carolina Criminal Justice Academy.
- D. "Academy" means the South Carolina Criminal Justice Academy.
- E. "Council" means the Law Enforcement Training Council.

37-064. Minimum Requirements for E-911 Operator Enrollment in Training.

A. All agencies having operators as candidates for training and certification shall submit to the Academy, the following:

- 1. an application under oath in a format prescribed by the Council;
- 2. evidence satisfactory to the Council that the candidate possesses a high school diploma or equivalent recognized and accepted by the South Carolina Department of Education;
- 3. evidence satisfactory to the Council that the candidate's present age is not less than eighteen years;
- 4. evidence satisfactory to the Council that the candidate has not been convicted of any criminal offense that carries a possible sentence of more than one year.

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B. Nothing in this regulation shall be construed to preclude any agency from establishing qualifications or standards for hiring that exceed these minimum standards.

37-066. Training Requirements for Certification.

A. Candidates for certification as operators shall successfully complete a prescribed course of training as approved by the Council and will be certified as Class 4-TCO.

B. Candidates employed as operators prior to June 27, 1997 may be certified without completing the training referenced in paragraph (A) above if the candidate has:

1. two years continuous employment as an operator and no break in service of longer than six months; or

2. one year continuous employment as an operator, no break in service of more than six months, and prior training accredited by the Academy, and the candidate successfully passes a comprehensive test as approved by the Director and administered by the Academy. No retest will be offered.

37-067. Break in Service after Certification.

A. All certification lapses upon separation from employment.

B. Candidates with prior certification and a break in service of less than one year will be recertified upon a request by the employing agency, provided the agency produces evidence satisfactory to the Director that the candidate has not been convicted of any criminal offense that carries a possible sentence of more than one year.

C. Candidates with prior certification and a break in service of more than one year must meet the requirements of R.37-064 and R.37-066(A).

37-069. Cost of Training.

The cost of training shall be established by the Academy. Agencies shall forward an authorized purchase order for this amount with each application for training.

37-070. Separation from Employment.

Agencies shall notify the Academy of the separation from employment of any certified operator. If the separation is a result of the conviction for a criminal offense carrying a possible sentence of more than one year, such conviction shall be reported to the Academy. All reports shall take place on a form approved by the Director.

Fiscal Impact Statement:

There is no increase in cost due to these changes.

Statement of Rationale:

Revisions to these regulations are necessary to finalize the split of CJA from DPS, to make the regulations consistent with the statutes (Training Act), and to make the regulations easier to use. Revisions to the regulations are necessary to allow for certification of lidar and other types of speed measurement device operators. The proposed changes will also delete a section of the regulations that is no longer necessary. The proposed changes would also remove the word "jailers" from the regulations. Revisions to these regulations are necessary to add consistency within the regulations and clarify the amount of continuing education requirements required for re-certification. Revisions to these regulations are necessary to remove unnecessary language from the regulations. Revisions to the regulations are necessary to clarify the meaning of the regulations. Revisions to these

regulations are necessary to change the term “emergency services dispatcher” to “operator.” Revisions to the regulations are necessary to clarify that some types of driving training must administered by an Academy certified Driving Instructor and CLEE credit will only be given if the training is administered by an Academy certified Driving Instructor.

Document No. 4491

STATE BOARD OF EDUCATION

CHAPTER 43

Statutory Authority: 1976 Code Sections 59-5-60(1), (3), and (6) (2004), 59-39-100 (Supp. 2012), and 20 U.S.C. 6301 et seq. (2002)

43-259. Adult Education

Synopsis:

The State Board of Education is responsible for the administration, coordination, and management of adult basic and adult secondary (high school equivalency diploma and high school diploma) education for the purpose of facilitating and coordinating adult basic and adult secondary (high school equivalency diploma and high school diploma) education programs for South Carolina adults whose level of educational attainment is below high school, as prescribed by state and federal laws and regulations.

Notice of Drafting for the proposed amended regulation was published in the *State Register* on August 22, 2014.

Instructions:

Replace Section II(A)(1–6) in its entirety.

Text:

43-259. Adult Education.

I. The State High School Equivalency Diploma

The State Board of Education (SBE) will issue a state high school equivalency diploma to eligible candidates who successfully complete a SBE approved high school equivalency test. The SBE authorizes the administration of approved high school equivalency tests by the South Carolina Department of Education (SCDE) under policies established by the SBE.

A. Eligibility Requirements for Equivalency Diploma Candidates

1. Service Personnel and Veterans

To be eligible for a state high school equivalency diploma, the candidate must be seventeen years of age or older and must be either a resident of South Carolina or a former resident whose most recent elementary or secondary school attendance was in South Carolina.

2. General Adult Population

a. To be eligible for a state high school equivalency diploma, the candidate must be seventeen years of age or older, must not be currently enrolled in high school, and must either be a current resident of South Carolina or a former resident whose most recent elementary or secondary school attendance was in South Carolina.

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b. A candidate for a state high school equivalency diploma who is seventeen or eighteen years of age must submit a "Verification of School Withdrawal" form completed by either the school principal or attendance supervisor of the last South Carolina school he or she attended or from the district superintendent of the school. The "Verification of School Withdrawal" form must verify the candidate's date of birth and the date of his or her last attendance at the school. In the event that the last school he or she attended was outside South Carolina, a person seventeen or eighteen years of age may either submit a letter signed by his or her high school principal or designee verifying his or her date of birth and the date of last attendance in school or submit a letter from the superintendent of schools in the district in which he or she currently resides indicating that the candidate is not enrolled in any schools within the school district. A copy of the candidate's driver's license, state-issued identification card, or birth certificate must accompany the letter. Verification letters are to be submitted with the application for testing.

c. A candidate over the age of eighteen who has been enrolled in high school during the current school year must submit a "Verification of School Withdrawal" form completed by either the school principal or attendance supervisor of the last South Carolina school he or she attended or from the district superintendent. The "Verification of School Withdrawal" form must verify the candidate's date of birth and the date of his or her last attendance at the school.

3. Juvenile Offenders

Certain juvenile offenders who are under the jurisdiction of the State Department of Juvenile Justice may be granted an exception to the requirement that in order to be eligible for a state high school equivalency diploma, a candidate must be seventeen years of age or older and not be currently enrolled in high school during the current school year.

For a juvenile offender to qualify for this exception, the following criteria must be met:

- a. The juvenile is at least sixteen years of age.
- b. The juvenile is under the jurisdiction of the family court based on an adjudication of delinquent behavior and must be committed to a juvenile correctional institution or committed to participate in community-based alternative programs under the jurisdiction of the Department of Juvenile Justice.
- c. The family court certifies that it is in the best interest of the juvenile for him or her to be exempted from the public school compulsory attendance law.
- d. The juvenile's enrollment in public school or completion of a community-based alternative program would not be feasible upon his or her release from a juvenile correctional institution either because it is necessary that he or she find immediate employment or because he or she will immediately enroll in postsecondary education.

B. Passing Score Requirements

1. Eligible candidates who were initial examinees before July 1, 1991, were awarded a state high school equivalency certificate if they attained an average standard score of 45 or above for the five tests in the GED battery. The South Carolina high school equivalency certificate was not awarded after July 1, 1995.

2. Eligible candidates who were examinees after July 1, 1991, were awarded a state high school equivalency diploma if they attained a minimum-standard score of 35 on each of the five tests in the GED battery and an average standard score of 45 or above for the five tests.

3. Eligible candidates who were examinees after January 1, 1997, were awarded a state high school equivalency diploma if they attained a minimum-standard score of 40 on each of the five tests in the GED battery and an average standard score of 45 or above for the five tests.

4. Eligible candidates who are examinees after January 1, 2002, will be awarded a state high school equivalency diploma if they attain a minimum standard score of 410 on each of the five tests in the GED battery and an average standard score of 450 or above for the five tests.

5. Passing score requirements for all high school equivalency tests authorized by the SCDE after December 31, 2013, will follow test publisher's guidelines and any additional requirements established by the SBE.

C. Testing and Credential Application Procedures

1. High School Equivalency Testing in South Carolina

a. High school equivalency tests may be scheduled and administered at adult education centers, technical or community colleges, and other locations approved by the director of the SCDE's Office of Adult Education.

b. Eligible candidates must submit an application to the SCDE's High School Equivalency Testing Office, or an approved high school equivalency testing center, and pay the required fee set by the SCDE for the testing service and the diploma.

c. Official score reports will be provided to initial examinees only after the completion of the entire high school equivalency test battery.

d. Nonresident individuals who are living temporarily in South Carolina may be permitted to take the high school equivalency tests in South Carolina if they meet minimum age requirements and are not enrolled in high school. Nonresident individuals will not be awarded a state high school equivalency diploma unless their most recent elementary or secondary school of attendance was in South Carolina. Nonresidents must submit an application for testing services to the SCDE's High School Equivalency Testing Office or an approved high school equivalency test center and must pay the required fee set by the SCDE to cover the full costs of the testing and the score report.

e. Guidelines for the re-testing of high school equivalency candidates are outlined in the SCDE High School Equivalency Testing Office Policies and Procedures Manual.

2. High School Equivalency Testing Outside South Carolina

Eligible candidates tested outside South Carolina must submit a diploma application to the SCDE's High School Equivalency Testing Office and must pay the required fee to cover the costs of the diploma. Applicants must arrange for official score reports to be sent to the chief examiner in the SCDE's High School Equivalency Testing Office. Score reports will be accepted as official only when sent directly by an official high school equivalency testing center, by the transcript service of the Defense Activity for Nontraditional Education Support (DANTES), or by the GED Testing Service in Washington, D.C. Eligible candidates who are tested outside of South Carolina must meet the state's passing score requirements in order to receive a state high school equivalency diploma.

II. Adult Education: High School Diploma Program

A. Graduation Requirements

1. The student must earn a total of 24 prescribed units of credit to earn a state high school diploma. The unit requirements are distributed as follows:

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Unit Requirements	
English/language arts	4.0
Mathematics	4.0
Science	3.0
U.S. History and Constitution	1.0
Economics	0.5
U.S. Government	0.5
Other social studies course(s)	1.0
Computer science (including keyboarding)*	1.0
Electives	9.0

24.0 total

* Keyboarding may count up to one-half unit of the computer science requirement.

2. A student may transfer credit earned in the adult education program to a secondary school to count toward the units of credit required for a state high school diploma earned through the regular course of study at a high school, if for each unit being transferred, the student has spent a minimum of 120 hours in class time in that subject at that level and the teacher was properly certified to teach the course.

3. Membership in an adult education program shall be limited to individuals eighteen years of age or older who have left the elementary or secondary school, except when the local school board assigns students under the age of eighteen years who are not officially in membership in a regular school. Students under eighteen may be assigned to an adult education program when they exhibit either an unusual educational need or physical, social, or economic problem that can be served more effectively by the adult education program. Schools should provide counseling regarding all alternatives available to high school students considering dropping out. No student under the age of sixteen may be assigned to the adult education program for any reason.

4. No student shall be graduated from the adult education program prior to the time that he or she would have graduated from a regular high school unless written approval is granted by the high school principal and the SCDE's Office of Adult Education. For a student to be eligible to receive a state high school diploma, he or she must complete one semester in residence (i.e., through actual attendance in the adult education program). This semester in residence is a prerequisite for the state high school diploma and may not be waived. For the purposes of adult education programs, a semester in residence is defined as follows: a minimum of 60 hours of classroom attendance for a student needing only one unit to graduate, and a minimum of 30 hours of classroom attendance for a student who needs only one-half unit to graduate. Completion of a one-half unit or one unit via the virtual school program while enrolled in an adult education program will satisfy the semester-in-residence requirement.

5. The student must complete a study of and pass an examination on the provisions and principles of the United States Constitution, the Declaration of Independence, the *Federalist* papers, and American institutions and ideals.

6. A student may earn an unlimited number of units of credit per school year with a maximum of six earned through classroom attendance.

B. Provisions for Granting Course Credit

1. Course credit shall be accepted when official transcripts are received from schools that are accredited by a state or by one of the following: New England Association of Colleges and Schools, the Middle States Association of Colleges and Schools, the Southern Association of Colleges and Schools, the North Central Association of Colleges and Schools, the Western Association of Colleges and Schools, or the Northwest Association of Colleges and Schools.

2. An adult education program may award credit for courses that have been approved by the SCDE in a proficiency-based system, see R.43-234(II)(C), Defined Program, Grades 9–12 and Graduation Requirements. Credit shall only be accepted from institutions validated by the SBE or accredited by one of the following: New England Association of Colleges and Schools, the Middle States Association of Colleges and Schools, the Southern Association of Colleges and Schools, the North Central Association of Colleges and Schools, the Western Association of Colleges and Schools, or the Northwest Association of Colleges and Schools.

3. High school diploma credit may be granted only by a teacher certified in the specific area in which credit is to be awarded. If the adult education teacher is not certified in the specific area in which the student is seeking credit, another currently employed adult education teacher that is certified in the specific area may review the student's work and award the unit of credit on that basis. Documentation of the high school credit awarded becomes part of the student's permanent record.

4. Adult Education students are eligible to earn high school units through the district's dual credit arrangement, see R.43-234(III), Defined Program, Grades 9–12 and Graduation Requirements.

C. Approved Programs and Granting of Credit

No credit toward a state high school diploma shall be granted to any adult education student unless the program has been officially approved in writing by the Office of Adult Education and the Office of Federal and State Accountability at the SCDE. Program-related requirements include, but are not limited to, the following:

1. Each district must provide properly certified administrative, teaching, and supervisory staff for the adult education program. Staff members may be either full-time or part-time, according to the size of the program.

2. Each director must either be certified in one of the acceptable areas of certification for an adult education director or hold both an advanced degree in the field of adult education and a South Carolina teaching certificate.

3. Each adult education program must have a director (full-time or part-time).

4. Each center supervisor or program coordinator must either meet the same qualifications for certification as set forth in item 2 above for adult education directors or have a master's degree or a bachelor's degree and five years of adult education experience.

5. Each adult education teacher must be properly certified and meet the appropriate federal statutory requirements.

6. Each adult education high school subject-area teacher must be properly certified and meet appropriate federal statutory requirements to teach the subject area in which he or she is assigned to teach.

7. Any staff member who is assigned duties in a subject for which he or she is not properly certified must hold a valid teaching credential, must have completed 12 semester hours of credit in the assigned subject, and must have obtained an out-of-field permit in that subject from the Office of Educator Certification. The staff member must earn 6 semester hours toward proper certification each year for renewal of the out-of-field permit. After June 30, 2006, out-of-field permits will no longer be issued to teachers who teach core academic subjects as specified by the appropriate federal statutory requirements. These core academic subjects are English, reading or language arts, mathematics, science, foreign languages, civics, government, economics, history, geography, and the arts. The Director of the Office of Adult Education may waive the requirement of properly certified teachers in instances of critical needs. Critical needs may include but are not limited to the following: there is no certification available in the particular subject area; there is no certified teacher available because of the location of the class or meeting time of the class. Non-certified teachers must work under the supervision of an on-site, properly certified teacher. Non-certified teachers may not provide instruction in courses awarding Carnegie units of credit.

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8. In order to earn credit toward a state high school diploma earned through an adult education program, a student must attend class a minimum of 60 hours to receive consideration for a unit of high school credit and 30 hours for consideration for one-half unit of high school credit. Actual course credit will be awarded only after the student has completed all course requirements. Completion of a one-half unit or one unit via the virtual school program while enrolled in an adult education program will satisfy the attendance requirement.

9. Applications for innovative-approach programs must be submitted to the SCDE's Office of Adult Education when a departure from certain established standards is necessary for the implementation of the new program. Requests for prior approval must be made to the Office of Adult Education and must be approved by the SCDE's Office of Federal and State Accountability.

10. An accurate record of the attendance and achievements of each student must be kept and must be stored in locked, fireproof filing cabinets or vaults or in a secure database with backup copies. Records of high school credits earned must be retained indefinitely.

11. Students enrolled in the high school completion program must be given access to appropriate library facilities or the Internet.

Fiscal Impact Statement:

None.

Statement of Rationale:

The proposed changes are needed in order to remove all references to the high school exit examination or the state exit examination as a requirement for graduation.

Document No. 4529
STATE BOARD OF EDUCATION
CHAPTER 43

Statutory Authority: 1976 Code Sections 59-5-60 (2004), 59-18-310 (Supp. 2014), 59-18-320 (Supp. 2013), 59-18-330 (Supp. 2013), 59-18-350 (Supp. 2013), 59-18-360 (Supp. 2013), 59-18-900 (Supp. 2013), 59-20-60 (Supp. 2013), and 20 U.S.C. 6301 et seq.

43-262. Assessment Program

Synopsis:

The State Board of Education (SBE) proposes to amend Regulation 43-262. This regulation delineates requirements for assessment programs managed by the Office of Assessment. Amendments are being proposed to merge language from Regulations 43-260 and 43-262.4 into this regulation so that regulations governing assessments are in one regulation. Duplicative language resulting from merging the three regulations is deleted. In compliance with Section 59-18-310 of Act 155 that states that "students are no longer required to meet the exit examination requirements to earn a South Carolina high school diploma," references to passing an exit examination as a condition for receiving a South Carolina high school diploma have been deleted.

Notice of Drafting for the proposed repeal of this regulation was published in the *State Register* on August 22, 2014.

Instructions:

Entire regulation is to be replaced with the following text.

Text:

43-262. Assessment Program.

I. STATEWIDE ASSESSMENT PROGRAM

A. The Education Accountability Act of 1998 (EAA), S.C. Code Ann. Section 59-18-310, and the No Child Left Behind Act of 2001 (NCLB), 20 U.S.C. Section 6301, et seq. require that the State Board of Education develop or adopt a statewide assessment program in certain grades and selected content/skill areas.

B. The statewide assessment program will involve testing public school students at selected grade levels and in selected content and skill areas at times specified by the South Carolina Department of Education (SCDE). The grade(s) and content/skill areas to be included in the assessment program are identified by the EAA, NCLB, and State Board of Education regulations.

The statewide assessment program includes assessments administered to assist in the identification of students for participation in programs for the gifted and talented, and assessments administered for accountability purposes, including but not limited to the following:

South Carolina Palmetto Assessment of State Standards (SCPASS),
South Carolina Alternate Assessment (SC-Alt), and
End-of-Course Examination Program.

C. The program is funded through an annual appropriation included in the South Carolina General Appropriations Act. The request for such funding is included in the annual budget request of the State Superintendent of Education. Continued operation of the program is contingent upon the availability of funds.

D. The following are responsibilities of the SCDE for assessments in which school districts are required to participate.

1. Supply all necessary test materials regardless of the testing format, (e.g., paper/pencil, online, customized), scoring, and standard score reports at no cost to the local school districts. Test materials do not include hardware or software for online testing.

2. Pay all shipping costs for the transportation of test materials and score reports between the SCDE, school districts, and scoring service(s).

3. Provide workshops on test administration, interpretation, and utilization for district test coordinators and other selected staff.

4. Report the statewide results of the program to the State Board of Education on an annual basis.

5. The SCDE will report statewide and school district test results as may be necessary for accurate and meaningful interpretation.

6. Test data for individuals shall be released only in a manner that is consistent with the provisions of Section 438 (Privacy Rights of Parents and Students) of the General Education Provisions Act (Title IV of Public Law 90-247, as amended) and any other relevant legislation, including but not limited to Act 200 of 2014.

7. Field/pilot-test, at the discretion of the State Superintendent of Education, new assessment instruments and/or procedures and recommend changes in the Statewide Assessment Program to the State Board of Education, the Education Oversight Committee, and other appropriate policy-making bodies.

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E. The participation of local school districts in the statewide testing program is required under Section 59-20-60(7)(c) of the South Carolina Education Finance Act and the South Carolina Education Accountability Act of 1998. The following are responsibilities of local school districts.

1. As used in these regulations, "local school district" shall mean public school districts, the South Carolina Public Charter School District, a public or independent institution of higher learning serving as a charter school sponsor pursuant to the South Carolina Charter Schools Act, as well as other publicly funded educational institutions providing instruction to public school students.

2. Designate one or more district test coordinators (DTCs) who will be the point of contact for the SCDE or its contractors as well as attend the workshops provided by the SCDE. The DTC is responsible for ensuring that school test coordinators (STCs) and test administrators are trained. DTCs and/or STCs are responsible for the distribution, receipt, storage, and return of test materials and reports.

3. Administer the tests (including field/pilot tests) in accordance with procedures and at dates and times specified by the SCDE.

F. Students with disabilities shall be included in the assessment program in compliance with the provisions of South Carolina and federal statutes and regulations.

G. The State Superintendent of Education is authorized to develop and implement such administrative procedures as he or she may deem necessary and appropriate for the purpose of implementing the South Carolina Statewide Assessment Program. Any administrative action taken under this regulation will be presented to the State Board of Education during the next regularly scheduled meeting of the Board.

H. End-of-Course Examination Program (EOCEP)

1. Courses Tested

a. The following courses in State Board of Education Regulation 43-234, "Defined Program, Grades 9–12," are "gateway" and "benchmark" courses. For the purposes of this regulation, however, these courses shall be referred to only as "gateway" courses.

i. English/language arts: English 1

ii. Mathematics: Algebra 1. After completion of Mathematics for the Technologies 2, students shall be administered the end-of-course examination for Algebra 1.

iii. Science: Biology 1. After completion of Applied Biology 2, students shall be administered the end-of-course examination for Biology 1.

iv. Social Studies: United States History and the Constitution

v. A course by any title for which the instructional basis is the academic standards for any of the abovementioned courses will be considered the equivalent of the appropriate abovementioned gateway course and one for which an end-of-course examination must be administered.

b. The end-of-course examinations shall be administered to all public school students who take a gateway course for which credit can be applied toward the requirements for a high school diploma, regardless of the grade in which a student takes the course. An exception is when a student takes two courses based on the same academic standards. The student would take the end-of-course examination at the end of the first course, and the test score would count as 20 percent of the final grade. If the student passes the first course, the student would

not take an end-of-course examination for the second course, and the student’s final grade would be calculated without an end-of-course score. The second course would not be a gateway course for that student.

2. Purposes and Uses

a. The purposes and uses of the end-of-course examinations shall be as follows:

i. The examinations shall encourage instruction in the specific academic standards for the courses, encourage student achievement, and document the level of students' mastery of the academic standards.

ii. The examinations shall serve as indicators of program, school, and school district effectiveness in the manner prescribed by the Education Oversight Committee in accordance with the provisions of the Education Accountability Act of 1998 (EAA).

iii. The examinations shall be weighted 20 percent in the determination of students' final grades in the gateway courses.

b. The examination may be used for such other purposes as the State Board of Education may determine to be appropriate and consistent with the Standards for Educational and Psychological Testing (Joint Standards) of the American Psychological Association, the American Educational Research Association, and the National Council on Measurement in Education.

3. The content of the subject-area examinations that are selected or developed pursuant to the provisions of this policy shall be aligned with the academic standards approved by the State Board of Education.

4. Student performance standards for the examinations shall be established by the SCDE.

5. The academic standards for the examinations shall be reviewed on a schedule that is consistent with the requirements of the EAA. Following any revisions of the academic standards, the examinations will be reviewed and revised as necessary to ensure their continued alignment with the standards.

6. Students who are enrolled in the gateway courses shall be provided with copies of the academic standards that pertain to those particular courses. Students will be advised that the final examination for each gateway course will be based on the skills and content represented in the academic standards. District personnel shall provide this information to students no later than the first day of instruction in the course.

II. NATIONAL ASSESSMENT OF EDUCATIONAL PROGRESS (NAEP)

NAEP tests will be administered annually to samples of students. Schools selected for NAEP will participate in the assessment program as prescribed by NAEP policies.

Fiscal Impact Statement:

There is no fiscal impact.

Statement of Rationale:

The State Board of Education (SBE) proposes to merge regulations R.43-260 and R.43-262.4 into regulation R.43-262 so that regulations governing assessments are in one regulation.

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Document No. 4476
STATE BOARD OF EDUCATION
CHAPTER 43

Statutory Authority: 1976 Code Sections 59-5-60 (2004), 59-33-30 (2004), 59-53-1810 (Supp. 2013), and 20 U.S.C. 6301 et seq. (2002)

43-232. Defined Program 6–8

Synopsis:

Regulation 43-232 establishes that each school district board of trustees shall ensure quality schooling by providing a rigorous, relevant curriculum for all students. Each school district shall examine the academic achievement standards adopted by the South Carolina State Board of Education. Elementary, middle, and high school faculty and staff shall work together to ensure that students are prepared to achieve these standards. When approved by the principal and the parents, a student promoted to the seventh or eighth grade may take units of ninth grade or higher work for school credit.

The amendment will narrow the language to ensure high school credit given in the middle school level must be high school–level courses that have been approved by the South Carolina Department of Education.

Notice of Drafting for the proposed amended regulation was published in the *State Register* on July 25, 2014.

Instructions:

Regulation 43-232 is replaced in its entirety.

Text:

43-232. Defined Program 6–8.

Each school district board of trustees shall ensure quality schooling by providing a rigorous, relevant curriculum for all students.

Each school district shall examine the academic achievement standards adopted by the South Carolina State Board of Education. Elementary, middle, and high school faculty and staff shall work together to ensure that students are prepared to achieve these standards.

I. Basic Program/Curriculum for Grades 6–8

Instruction in the subject areas shall be scheduled for each student for a minimum of 1800 minutes or 30 hours per week including lunch, or the equivalent time on a yearly basis. The subjects shall include, but not be limited to:

A. Subject Areas

English/Language Arts¹

Mathematics

Sciences²

Social Studies^{2, 3}

Health^{2, 4}

Physical Education⁵

Visual/Performing Arts⁶

Exploratory Programs⁷

Foreign Language⁸

Schools must determine the amount of instructional time in a subject area as approved by the local board of trustees and the State Superintendent of Education. The school day must be at least six hours including lunch, or its equivalent weekly.

A school which includes any combination of grades 5–8 when housed with grades 7 or 8 may elect for all of the combination of grades 5–8 to meet, on a subject by subject basis, the minimum instructional times or the minimum curriculum requirements for either grades 4–5 or grades 6–8, unless otherwise prohibited by law.

B. High School Credit

When approved by the principal and the parents, a student promoted to the seventh or eighth grade may take units of ninth grade or higher work for high school credit. The high school courses offered must be limited to core, career and technology education, and foreign language courses that are currently in the 9–12 section of the *Activity Coding System for the Student Information System*.

C. Alcohol and Drugs

Through special instruction, schools shall provide age-appropriate instruction regarding the dangers in the use and abuse of alcohol, tobacco, and other drugs. Instruction shall emphasize problems related to their use and effects upon the total community. Instruction shall be offered in all schools of the State and shall be studied and presented as thoroughly and in the same manner as all other required subjects in grades 6 through 8.

D. Guidance Program/School-to-Work Initiative

1. A comprehensive guidance program, including career development, is required in schools having any combination of grades 6–8.

2. Each school district shall offer a range of mentoring opportunities for students beginning no later than the seventh grade. Students participating in any of the work-based programs shall have the written permission of their parents or legal guardians in order to engage in such experiences. Adult supervision shall be provided for mentoring opportunities.

3. Curriculum activities consisting of educational opportunities, career information resources and career development programs shall be included in subject areas for Grades 6-8.

4. Beginning in Grade 6, students and their parents and/or legal guardians in collaboration with appropriate school personnel shall prepare a plan for a variety of career options in which the student has an interest.

5. In Grade 7, students and their parents and/or legal guardians in collaboration with appropriate school personnel shall revise career planning records in which the student has an interest.

6. In Grade 8, students and their parents and/or legal guardians in collaboration with appropriate school personnel shall review and revise the career planning record. The record shall include a high school course of study based on a major plan and an alternate plan for career options in which the student has an interest and the postsecondary programs of study related to achieving a career goal.

E. Library/Media Program

Library media programs and technology resources are required and accessible to all students and staff and are appropriate to achieve the strategies and goals in each school renewal or district strategic plan.

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II. Innovative Approaches

A school encompassing any combination of grades 6-8 may implement an innovative approach if it is approved by the local board of trustees and is incorporated in the school and district plans.

III. Class Size, Grades 6-8:

A. The maximum teacher load shall not exceed 150 students daily. Maximum class size shall not exceed the following:

Grade 6	30:1 (English/language arts and math) 35:1 (other subjects)
Grades 7-8	35:1 (all academic and exploratory subjects)

No class shall exceed 35 students in membership.

B. Exceptions:

1. A maximum of 40 students per period with a total teaching load of 240 students daily is permitted for physical education teachers. If physical education and health are taught on alternate days to the same class, the 40 student maximum and 240 student total is also permitted for health. When health is taught as a separate subject, the teaching load is a maximum of 35 students per period and a total of 150 students per day.

2. Music teachers may teach a maximum of 240 pupils daily. No class shall exceed 40 students in membership. Exception: When band, chorus, and orchestra require rehearsals of the entire membership, any number is acceptable if adequate space is available.

3. When a teacher's daily schedule includes a combination of subjects, the maximum daily teaching load shall be calculated on the basis of 30 students per academic class and 40 students for each music or physical education class. (Example: 3 classes of math of 30 each = 90 + 2 classes of P.E. of 40 each = 80. Teacher is not overloaded but teaches maximum allowable.)

Maximum teacher load requirements and individual class size limits are the same for mini courses as any other classes.

IV. Additional Regulatory Requirements

Additional regulatory requirements related to the basic program include, but are not limited to, the following:

- Gifted and Talented Regulation (43-220)
- School-to-Work Regulation (43-225)
- Health Education Requirement (43-238)
- Summer Programs Regulation (43-240)
- Special Education Regulations* (43-243 to 243.1)
- Academic Assistance Regulations--Grades 4-12 (43-268)

V. Student Records

1. Each school shall have an appropriate means of reporting academic achievement to parents.

2. The district shall maintain accurate student data according to the pupil accounting system prescribed by the State Department of Education. A record of all dropouts shall be filed by school, grade, race and sex. The

superintendent shall verify the accuracy of the enrollment attendance, membership by category, and dropout reports submitted to the Office of Finance, State Department of Education.

VI. Emergency Closings

Full days missed because of weather or other circumstances must be made up. Early dismissal days shall be reported to the Director, Office of Federal and State Accountability.

¹ English/Language Arts shall include reading, writing, listening and speaking.

² Environmental Education is required as an integral part of science, social studies and health.

³ Eighth grade social studies must include South Carolina history as it relates to the United States.

⁴ Health shall include components as outlined in the Comprehensive Health Education Act.

⁵ Students who are physically or mentally unable to take the physical education course provided for the regular student shall take a suitably modified course in physical education. (Section 59-29-80, S.C. Code of Laws, 1976, as amended.)

⁶ Visual/Performing Arts shall include, but not be limited to, music and art.

⁷ At least one elective of an occupational exploratory must be scheduled. Programs in areas such as, but not limited to, industrial technology education (grades 7-8), keyboarding, computer literacy, and career exploration may be included.

⁸ Foreign Language as a separate course is recommended but not required. If a separate course is not offered, foreign languages should be incorporated in the basic curriculum.

*A teacher of children with disabilities in the resource or itinerant model shall be certified or have a permit in the area of handicapping condition in which the majority are classified, or be certified in one area of handicapping condition in which the teacher is teaching and successfully complete six semester hours annually toward certification in the area in which the majority of students are classified. Pupils participating in self-contained programs shall be of the same category of disability. The teacher must be certified or hold an out-of-field permit in the area of handicapping condition of the pupils served.

Fiscal Impact Statement:

No additional state funding is requested. The SCDE estimates that no additional costs will be incurred by the State and its political subdivisions in complying with the proposed revisions to Regulation 43-232.

Statement of Rationale:

Regulation 43-232 establishes that each school district board of trustees shall ensure quality schooling by providing a rigorous, relevant curriculum for all students. Each school district shall examine the academic achievement standards adopted by the South Carolina State Board of Education. Elementary, middle, and high school faculty and staff shall work together to ensure that students are prepared to achieve these standards. When approved by the principal and the parents, a student promoted to the seventh or eighth grade may take units of ninth grade or higher work for school credit.

The regulation clarifies for public schools in the state the requirements for programs with grades six, seven, and eight. The amendment is to clarify the courses in the *Activity Coding System for the Student Information System* that may be used to grant credit to seventh- and eighth-grade students.

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Document No. 4477

STATE BOARD OF EDUCATION

CHAPTER 43

Statutory Authority: 1976 Code Sections 59-5-60 (2004), 59-18-110 (Supp. 2013), 59-18-310(B) (Supp. 2014), 59-29-10 et seq. (2004 and Supp. 2013), 59-33-30 (2004), 59-53-1810 (Supp. 2013), 20 U.S.C. 1232(g), and 20 U.S.C. 6301 et seq. (2002)

43-234. Defined Program, Grades 9–12 and Graduation Requirements

Synopsis:

Regulation 43-234 establishes that each school board of trustees must ensure quality schooling by providing a rigorous, relevant curriculum for all students. The regulation also stipulates that each school district must offer a standards-based academic curriculum organized around a career cluster system that provides students with individualized education choices. The regulation also defines the graduation requirements for the state.

An amendment will remove the language referring to the exit examination as required for high school graduation. Another amendment will delete the recommended course section due to ever-changing recommendations.

Notice of Drafting for the proposed amended regulation was published in the *State Register* on July 25, 2014.

Instructions:

Section I(E) below is deleted in its entirety.

Replace Section V. with amended Section V., as shown below.

Text:

43-234. Defined Program, Grades 9–12 and Graduation Requirements.

Each school district board of trustees must ensure quality schooling by providing a rigorous, relevant curriculum for all students.

Each school district must offer a standards-based academic curriculum organized around a career cluster system that provides students with individualized education choices.

I. Requirements for Earning a South Carolina High School Diploma

A. The student must earn a total of twenty-four units of credit as follows:

Unit Requirements

English language arts	4.0
mathematics	4.0
science	3.0
U.S. History and Constitution	1.0
economics	0.5
U.S. Government	0.5
other social studies	1.0
physical education or Junior ROTC	1.0
computer science (including keyboarding)	1.0
foreign language or career and technology education	1.0

electives

7.0

24.0 total

B. The student must pass a classroom examination on the provisions and principles of the United States Constitution, the Declaration of Independence, the Federalist papers, and American institutions and ideals. This instruction must be given for a period of at least one year or its equivalent, either within the required course U.S. History and Constitution or within another course. (For specific regulations regarding the end-of-course test for U.S. History and Constitution, see R 43-262.4, End-of-Course Tests.)

C. The student must pass a high school credit course in science in which an end-of-course examination is administered.

D. The student must be enrolled for a minimum of one semester immediately preceding his or her graduation, except in case of a bona fide change of residence. Units earned in a summer school program do not satisfy this requirement.

II. Provisions for Schools in the Awarding of High School Credit

A. A school may award and accept credit in units of one-fourth, one-half, and a whole.

B. A school may award one unit of credit for an academic standards-based course that requires a minimum of 120 hours of instruction. A school may award one-half unit of credit for an academic standards-based course requiring a minimum of 60 hours of instruction and one-fourth unit of credit for an academic standards-based course requiring a minimum of 30 hours of instruction.

C. A school may award credit for courses that have been approved by the South Carolina Department of Education (SCDE) in a proficiency-based system. A proficiency-based course may also be offered for one-fourth and one-half unit if the system specifies these units. Each school district that seeks to implement a proficiency-based system must submit a plan to the SCDE that provides procedures for establishing and developing a proficiency-based system including the method for determining proficiency. The SCDE must approve the district-submitted plan prior to the district’s use of the proficiency-based system. Districts are accountable for making sure that the academic standards and the individual learning needs of the students are addressed.

D. A school may award credit for those gateway courses that are a part of the End-of-Course Examination Program only if a student takes the course approved by the school in which he or she is enrolled and meets all the stipulated requirements of the End-of-Course Examination Program. (For specific regulations regarding end-of-course tests, see R 43-262.4, End-of-Course Tests.)

E. A school may award credit only for courses in summer programs-either district-wide or school-site programs-that meet all the regulatory requirements for courses offered for students in grades nine through twelve. A district-wide summer school program may meet the administrative certification requirement by employing a district supervisor as well as a lead teacher for each school site.

F. A school may award credit for a course that is approved by the district-whether that school offers the particular course or not-if the student receives prior approval.

G. A school may award credit toward the high school diploma for a course that the student takes in an approved adult education program if the course is granted approval by the local superintendent or his or her designee.

H. A school may award credit for locally designed courses under the following conditions:

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1. Locally designed subject-area courses must be aligned with the state academic standards for the particular subject area and must be approved by the local board of trustees and the State Superintendent of Education.

2. Locally designed elective courses must be approved by the local board of trustees. No more than two units may be awarded to a student for released-time classes in religious instruction.

3. Locally designed CATE courses funded with state or federal CATE monies must be approved by the SCDE's Office of Career and Technology Education.

I. A school may award the PE credit for a diploma if the PE course meets all statutory requirements including the personal fitness and wellness component and the lifetime fitness component.

J. A school may award the one-half unit of credit carried by the course Keyboarding for half of the required computer science unit.

K. A school may award credit for the American Sign Language course as the required unit in a foreign language.

L. A school may award credit for a college course that students in grades nine through twelve take under the district's dual credit arrangement.

III. Dual Credit Arrangement

A. District boards of trustees may establish a policy allowing students to take college courses for units of credit toward the high school diploma. The district policy may allow for courses to be offered by an institution of higher education through a cooperative agreement.

B. A three-semester-hour college course transfers as one unit of credit.

C. Tuition costs and any other fees are the responsibility of the individual student or his or her parent(s) or legal guardian unless otherwise specified in local school district policy.

D. Students enrolled in a South Carolina public school may take only courses that are applicable to baccalaureate degrees or to associate degrees offered by institutions accredited by the New England Association of Colleges and Schools, the Middle States Association of Colleges and Schools, the Southern Association of Colleges and Schools, the North Central Association of Colleges and Schools, the Western Association of Colleges and Schools, or the Northwest Association of Colleges and Schools.

IV. Transfer Students

A transfer student is one who enrolls in a South Carolina public school after having been enrolled in another school in this state or in a school in another state. Credits that he or she earned at the former school may be accepted and applied toward the South Carolina high school diploma. (For specific regulations see R 43-273, Transfers and Withdrawals.)

V. Instructional Program

School districts must organize high school curricula around a minimum of three clusters of study and cluster majors. Such curricula must be designed to provide a well-rounded education that fosters artistic creativity, critical thinking, and self-discipline through the teaching of academic content and skills that students will use in postsecondary study and in the workplace. Students must declare an area of academic focus, also known as a career major, within a cluster of study before the end of the second semester of their tenth-grade year.

Each year, schools must offer a range of required college- and career-ready courses in the core subject areas as listed in the SCDE's *Activity Coding System* to meet the needs of all students in a four-year graduation cohort.

For students whose academic needs are greater than those courses offered by their school, Virtual SC courses, if available, must be offered by the district to the students in order to graduate with the four-year graduation cohort.

A. Career Clusters

School districts must use the sixteen clusters for reporting purposes but may modify these clusters (for example, Arts and Humanities in place of Arts, Audio-Video Technology, and Communications). The sixteen state clusters are the same as the sixteen federal clusters:

- Agriculture, Food, and Natural Resources
- Architecture and Construction
- Arts, Audio-Video Technology, and Communications
- Business, Management, and Administration
- Education and Training
- Finance
- Government and Public Administration
- Health Science
- Hospitality and Tourism
- Human Services/Family and Consumer Sciences
- Information Technology
- Law, Public Safety, and Security
- Manufacturing
- Marketing, Sales, and Service
- Science, Technology, Engineering, and Mathematics
- Transportation, Distribution, and Logistics

B. Schools must also offer instruction in each of the following areas:

1. Advanced Placement: Schools whose organizational structure includes grades eleven and twelve must offer Advanced Placement courses. (For specific regulations regarding the Advanced Placement program, see R 43-258.1, Advanced Placement.)

2. Alcohol, tobacco, and other drugs: Schools must provide age-appropriate instruction regarding the dangers in the use and abuse of alcohol, tobacco, and other drugs. Instruction must emphasize the negative effects that the use of such substances can have on the total community.

3. Career and technology education: Schools must offer CATE courses. Students who plan to complete a CATE program must earn at least four units in an approved sequence of CATE courses leading to a career goal.

4. Driver education: Schools must provide a complete program of driver education, including classroom and behind-the-wheel phases, each semester on an elective basis for eligible students. (For specific regulations regarding driver education, see R 43-242, Driver Training.)

5. Environmental studies: Schools must include environmental studies as a part of their instructional program.

6. Financial literacy: Schools must include financial literacy as a part of the instructional program.

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7. Foreign language (modern and classical languages): Schools must offer levels 1 and 2 of at least one modern or classical language. Most state four-year colleges/universities require at least two units of the same modern or classical language for admission.

8. Health education: Schools must have a program of instruction in comprehensive health education. (For specific requirements regarding health education, see R 43-238, Health Education Requirement.)

9. Physical education: Schools must offer a physical education course that meets statutory requirements.

10. Visual and performing arts: Schools must offer courses in the visual and performing arts.

VI. Other Program Requirements

A. Guidance Program

All schools encompassing any combination of grades nine through twelve are required to provide a comprehensive guidance program that is based on grade-specific standards. The standards must address the academic, personal and social, and the career domains. Specifically, students must be provided guidance and career awareness programs and activities that assist them in developing and fulfilling their individual graduation plans and prepare them for a seamless transition to relevant employment, further training, or postsecondary study.

B. Library Media Program

Library media programs and technology resources must be available and accessible to all students and staff and must be appropriate for the accomplishment of the strategies and goals in each school renewal or district strategic plan.

C. Length of School Day

1. The instructional day for secondary students must be at least 6 hours, excluding lunch, or the equivalent weekly.

2. Homeroom will not count as part of the instructional day. When no homeroom period is utilized, the administrative time that is used to determine attendance, make announcements, or complete other tasks normally accomplished during homeroom period will not be considered as part of the instructional day.

3. Schools may exercise options and vary the number of minutes in the instructional week, provided that such variation meets statutory requirements and is approved by the local board of trustees.

D. Class Size

1. The teacher load must not exceed the maximum of 150 students daily. Class size must not exceed the maximum of 35 students.

2. The above-stated maximums do not apply in the following circumstances:

a. A maximum of 40 students per period with a total teaching load of 240 students daily is permitted for physical education teachers. If physical education and health are taught on alternate days to the same class, the 40-student maximum and 240-student totals are also permitted for health. When health is taught as a separate subject, the teaching load is a maximum of 35 students per period and a total of 150 students per day.

b. Music teachers may teach a maximum of 240 pupils daily. No class may exceed 40 students in membership. However, when band, chorus, or orchestra require rehearsals of the entire membership, any number of students is acceptable if adequate space is available.

c. When a teacher’s daily schedule includes a combination of subjects, the maximum daily teaching load will be calculated on the basis of 30 students per academic class and 40 students for each music or physical education class. (Example, 3 classes of math of 30 each = 90 + 2 classes of physical education of 40 each = 80. In this example, the teacher is not overloaded but teaches maximum allowable.)

d. Maximum teacher load requirements and individual class size limits are the same for mini-courses as for any other classes.

E. Additional Regulatory Requirements

1. Due to federal requirements, all students must take a science course for which an assessment is given.

2. For state accountability purposes, every student must take an end-of-course examination in biology.

3. State Board regulations that contain instructional program requirements are accessible on the SCDE Web site on the “State Board of Education Regulations Table of Contents” page.

VII. Reporting Requirements

A. High School Completers

1. Each school issuing the state high school diploma must submit to the State Superintendent of Education on or before May 1 the following data on its previous year’s completers:

(a) the number of the school’s completers who entered the freshman class of a postsecondary institution—either in South Carolina or out of state—and on whom such an institution has sent the school a first-term transcript or summary grade report,

(b) a breakdown of all postsecondary courses that this group of completers passed during their term,

(c) a breakdown of all postsecondary courses that this group failed during their first term,

(d) a breakdown of all postsecondary courses for which this group received a grade of “no credit” during their first term, and

(e) the number of the school’s completers who did not enter a postsecondary institution but who instead chose a postsecondary alternative such as employment or military service or for whom no information is available.

2. Each school must use the official form to submit the required data on its previous year’s completers.

B. Career and Technology Education Completers

Each district must survey all its high school graduates who are identified as career and technology education completers to determine their placement status with regard to employment, postsecondary education, and military service. A career and technology education completer is a student with an assigned Classification of Instructional Programs (CIP) code who has earned at least four units of credit in CATE courses leading to a career goal.

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The district must conduct the survey ten months after graduation each year and must submit the results annually to the SCDE for the purpose of federal and state accountability requirements.

C. Student Records

1. Each school must have an appropriate means of reporting academic achievement to parents.
2. Each school district must maintain accurate student data according to the pupil accounting system prescribed by the SCDE.
3. Each school district must file a record of all dropouts that specifies for every student the name of the school in which he or she was enrolled and gives the following information on the student: his or her name, grade, race, sex, date of birth, free/reduced meals status, English proficiency status, and migrant status.
4. Each district superintendent must verify the accuracy of the student enrollment, attendance, membership by category, and dropout reports submitted to the SCDE's Office of Finance.
5. Each school must comply with the Family Educational Rights and Privacy Act regarding student records (20 U.S.C. Section 1232(g)).

D. Course Records for Students

1. Each district superintendent must verify the accuracy of course records for students.
2. The name and code number of every course that each student takes must be entered into the student data collection system active master scheduler at the time the student takes the course. Courses may not be added to the student's course history (transcript) without first being entered into the scheduler.
3. Courses offered in nontraditional settings such as online courses, courses offered in conjunction with a college or technical college (i.e., dual credit), and courses offered by the school through the district, state, or another type of provider must be included in the active master scheduler.

VIII. Emergency Closings

Full school days missed because of weather or other unforeseen circumstances must be made up. Three days within a school calendar must be designated as makeup days. A plan to make up days by lengthening the school day by more than one hour must be approved by the SCDE. Early dismissal days must be reported to and approved by the director of the Office of Federal and State Accountability.

Fiscal Impact Statement:

No additional state funding is requested. The South Carolina Department of Education estimates that no additional costs will be incurred by the State and its political subdivisions in complying with the proposed revisions to Regulation 43-234.

Statement of Rationale:

Regulation 43-234 establishes that each school board of trustees must ensure quality schooling by providing a rigorous, relevant curriculum for all students. An amendment will remove the language referring to the exit examination as required for high school graduation. Another amendment will delete the recommended course section due to ever-changing recommendations.

Document No. 4530
STATE BOARD OF EDUCATION
 CHAPTER 43

Statutory Authority: 1976 Code Sections 59-5-60 (2004), 59-18-310 (Supp. 2014), and 59-18-320 (Supp. 2013)

43-262.4. End-of-Course Tests

Synopsis:

The State Board of Education (SBE) proposes to repeal Regulation 43-262.4, End-of-Course Tests. The requirements of this regulation are to be merged with Regulation 43-262, Assessment Program.

Notice of Drafting for the proposed repeal of this regulation was published in the *State Register* on August 22, 2014.

Instructions:

Repeal in its entirety.

Text:

43-262.4. Repealed.

Fiscal Impact Statement:

There is no fiscal impact.

Statement of Rationale:

The requirements of this regulation are being merged into R.43-262, Assessment Program, so assessment requirements will be provided in a single regulation. Repealing this regulation will comport with current practice.

Document No. 4494
STATE BOARD OF EDUCATION
 CHAPTER 43

Statutory Authority: 1976 Code Sections 59-5-60 (2004) and 59-40-10 et seq. (2004 and Supp. 2014)

43-601. Procedures and Standards for Review of Charter School Applications

Synopsis:

State Board of Education Regulation 43-601 governs the procedures and standards for review of charter school applications. The proposed amendments would align Regulation 43-601 to (1) recent changes to the South Carolina Charter Schools Act of 1996 and (2) the guidance and compliance provided to both sponsors and applicants by the South Carolina Department within the *South Carolina Public Charter School Application Guidance*.

Notice of Drafting for the proposed amendments regulation was published in the *State Register* on August 22, 2014.

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Instructions:

Replace regulation in its entirety.

Text:

43-601. Procedures and Standards for Review of Charter School Applications.

I. DEFINITIONS

A. A “charter school” means a public, nonreligious, nonhome-based, nonprofit corporation forming a school that operates by sponsorship of a public school district, the South Carolina Public Charter School District, or a public or independent institution of higher learning, but is accountable to the board of trustees, or in the case of technical colleges, the area commission, of the sponsor which grants its charter. Nothing in this chapter prohibits charter schools from offering virtual services pursuant to state law and subsequent regulations defining virtual schools.

B. “Applicant” means the person who or nonprofit corporate entity that desires to form a charter school and files the necessary application with the South Carolina Public Charter School District Board of Trustees, the local school board of trustees in which the charter school is to be located, or the board of trustees or area commission of a public or independent institution of higher learning. The applicant also must be the person who or the nonprofit corporate entity that applies to the Secretary of State to organize the charter school as a nonprofit corporation.

C. “Sponsor” means the South Carolina Public Charter School District Board of Trustees; the local school board of trustees in which the charter school is to be located, as provided by law; a public institution of higher learning, as defined in Section 59-103-5; or an independent institution of higher learning, as defined in Section 59-113-50, from which the charter school applicant requested its charter and which granted approval for the charter school’s existence. Only those public or independent institutions of higher learning, as defined in this subsection, who register with the South Carolina Department of Education may serve as charter school sponsors, and the department shall maintain a directory of those institutions. The sponsor of a charter school is the charter school’s local education agency (LEA) and a charter school is a school within that LEA. The sponsor retains responsibility for special education and shall ensure that students enrolled in its charter schools are served in a manner consistent with LEA obligations under applicable federal, state, and local law.

D. “Charter committee” means the governing body of a charter school formed by the applicant to govern through the application process and until the election of a board of directors is held. After the election, the board of directors of the corporation must be organized as the governing body and the charter committee is dissolved.

E. “Certified teacher” means a person currently certified by the State of South Carolina to teach in a public elementary or secondary school or who currently meets the qualifications outlined in Sections 59-27-10 and 59-25-115.

F. “Noncertified teacher” means an individual considered appropriately qualified for the subject matter taught and who has completed at least one year of study at an accredited college or university and meets the qualifications outlined in Section 59-25-115.

G. “Charter school contract” means a fixed term, renewable contract between a charter school and a sponsor that outlines the roles, powers, responsibilities, and performance expectations for each party to the contract.

H. “Resident public school” means the school, other than a charter school, within whose attendance boundaries the charter school student’s custodial parent or legal guardian resides.”

I. “Local school district” means any school district in the state except the South Carolina Public Charter School District, or a public institution of higher learning, as defined in Section 59-103-5; or an independent institution of higher learning, as defined in Section 59-113-50 and does not include special school districts.

J. “Scholastic year” means the year that begins on the first day of July of each year and ends on the thirtieth day of June following.

K. “Alternative Education Campus (AEC)” means any charter school with an explicit mission as outlined in its charter to serve an enrolled student population as outlined in Section 59-40-111.

II. APPLICATION REVIEW GUIDELINES FOR SPONSORS

A. Review of Applications

All charter school applications must be reviewed by the sponsor to determine compliance with the standards established below. The applications submitted to the sponsor must demonstrate compliance with each standard. The sponsor must make a determination to either approve or deny the charter.

B. Application Timeline

An applicant shall submit a letter of intent at least ninety days before submitting an application to the selected sponsor and a copy to the South Carolina Department of Education. Applications must be submitted to the sponsor and one copy to the South Carolina Department on or before February 1, beginning with the 2016 charter school application cycle. The sponsor’s deadline must ensure completion of the review process by December 1 of the year preceding the opening of the charter school. If a charter, to include a conditional charter, is not issued by December 1, the opening will be delayed one scholastic year. Charter applications must propose school openings that are consistent with South Carolina’s definition of a scholastic year.

C. Requests for Clarifying Information

If the sponsor determines that an application does not meet one or more of the standards, it may request clarifying information from the applicant prior to or during the hearing. The sponsor has the authority to incorporate this clarifying information into the application.

D. Proposed Contract

A contract between the charter school and the sponsor must be executed and must reflect all provisions outlined in the application as well as the roles, powers, responsibilities, and performance expectations for each party to the contract. A contract must include the proposed enrollment procedures and dates of the enrollment period of the charter school. All agreements regarding the release of the charter school from school district policies must be contained in the contract. The Department of Education shall develop a contract template to be used by charter schools and the sponsor. The template must serve as a foundation for the development of a contract between the charter school and the sponsor.

III. CHARTER SCHOOL APPLICATION STANDARDS

The charter school application, based on an application template with compliance guidelines developed by the South Carolina Department of Education, must include:

A. Executive Summary

The charter school application must include an executive summary which must be consistent with the intent of the Charter Schools Act of 1996 and must not exceed two pages in length.

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B. Mission Statement

The charter school application must include a mission statement that must be clear and must support the principles of the Charter Schools Act.

C. Support for Formation of a Charter School

1. The application must include evidence that an adequate number of parents or legal guardians with students eligible to attend the proposed school pursuant to Section 59-40-50 support the formation of the charter school and justify the projected per pupil allocation in the application budget.

2. If the social situation of the proposed school's targeted population precludes establishing parental support, evidence should demonstrate support from community groups and agencies, including letters from these entities that specify the level of their commitment to the school.

3. In the case of a proposal to convert a school, the application must also include evidence that two-thirds of the faculty and instructional staff voted to support the filing of the application and evidence that two-thirds of the voting parents or legal guardians voted to support the filing of the application. Parents or guardians shall have one vote for each of their children enrolled in the school (i.e., each student may be represented by only one vote). All parents or legal guardians of students enrolled in the school must be given the opportunity to vote.

D. Admissions Policies and Procedures

The application must include a description of the charter school's admission policies and procedures:

1. The admission policies and procedures must reflect compliance with all federal and state laws and constitutional provisions prohibiting discrimination on the basis of disability, race, creed, color, gender, national origin, religion, ancestry, or need for special education services.

2. The admission policies and procedures must provide that, subject to space limitations, the charter school admits all children who are eligible to attend public school in the school district where the charter school is operating, except in the case of an application to create single-gender schools. For schools within the South Carolina Public Charter School District, or institutions of higher education, the enrollment is open to all children who are eligible to attend public school in the state. If the number of applications exceeds the capacity of a program, class, grade level, or building, students must be accepted by lot, as specified in federal or state guidance. There is no appeal to the sponsor.

3. The policies and procedures must not limit or deny admission or show preference to any individual group except in the case of an application to create single-gender schools; however, priority, which may not exceed twenty percent of the enrollment of the charter school for the categories in (b) and (c) below, may be given to

a. a sibling of a pupil currently enrolled or attending, or who within the last six years attended the school for at least one complete academic year,

b. children of charter school employees, and

c. children of the charter school committee.

4. Admission priority must be given to all students enrolled in a school undergoing a conversion. All students enrolled in the school at the time of conversion must be given priority enrollment. Thereafter, students who reside within the former attendance area of that public school must be given enrollment priority.

5. The policies and procedures must include provisions to grant or deny permission for students to attend the charter school if they reside in a school district other than the one where the charter school is located. This section is not applicable to schools authorized by the South Carolina Public Charter School District or institutions of higher education.

a. In-district students will be given priority.

b. Out-of-district student enrollment must not exceed 20 percent of the total enrollment of the charter school without the approval of the receiving district board of trustees. The sending district must be notified immediately of the transferring students. Out-of-district students must be considered on the basis of the order in which their applications are received.

c. If the 20 percent of the out-of-district students are from one school district, then the sending district must concur with any additional students transferring from that district to attend the charter school.

6. A charter school located on a federal military installation or base where the appropriate authorities have made buildings, facilities, and grounds on the installation or base available for use by the charter school, as its principal location, also may give enrollment priority to otherwise eligible students who are dependents of military personnel living in military housing on the base or installation or who are currently stationed at the base or installation not to exceed 50 percent of the total enrollment of the charter school. This priority is in addition to the other priorities provided by this item, but no child may be counted more than once for purposes of determining the percentage makeup of each priority.

7. If a charter school denies admission to a student for reasons other than the results of a lottery, the student may appeal the denial to the sponsor. The decision will be binding on the student and the charter school.

E. Goals, Objectives, Educational Program, Curriculum, and Academic Performance Standards

The charter school's goals, objectives, educational program, curriculum, and academic performance standards must be clearly described in the application and must meet or exceed any student academic standards adopted by the school district in which the charter school is located. The application must demonstrate that the educational program is designed to enable each student to achieve these standards.

1. The goals and objectives must be clearly stated and must provide enough detail to indicate specific outcomes.

2. The student population must be identified by grade level, unique educational needs, and projected enrollment. A converted charter school must offer the same grades, or non-graded education appropriate for the same ages and education levels of pupils, as offered by the school immediately before conversion and may also provide additional grades and further educational offerings.

3. The educational goals must reflect the school's mission statement.

4. Strategies to accomplish the educational goals must be included.

5. The school calendar must be at least 180 instructional days.

6. Academic standards must identify what students will achieve at each grade level and must meet or exceed the South Carolina curriculum standards, as adopted by the State Board of Education. A correlation or other documentation must be included or process identified to ensure that the school will provide an instructional program that meets or exceeds the academic standards.

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7. If the charter school plans to offer the South Carolina State High School Diploma, the application must set forth the method for meeting the state requirements for the High School Diploma, including, but not limited to, course unit requirements, seat time for Carnegie Units, as applicable, and the administration of the required examinations.

8. Provisions must be included for determining if all students are achieving or attaining the standards, including the methods by which student performance information will be gathered and monitored.

9. The application must include an explanation as to how the school will comply with the Individuals with Disabilities Education Act, Section 504 of the Rehabilitation Act, and the Americans with Disabilities Act.

F. Student Assessment

The application must include a description of the charter school's plan for evaluating pupil achievement and progress toward accomplishment of the school's achievement standards. The school's evaluation plan must include state-mandated assessments and other assessments as well as the timeline for meeting these standards and the procedures to be taken if pupil achievement falls below the standards.

1. Methods for evaluating pupil achievement at each grade level must be specified. These methods must include but should not be limited to the state assessments.

2. The timeline must identify the expected yearly progress toward meeting the school's long-term performance goals. The expected yearly progress must meet or exceed the expectation of the federal accountability system recognized by the U.S. Department of Education.

3. Provisions must be included to address the needs of students who do not perform at acceptable levels of proficiency in the statewide assessment program.

G. Budget and Accounting System

The application must include a plan for the charter school that is economically sound and in compliance with state and federal requirements:

1. A budget for the term of the charter must be included. The charter school must use the same budget codes as are required of school districts. The budget must be based on documented State Department of Education estimated revenues in accordance with the allocations in S.C. Code Ann. Section 59-40-140(A)-(C). If the budget includes funds acquired through grants, the application must present evidence that the funds, including federal public charter school start-up grants, are likely to be received, and the terms of the projected grants must be explained. Anticipated expenditures must include all costs associated with initial implementation and continued operation, including but not limited to instructional and support costs for:

- a. salaries,
- b. employee benefits,
- c. purchased services (includes insurance and transportation),
- d. supplies and materials (includes noncapital equipment), and
- e. capital outlay.

2. The application must include a description of the annual audit of the financial and administrative operations of the charter school, including evidence that the charter school will adhere to the accounting,

auditing, and reporting procedures and requirements that are applied to public schools operating in South Carolina. Accounting, auditing, and reporting requirements must be in compliance with the principles set forth in the following publications, published annually by the Office of Finance:

- a. Single Audit Guide,
- b. Financial Accounting Handbook, and
- c. Funding Manual.

3. The application must include documentation regarding the pupil accounting system, including evidence that the charter school will adhere to the procedures and regulations that are applied to public schools operating in South Carolina. Pupil accounting and reporting requirements must be in compliance with the S.C. Pupil Accounting Manual and the S.C. Student Accountability Manual, published by the State Department of Education.

4. The application must include documentation of any negotiated services provided by the sponsor, including but not limited to financial accounting, payroll services, food services, custodial services, maintenance, curriculum, library and media services, and warehousing.

H. Governance and Operation

The application must include a description of the governance and operation of the charter school including:

1. A detailed school start-up plan, resumes and background information on the charter committee members, the capacity and experience of the school leadership and management team, any involvement with the replication of existing successful public charter schools, any proposed management company or educational service provider responsibilities, and the nature and extent of parental, professional educator, and community involvement in the governance and operation of the charter school.

2. The charter school must be organized as a South Carolina non-profit corporation and the application must include a copy of the non-profit corporation’s articles of incorporation and bylaws.

3. The charter committee must include at least one teacher.

4. The board of directors must consist of seven or more individuals with the exact number specified in or fixed in accordance with the bylaws. Members of a board of directors may serve a term of two years, and may serve additional terms. A choice of the membership of the board must take place every two years. Fifty percent of the members of the board as specified by the bylaws must be individuals who have a background in K–12 education or in business, and the bylaws of the charter school also must provide for the manner of selection of these members. In addition, at least 50 percent of the members of the board as specified by the bylaws must be elected by the employees and the parents or guardians of students enrolled in the charter school. Parents or guardians shall have one vote for each student enrolled in the charter school. All members must be residents of the State of South Carolina. A person who has been convicted of a felony must not be elected to a board of directors. If the board of directors consists of an odd number of members, the extra member must be an individual who has a background in K–12 education or in business;

5. The charter committee must assume the following responsibilities:

- a. employing and contracting with teachers and nonteaching employees;
- b. ensuring that teachers, whether certified or noncertified, undergo the background checks and other investigations required for certified teachers, as provided by law, before they may teach in the charter school;

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- c. contracting for other services;
- d. developing pay scales, performance criteria, and discharging policies for its employees;
- e. deciding all other matters related to the operation of the charter school, including budgeting, curriculum, and operating procedures; and
- f. ensuring that the charter school will adhere to the same health, safety, civil rights, and disability rights requirements as are applied to all public schools operating in the same school district.

6. The application must include a description of the administrative structure of the charter school, including the roles and responsibilities of each administrative staff member.

7. Evidence of the nature and extent of parental, community, and professional educator involvement in the governance and operation of the school must be provided.

8. Evidence must be provided that the charter school and its governing body will comply with the Freedom of Information Act. Such evidence may include the bylaws of the nonprofit corporation, which must be established prior to application.

I. Administrative and Teaching Staff

The charter school must employ administrators and teachers in a manner consistent with the Charter Schools Act:

1. Part-time noncertified teachers must be considered pro rata in calculating staff percentages based on the hours which they are expected to teach.

2. A noncertified teacher must be appropriately qualified for the subject matter taught, must have completed at least one year of study at an accredited college or university, and must meet the qualifications outlined in S.C. Code Ann. Section 59-25-115.

3. A certified teacher must hold current certification by the State of South Carolina to teach in a public elementary, middle, or secondary school.

J. Racial Composition

The application must describe how the charter school intends to ensure that the enrollment of the school is similar to the racial composition of the school district or to the targeted student population the charter school proposes to serve and must also provide assurance that the school complies with any school district desegregation plan or order in effect:

1. The application must demonstrate timely, fair, and realistic policies and procedures for recruiting, registering, and admitting students that reflect the racial composition of the school district or the targeted school population.

2. The proposed procedures and policies must reflect an understanding of the racial composition of the district and the targeted student population.

3. To ensure compliance with a desegregation plan or order, the charter school applicant should take the following steps and provide documentation that these steps were taken in its application:

- a. request and receive a letter from the district indicating whether the school will be subject to any desegregation plan or order;
- b. secure a copy of the desegregation plan or order if the school is subject to such;
- c. determine and demonstrate that the charter school's policies and procedures are in compliance with the desegregation plan or order;
- d. request and receive a letter from the district that indicates whether the charter school's proposed policies and procedures are in compliance with any desegregation plan or order in effect in the district or whether clarification must be received from the Office for Civil Rights.

K. Transportation

The application must include a description of how the charter school intends to meet the transportation needs of its pupils:

1. If the charter school will provide transportation by school bus, the application must include a plan that complies with the state requirements for drivers and training and the state safety requirements for school buses.

If the lack of transportation is preventing students from attending, the charter school should provide a plan to address their transportation needs.

2. If the charter school intends to contract with the district or a third party for transportation services, a description of those services and a proposed contract must be provided in the application.

3. A charter school is not required to provide or facilitate transportation for out-of-district students.

L. Facilities and Equipment

The application must include a description of the building, facilities, and equipment and an explanation as to how they will be obtained.

1. If a facility suitable for use by the charter school is identified at the time of application, the application must provide the following information with regard to the facility that the charter school intends to occupy:

- (a) the address of the facility;
- (b) a description of the facility;
- (c) a floor plan of the facility, including a notation of its size in square footage;
- (d) the name and address of the owner of the facility;
- (e) a copy of the proposed lease or rental agreement if the facility will be leased or rented; and

(f) a description of the equipment that will be used to support the proposed curriculum and an explanation as to how the equipment will be obtained.

2. If the charter school has not identified a suitable facility, the application must specify a plan for obtaining such a facility and must include:

- (a) a description of the facility needs

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(b) a statement as to whether an existing facility will be remodeled or a new facility will be built;

(c) a schedule for completing or obtaining a suitable facility and, if applicable, a description of and timeline for any plan to raise funds for completing or obtaining the facility; and

(d) a description of the equipment that will be used to support the proposed curriculum and an explanation as to how the equipment will be obtained.

M. Employee Relations

The application must explain the relationship that will exist between the charter school and its employees, including evaluation procedures:

1. The application must include a description of the process that will be used to advertise for, select, and employ instructional staff and other employees.

2. The procedure for the evaluation of teachers of the charter school must be outlined in the application.

a. The charter school may choose to use the ADEPT (Assisting, Developing, and Evaluating Professional Teaching) program or other teacher evaluation method consistent with the state-approved evaluation systems. If ADEPT is to be used, the school must meet all requirements of the program.

b. If the charter school selects another method of evaluation other than ADEPT, that method must be explained with adequate detail. Teachers with Initial Teaching Certificates in those schools can advance to a renewable Limited Professional Teaching Certificate but cannot advance to a full Professional Teaching Certificate.

3. The application must explain how the terms and conditions of employment will be addressed with affected employees.

N. Grievance and Termination Procedures

The charter school must have a reasonable grievance and termination procedure for its employees:

1. The charter school may, with agreement from the sponsor, adopt the procedures for the employment and dismissal of teachers outlined in S.C. Code Ann. Section 59-25-410 et seq. (1990).

2. If the charter school does not adopt procedures for the employment and dismissal of teachers outlined in S.C. Code Ann. Section 59-25-410 et seq. (1990), the charter school must establish employment and termination procedures that provide for notice and a right to a hearing before the governing board.

3. The charter school application must include grievance or termination procedures for paraprofessionals and other staff.

4. Teachers and other staff members who are employed at a public school that converts and who desire to continue to teach or work at the converted school may do so but will remain employees of the local school district with the same compensation and benefits including any future increases.

O. Student Conduct, Rights, and Responsibilities

The charter school application must include a policy governing student conduct, student rights and responsibilities, and student discipline standards and procedures:

1. The policy must set forth disciplinary actions to be taken by the administration for breaches of the student conduct policy.

2. The application must set forth an appeal process for students recommended for expulsion that includes a right to appeal a decision to the charter school board.

3. The application must set forth an assurance that the charter school will comply with S.C. Code Ann. Section 59-63-235 (Supp. 2001), which provides for the expulsion of any student who brings a firearm to school.

4. The application must include an assurance that the charter school will comply with the Family Education Rights and Privacy Act (20 U.S.C. Section 1232).

5. The application must contain the explanation of the policies with regard to student conduct, rights, and responsibilities that will be given to parents and students at the beginning of the school year.

P. Indemnification

The charter school must assume the liability for the activities of the charter school and must agree to indemnify and hold harmless the school district, its servants, agents, and employees from any and all liability, damage, expense, causes of action, suits, claims, or judgments arising from injury to persons or property or otherwise that arises out of the act, failure to act, or negligence of the charter school, its agents and employees, in connection with or arising out of the activity of the charter school.

Q. Insurance

The application must include a description of the types and amounts of insurance coverage to be obtained by the charter school. The application must address, but is not limited to, the following types of insurance: workers' compensation, liability, property, indemnity, and automotive.

IV. VIRTUAL CHARTER SCHOOLS

A. Definition: a virtual charter school is a charter school whereby students are taught primarily through online methods; however, at least 25 percent of the instruction in core areas as defined in Section IV(E)(1) must be through regular instructional opportunities. Regular instructional opportunities may include, but are not limited to, the opportunities outlined in Section IV(E)(2).

B. The following additional information must be submitted to the sponsor with the charter application:

1. List of currently developed courses that are ready for curriculum alignment;
2. Access to one course per level that can be previewed by South Carolina Department of Education (SCDE) to assess depth of work necessary for curriculum alignment;
3. Description of how the proposed charter will comply with the 25 percent real time requirement;
4. A timeline of how curriculum development will be completed and then approved by the SCDE;
5. A description of how much teacher interaction students will receive within the online instruction;
6. A description of the portal used and how it works;
7. A description of how the applicant plans to comply with the teacher requirements in S.C. Code Ann. Section 59-40-50.

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C. Curriculum

1. All courses in core areas for which there are state-adopted curriculum standards must be reviewed to determine whether the courses meet content and grade specific standards, and approved by the SCDE prior to offering the course.

2. Review by the Sponsor

After the approval or conditional approval of a charter by the sponsor, the virtual charter school may submit courses for approval by the sponsor.

D. Additional Program Requirements

The program must provide the following:

1. Each course must be taught by a teacher meeting the requirements of S.C. Code Ann. Section 59-40-50;

2. Ensure that a parent or legal guardian verifies the number of hours of educational activities completed by the student each year;

3. Provide for frequent, ongoing monitoring of an individual student's program to verify each student is participating in the program;

4. Include proctored assessments for core subjects per semester that are graded or evaluated by the teacher;

5. Conduct at least bi-weekly parent-teacher conferences in person, electronically, or by telephone;

6. Provide for a method to verify student attendance;

7. Provide for verification of ongoing student progress and performance in each course as documented by assessments and examples of coursework.

E. Regular Instructional Opportunities

1. The charter school must provide regular instructional opportunities in real time that are directly related to the school's curricular objectives. Core academic instruction includes instruction in English, reading or language arts, mathematics, science, foreign languages, civics and government, economics, arts, history, and geography.

2. Regular instructional opportunities include, but are not limited to, the following:

a. meetings with teachers;

b. educational field trips and outings;

c. virtual field trips that are in real time attended by other charter school students;

d. virtual conferencing sessions; and

e. offline work or projects assigned by the teacher of record.

V. CONDITIONAL CHARTERS

The sponsor may grant a conditional charter, instead of a full charter, to an applicant whose application meets the standards, and may do so only if one or more of the following conditions exists: a charter school has not yet secured its space and been issued a certificate of occupancy by the Office of School Facilities, secured its equipment, facilities, and/or personnel.

The conditional approval must be in writing and outline the specific conditions that must be met for approval and must include the specific date by which the conditions need to be met in order to secure approval. The sponsor must make a determination as to whether the charter applicant has met the conditions of the conditional approval on or before the date specified in the conditional approval. Failure to make a ruling by the date outlined in the conditional charter shall be deemed approved.

VI. ADVERSE IMPACT ON STUDENTS

A local school board of trustees may deny an application if the charter school would adversely affect the other students in the district.

A. The local school board of trustees must demonstrate adverse impact on students. The impact must be specific and must have a negative effect on students. If the local school board of trustees finds that the charter school would adversely affect other students of the district, the written explanation of the reasons for denial required by Section 59-40-70(C) must describe detrimental effects upon other students of the district.

B. If the district is claiming an adverse impact based upon the redirection of funding to the charter school, the district must demonstrate that the funds being redirected to the charter school will have a direct negative impact on students.

1. The district must show options it has considered in an effort to reduce the adverse financial impact of the charter school.

2. The district has considered the net fiscal impact of the charter school, including the fiscal benefits that the charter school may bring to the district.

VII. FEDERAL REQUIREMENTS OF CHARTER SCHOOLS

A. Annual Audits

Each authorized charter school in the State must have an annual, independent audit conducted by a qualified auditing or accounting firm and must file the audit annually with the school's authorized public chartering agency.

B. Academic Achievement

1. Each authorized charter school in the State operates under a legally binding charter and performance contract between itself and the school's authorized public charter agency that demonstrates improved student academic achievement.

2. Charter schools must provide evidence of improved student academic achievement for all groups of students described in Section 1111(b)(2)(C)(v) of the ESEA. Authorizers must use increases in student academic achievement for all groups of students described in Section 1111(b)(2)(C)(v) of the ESEA as the most important factor when determining to renew or revoke a school's charter. Each authorizer and charter school must enter into a contractual agreement stating that student performance of all students described in Section 1111(b)(2)(C)(v) of the ESEA is the most important factor when determining to renew or revoke a school's charter.

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VIII. GUIDELINES

The South Carolina Department of Education may issue guidelines to assist charter schools in complying with federal legislation, including, but not limited to, the Elementary and Secondary Education Act (ESEA) and the Individuals with Disabilities Education Improvement Act (IDEA).

Fiscal Impact Statement:

No additional state funding is requested. The SCDE estimates that no additional costs will be incurred by the state and its political subdivisions in complying with the proposed revisions to Regulation 43-601.

Statement of Rationale:

State Board of Education Regulation 43-601 governs the procedures and standards for review of charter school applications. The proposed amendments would align Regulation 43-601 to (1) recent changes to the South Carolina Charter Schools Act of 1996 and (2) the guidance and compliance provided to both sponsors and applicants by the South Carolina Department of Education within the *South Carolina Public Charter School Application Guidance*.

Document No. 4495

STATE BOARD OF EDUCATION

CHAPTER 43

Statutory Authority: 1976 Code Sections 59-5-60, 59-24-30, and 59-24-40

43-165.1. Program for Assisting, Developing, and Evaluating Principal Performance (PADEPP)

Synopsis:

Regulation 43-165.1 defines the performance standards and criteria for assisting, developing, and evaluating principals in South Carolina. Regulation 43-165.1 also defines the rating scale for determining levels of effectiveness regarding a principal's performance.

The amendments will change the rating levels to specify that a satisfactory rating will be identified as "Proficient" or higher and an additional standard will be added to the present standards. The additional standard will be a Student Growth standard which will comprise a portion of the principal's overall evaluation as specified in the guidelines approved by the State Board of Education.

Notice of Drafting for the proposed amendments regulation was published in the *State Register* on August 22, 2014.

Instructions:

Replace regulation in its entirety.

Text:

43-165.1. Program for Assisting, Developing, and Evaluating Principal Performance (PADEPP).

I. PURPOSE

The State Board of Education, through the South Carolina Department of Education, is required to adopt statewide performance standards and criteria that shall serve as a foundation for all processes used for assisting,

developing, and evaluating principals employed in the school districts of this state. School districts shall use the standards and procedures adopted by the State Board of Education for the purposes of conducting evaluations and guiding the professional development of principals. Districts are to consider evaluation results in making decisions regarding principal development, compensation, promotion, retention, and removal.

The South Carolina Department of Education shall ensure the implementation of principal evaluation in the school districts.

Principals must be evaluated using the Performance Standards and Criteria for Principal Evaluation adopted by the State Board of Education. Additional performance standards and criteria may be established by the superintendent. As required by S.C. Code Ann. Section 59-24-30, the principal's annual Professional Development Plan (PDP) shall be established on the basis of the PADEPP Performance Standards and Criteria and the school's renewal plan.

II. DEFINITIONS FOR THE PURPOSES OF THIS EVALUATION PROGRAM

A. **PRINCIPAL:** A principal is the chief administrative head or director of an elementary, middle, or secondary school or of a vocational, technical, special education, or alternative school. Induction principals are those serving for the first time as building-level principals. These principals are considered probationary until they have completed the requirements of the Principal Induction Program (PIP) and have received an overall rating of Proficient or higher on the PADEPP evaluation instrument .

B. **EVALUATOR:** The evaluator is the district superintendent and/or the superintendent's designee. All evaluators must have successfully completed the Office of School Leadership's (OSL) Program for Assisting, Developing, and Evaluating Principal Performance (PADEPP) training before evaluating principals.

C. **EVALUATION INSTRUMENT:** The evaluation instrument developed by the South Carolina Department of Education is based upon the PADEPP Performance Standards and Criteria and is available from the Office of School Leadership. In lieu of the state instrument, districts may request permission to use an alternative evaluation process that meets state requirements and national standards. This instrument must be approved by the South Carolina Department of Education and the State Board of Education.

D. **EVALUATION CYCLE:** The evaluation cycle shall be consistent with the school year as defined by law. After induction , principals shall be evaluated as stated in Section III.

III. PROGRAM IMPLEMENTATION

A. PRINCIPALS WITH TIER 1 CERTIFICATION

(1) First-year principals shall participate in an induction program as provided for in State Board of Education Regulation 43-167, "Principal Induction Program." The superintendent or his or her designee shall provide the first-year principal with written and oral feedback relative to each performance standard and criterion. Principals are to receive this feedback at least at mid-year and end-of-year conferences. The superintendent or his or her designee will observe, collect relevant data, consult with the first-year principal on a regular and consistent basis, and provide the first-year principal with an informal written evaluation.

(2) Upon successful completion of both the South Carolina Principal Induction Program (PIP) and a full evaluation on the PADEPP evaluation instrument , the principal will be eligible for Tier 2 principal certification. If the overall rating on the PADEPP evaluation instrument in any year immediately subsequent to the induction year of employment as a principal is below Proficient, the principal will remain on Tier 1 certification until the South Carolina Department of Education receives verification from the employing school district that the principal has achieved an overall rating of Proficient or higher on PADEPP.

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B. PRINCIPALS WITH TIER 2 CERTIFICATION

The superintendent or his or her designee shall evaluate Tier 2 principals annually. A full evaluation using all PADEPP Performance Standards will be conducted at least every third year. The evaluation shall address each of the PADEPP Performance Standards and accompanying Criteria. Principal evaluations on years between full evaluations will include Performance Standards for Instructional Leadership, Student Growth, and all Performance Standards rated the previous year as below "Proficient," as well as any additional Performance Standards identified in the Principal's Professional Development Plan (PDP). Full evaluations may, of course, be conducted every year, if the superintendent chooses to do so. A principal is to receive feedback from the superintendent or his designee regarding the principal's performance at least at mid-year and end-of-year conferences.

IV. PERFORMANCE STANDARDS AND CRITERIA

Principal preparation programs and school districts must address, but are not limited to, the Performance Standards and Criteria for the Program for Assisting, Developing, and Evaluating Principal Performance (PADEPP), as specified in the State Board of Education's PADEPP implementation guidelines.

V. EVALUATION PROCESS

A. The evaluation of each principal shall consist of both formative and summative phases.

(1) The formative phase shall begin with an initial review of the evaluation instrument by the evaluator with the principal. Regular conferences shall be held to discuss the principal's progress and shall include an analysis of the data collected during the year.

(2) The summative phase shall provide for evaluative conclusions regarding the principal's performance based upon the data collected. Upon completion of the evaluation, the evaluator will meet with the principal to discuss the findings in terms of each of the PADEPP Performance Standards, as well as the overall results. At the conclusion of the meeting, the evaluator and the principal shall sign the evaluation form, and a copy shall be given to the principal.

B. After reviewing the overall results of the evaluation, the principal and evaluator shall establish the principal's annual Professional Development Plan (PDP) on the basis of the identified strengths and weaknesses, as well as the school's renewal plan.

C. Satisfactory performance on an evaluation does not guarantee reemployment as a principal.

D. Each principal has the right to respond in writing to the completed principal evaluation instrument. This written response must be submitted to the evaluator within ten working days of the summative conference.

E. All appeals shall follow local school district policies and procedures governing the local appeal process.

VI. DISTRICT RESPONSIBILITIES

A. Each school district shall ensure that principals receive awareness training that includes

(1) the PADEPP Performance Standards and Criteria for Principal Evaluation,

(2) the PADEPP principal evaluation instrument, and

(3) Regulation 43-165.1, "Program for Assisting, Developing, and Evaluating Principal Performance (PADEPP)."

B. Each school district shall ensure that the district superintendent and the superintendent's designee(s) are trained as evaluators of principals.

C. Each school district shall designate one individual to be trained as a district coordinator for PADEPP. This coordinator shall be responsible for the administration of the evaluation program consistent with this regulation, including an annual submission for all principals in their district.

D. Each school district shall maintain principal evaluation data and shall ensure the confidentiality of the evaluation results in accordance with the Freedom of Information Act.

E. Each school district shall submit annual assurances and required principal evaluation data to the South Carolina Department of Education indicating compliance with this regulation and PADEPP implementation guidelines.

F. Each school district shall utilize the results from the principal evaluations in decisions regarding principal development, compensation, promotion, retention, and removal.

VII. SOUTH CAROLINA DEPARTMENT OF EDUCATION RESPONSIBILITIES

A. The South Carolina Department of Education shall ensure that the PADEPP is appropriately implemented by each school district in accordance with this regulation and PADEPP implementation guidelines.

B. The South Carolina Department of Education shall collect from school districts required principal evaluation data, as well as Assurance/Validation forms, in order to

(1) determine trends and inform decisions concerning educational leadership preparation and professional development, and

(2) ensure that the Program for Assisting, Developing, and Evaluating Principal Performance is being appropriately administered in accordance with this regulation and the law governing the evaluation of principals.

C. The South Carolina Department of Education shall provide school districts with ongoing technical assistance in the form of training, consultation, and advisement. Specifically, the training will ensure that participants have the knowledge and skills necessary to collect and document data relative to a principal's performance, analyze the data to identify the principal's performance strengths and weaknesses, provide feedback to the principal in terms of the PADEPP Performance Standards and Criteria, and counsel, coach, and assist the principal to improve effectiveness. Additionally, the training will ensure that participants are prepared to evaluate the principal in a valid, reliable manner, and to make a summative judgment regarding the principal's performance.

VIII. TRAINING REQUIREMENTS

A. Each school district shall ensure that principals receive awareness training that includes

(1) the Standards and Criteria for Principal Evaluation,

(2) the selected principal evaluation instrument, and

(3) Regulation 43-165.1, "Program for Assisting, Developing, and Evaluating Principal Performance."

B. Each school district shall ensure that the district superintendent and the superintendent's designee(s) are trained as evaluators of principals.

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C. Each school district shall designate one individual to be trained as a district coordinator for the Program for Assisting, Developing, and Evaluating Principal Performance. This coordinator shall be responsible for the administration of the evaluation program consistent with this regulation.

D. The South Carolina Department of Education shall provide school districts with ongoing technical assistance in the form of training, consultation, and advisement.

IX. PROGRAM IMPLEMENTATION AND ADMINISTRATION

A. The South Carolina Department of Education shall ensure that the Program for Assisting, Developing, and Evaluating Principal Performance is appropriately implemented by each school district in accordance with this regulation.

B. Local school districts shall provide annual assurances to the Department that the Program for Assisting, Developing, and Evaluating Principal Performance is being appropriately administered in accordance with this regulation and the law governing the evaluation of principals.

C. The South Carolina Department of Education has the authority to develop guidelines, approved by the State Board of Education, in accordance with the provisions of this regulation.

Fiscal Impact Statement:

None.

Statement of Rationale:

The amendment to this regulation will provide a clear definition and criteria for the PADEPP standard, Student Growth, and clearly delineate the rating language for a principal's evaluation.

Document No. 4478
STATE BOARD OF EDUCATION
CHAPTER 43

Statutory Authority: 1976 Code Sections 59-5-60(1) (2004), 59-26-10 et seq. (2004 and Supp. 2013), and 20 U.S.C. 6301 et seq. (2001)

43-62. Requirements for Additional Areas of Certification.

Synopsis:

State Board of Education Regulation 43-62 governs the requirements for add-on certification for educators in South Carolina. Amendments to Regulation 43-62 will (1) clearly define the terms add-on certification and endorsement and (2) remove specific requirements for add-on areas and endorsements from the regulation. The specific requirements for add-on areas and endorsements will then be promulgated in guidelines to be approved by the State Board of Education. These changes allow the Board to continue to provide appropriately qualified educators for South Carolina public schools and to address needed changes in educator training and preparation more readily.

Notice of Drafting for the proposed amendments to the regulation was published in the *State Register* on July 25, 2014.

Instructions:

Regulation 43-62 is replaced in its entirety.

Text:

43-62. Requirements for Additional Areas of Certification.

I. GENERAL INFORMATION

A. Individuals who desire to add a full-field content area of certification to an existing certificate must complete a State Board of Education–approved program and present a passing score on the appropriate content-area examination(s) in the specific subject field, or complete the content area add-on certification requirements specified in the State Board of Education–approved Guidelines and Requirements for Content Area Add-on Certification and Endorsements.

B. In addition to adding on full-field content areas to an existing certificate, an individual may add endorsements in specialized areas to recognize additional expertise. In some instances, an endorsement may be required to teach specific courses. In other instances, the endorsement represents additional training and study to enhance an educator’s professional practice. In order to add an endorsement, an educator must complete the specific requirements for that area as outlined in the State Board of Education–approved Guidelines and Requirements for Content Area Add-on Certification and Endorsements.

C. In the event that the State Board of Education should eliminate, revise, or adopt new certification areas, currently certified individuals who are affected may retain the areas of certification for which they previously qualified. However, the State Board of Education may require previously certified individuals to upgrade their certification by completing the new requirements within a specified period of time.

D. The following designations apply to the grade spans for teacher certification in South Carolina, effective September 1, 2005.

CERTIFICATION GRADE SPANS

Early Childhood = pre-Kindergarten–grade 3

Elementary = grades 2–6

Middle-level = grades 5–8

Secondary = grades 9–12

The areas of art, music, physical education, English for Speakers of Other Languages (ESOL), foreign languages, theater, and exceptional children education have a pre-Kindergarten (pre-K–12) grade span, with the exception of Early Childhood Special Education.

E. Instructional areas may not be added to certificates in guidance, media specialist, or school psychologist unless the applicant has completed a teacher education program designed and approved for initial certification purposes.

F. Certification is divided into five sections: (1) content area, (2) exceptional children education, (3) career and technology education, (4) specialized endorsements, and (5) specialized alternative certification.

II. CONTENT AREA ADD-ON CERTIFICATION REQUIREMENTS

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A. The add-on of a content area of certification to an existing valid certificate allows the educator to practice and be considered in-field in that additional content area. Prerequisites for adding-on a content area to a current certificate are the following:

1. Bachelor's degree;
2. Initial or professional certificate at the early childhood, elementary, middle, secondary, or pre-K–12 Level;
3. Minimum qualifying score(s) on the content area examination(s) required by the State Board of Education; and
4. Completion of all required course work with an equivalent of a grade of "C" or better.

B. The following content areas may be added to an existing valid certificate. Specific requirements for each area will be outlined in the State Board of Education–approved Guidelines and Requirements for Content Area Add-on Certification and Endorsements.

1. Art
2. Driver Education
3. Early Childhood Education
4. Elementary Education
5. English
6. English for Speakers of Other Languages (ESOL)
7. Gifted and Talented
8. Health Education
9. Mathematics
10. Middle-level Education
11. Music Education
12. Physical Education
13. Science
14. Social Studies
15. Theater
16. World Languages
17. Literacy

III. EXCEPTIONAL CHILDREN ADD-ON CERTIFICATION

A. The add-on of a content area of certification to an existing valid certificate allows the educator to practice and be considered in-field in the additional content area. Prerequisites for adding-on a content area to a current certificate are the following:

1. Bachelor's degree;
2. Initial or professional certificate at the early childhood, elementary, middle, secondary, or pre-K–12 Level;
3. Minimum qualifying score(s) on the content area examination(s) required by the State Board of Education; and
4. Completion of all required course work with an equivalent of a grade of "C" or better.

B. The following areas of special education may be added to an existing valid certificate. Specific requirements for each area will be outlined in the State Board of Education–approved Guidelines and Requirements for Content Area Add-on Certification and Endorsements.

1. Early Childhood Special Education (Ages 3–6)
2. Education of Blind and Visually Impaired
3. Education of Deaf and Hard of Hearing

4. Emotional Disabilities
5. Learning Disabilities
6. Intellectual Disabilities
7. Multi-categorical Special Education
8. Severe Disabilities
9. Speech Language Therapist Requirements for this area are included in R 43-64 under Requirements for Certification at the Advanced Level

IV. CAREER AND TECHNOLOGY ADD-ON CERTIFICATION

A. The add-on of a career and technology area of certification to an existing valid certificate allows the educator to practice and be considered in-field in the additional content area. Prerequisites for adding-on a content area to a current certificate are the following:

1. Bachelor’s degree;
2. Initial or professional certificate at the early childhood, elementary, middle, secondary, or pre-K–12 Level;
3. Minimum qualifying score(s) on the content area examination(s) required by the State Board of Education; and
4. Completion of all required course work with an equivalent of a grade of “C” or better.

B. The following areas may be added to an existing valid Career and Technology certificate. Specific requirements for each area will be outlined in the State Board of Education–approved Guidelines and Requirements for Content Area Add-on Certification and Endorsements.

1. Agriculture
2. Business and Marketing Technology
3. Computer Programming (for Career and Technology programming courses)
4. Family and Consumer Science
5. Industrial Technology

V. SPECIALIZED ENDORSEMENTS

A. In addition to adding on full-field content areas to an existing certificate, an individual may add endorsements in specialized areas to recognize additional expertise. In some instances, an endorsement may be required to teach specific courses. In other instances, the endorsement represents additional training and study to enhance an educator’s professional practice. In order to add an endorsement, an educator must complete the specific requirements for that area as outlined in the State Board of Education–approved Guidelines and Requirements for Content Area Add-on Certification and Endorsements.

B. The following specialized endorsements may be added to an existing valid certificate:

1. Online Teaching
2. Teaching Children of Poverty
3. Advanced Placement
4. Gifted and Talented
5. Literacy Teacher
6. Literacy Coach
7. Literacy Specialist
8. Secondary Transition Specialist
9. Project-based Learning
10. Teacher Leader
11. Computer Science

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VI. Specialized Alternative Certification

A. ADJUNCT INSTRUCTOR

Eligibility Requirements

1. The individual must have earned a bachelor's degree or higher from a regionally accredited college or university, and

2. A school district in the state must be willing to employ the individual as a teacher on a part-time basis in a content field at the middle or secondary school level, or in the related arts or physical education at the elementary level.

Application Requirements

3. The applicant must

(a) complete the application process for South Carolina educator certification, including an all-clear fingerprint review;

(b) have earned a bachelor's degree or higher with a major in the field of certification, or must submit passing scores on the content certification exam(s) required for the certification area; and

(c) submit verification of five years of occupational experience within the past ten years in, or related to, the content field of the certificate for which the individual is applying; and

4. The school district seeking to employ the individual must provide the following documentation to the Office of Educator Certification:

(a) a request and justification for employment of the instructor,

(b) an assurance that the employment of this instructor will not displace a certified teacher already employed, and

(c) an assurance that the adjunct instructor's teaching assignment will be less than a .5 full-time equivalent position and will not exceed two credit-bearing courses in an academic year.

Stipulations

The following stipulations apply to the South Carolina Adjunct Teaching Certificate:

5. The Adjunct Teaching Certificate is valid only in the sponsoring school district and is not transferrable to any other school district or state.

6. The adjunct instructor must be assigned a state-certified mentor in the same general subject area(s) in which the instructor is assigned to teach.

7. The adjunct instructor must be evaluated annually by the school district and must receive successful performance reviews for the certificate to be reissued for subsequent years at the request of the sponsoring school district.

8. The adjunct instructor must complete a minimum of 20 contact hours of professional development approved by the employing school district each three-year period the certificate is held.

9. The salary for the adjunct instructor will be determined by the employing school district.

B. ADVANCED FINE ARTS

1. Teachers for advanced fine arts programs who do not meet the requirements for certification in any existing area of certification will be issued an initial teaching certification if all of the following requirements are met:

(a) The school district has in operation an advanced program in the fine arts that has been approved by the South Carolina Department of Education.

(b) The school district superintendent requests certification for the prospective teacher in writing, describing the situation in which the teacher will work and the exact nature of the proposed duties of the teacher.

(c) The candidate has earned an undergraduate or graduate degree in fine arts from a nationally or regionally accredited institution of higher education or an institution that has programs approved for teacher education by the State Board of Education in the area of the fine arts that the teacher is to teach.

(d) The candidate presents evidence of at least two years of successful professional experience in the area of the fine arts that he or she is expected to teach.

(e) The candidate presents an acceptable score(s) on the required teaching content-area examination(s).

2. The initial certificate in Advanced Fine Arts will be issued for three years. It can be renewed in accordance with R 43-5(I)(A). A total of twelve (12) semester hours of credit, which includes teaching methods and psychology of learning in graduate professional education, will be required for professional certification.

3. In addition to the graduate professional education requirement specified above, the initial certificate will be converted to the professional certificate upon successful completion of induction requirements, ADEPT, and the pedagogy examination required by the State Board of Education.

C. MONTESSORI

1. Levels of Montessori Certification

- Primary (3K–5K)
- Elementary I (Grades 1–3)
- Elementary II (Grades 4–6)
- Middle (Grades 6–8)

2. Individuals who wish to add Montessori to an existing certificate must meet the following requirements.

(a) Bachelor’s degree

(b) Initial or professional certificate at the appropriate level (early childhood, elementary, middle, or pre-K–12 level *)

(c) Completion of a training program at the appropriate level accredited by the Montessori Accreditation Council for Teacher Education (MACTE)

*A minimum qualifying score on the content area examination(s) required by the State Board of Education for early childhood, elementary, or middle level certification is also required for individuals with a prerequisite certificate in a pre-K–12 field who wish to add the appropriate Montessori level.

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3. Individuals who wish to qualify for initial Montessori certification must complete a State Board of Education–approved undergraduate or graduate teacher preparation program in early childhood, elementary, or middle-level with a Montessori emphasis (i.e., includes all requirements for a MACTE training program) AND submit passing scores on the certification examinations approved by the State Board of Education at the appropriate level.

OR

4. Verify completion of a bachelor’s degree, a MACTE-approved training program, and passing scores on the appropriate certification examination(s) approved by the State Board of Education, including the pedagogy exam. Additional certification fields may not be added to an initial Montessori certificate under this option unless the educator completes a State Board of Education–approved teacher preparation program in the additional field.

Fiscal Impact Statement:

No additional state funding is requested. The South Carolina Department of Education estimates that no additional costs will be incurred by the State and its political subdivisions in complying with the proposed revisions to Regulation 43-62.

Statement of Rationale:

The amendments to this regulation will provide clear definitions of content area add-on certification and specialized endorsements and will allow the State Board of Education to continue to provide appropriately qualified educators for South Carolina public schools and to address needed changes in educator training and preparation more readily.

Document No. 4531
STATE BOARD OF EDUCATION
CHAPTER 43

Statutory Authority: 1976 Code Sections 59-5-60 (2004), 59-1-445 (2004), and 59-1-447 (2004)

43-100. Test Security

Synopsis:

The State Board of Education (SBE) proposes to amend Regulation 43-100. Test Security. This regulation defines test security violations.

The Notice of Drafting was published in the *State Register* on August 22, 2014.

Instructions:

Entire regulation is to be replaced with the following text.

Text:

43-100. Test Security.

I. Tests administered by or through the State Board of Education shall include but are not limited to:

A. The statewide tests, as defined in State Board of Education Regulation 43-262, including field tests and pilot tests;

- B. Examinations for admission to teacher education programs and teacher certification examinations;
- C. Examinations for admission to programs such as the gifted and talented program;
- D. High school equivalency tests.

II. As used in this regulation, “local school board” means the governing board of a public school district, a public charter school, as well as those of special school districts, special schools, and institutions that utilize tests administered by or through the State Board of Education.

III. Each local school board must develop and adopt a district test security policy. The policy must provide for the security of materials for the entire period of time (before, during, or after testing) the materials are in the district and/or the schools within that district. The policy must address security for paper-based, computer-based, and customized assessments. This also applies to district-owned materials that are the same as those used in any state-operated testing or assessment program. Throughout the time testing materials are under the control of the school district, secure paper-based materials must be stored under lock and key when not in use for approved test administration activities.

IV. Each District Superintendent and the administration from each of the special schools and institutions that utilize tests administered by or through the State Board of Education must designate annually one individual in each district for each mandated assessment who will be the sole individual in the district authorized to procure test instruments that are utilized in testing programs administered by or through the State Board of Education. The name of the designated individual must be provided to the South Carolina Department of Education (SCDE) in writing. When the testing program involves procurement of materials available commercially, the designated individual must be the sole individual in the district authorized to procure commercial test instruments which are utilized in testing programs administered by or through the State Board of Education.

V. Individuals must adhere to all procedures specified in all operating manuals governing the mandated testing programs. Manuals are provided by or through the SCDE.

VI. A. The State Board of Education may invalidate test scores that reflect improbable gains and that cannot be satisfactorily explained through changes in student populations or instruction.

B. In cases where test results are invalidated because of a breach of security or action of the State Board of Education, any programmatic, evaluative, or certification criteria dependent upon the data will be deemed to not have been met.

VII. Any individual(s) who knowingly engage(s) in any activity that results in the invalidation of scores derived from teacher certification examinations, the examinations for admission to teacher education programs, and/or the high school equivalency tests forfeits all opportunities to retake the test(s).

VIII. Any knowing involvement in the presentation of forged, counterfeit, or altered identification for the purpose of obtaining admission to a test administration site for any of the tests administered by or through the State Board of Education will be considered a breach of test security within the meaning of S.C. Code Ann. Section 59-1-445 (1990, 2004). Any individual(s) who knowingly cause(s) or allow(s) the presentation of forged, counterfeit, or altered identification for the purpose of obtaining admission to any test administration site specified in this paragraph forfeits all opportunities to retake the test(s).

IX. Each of the following is considered a breach of professional ethics which may jeopardize the validity of the inferences made on the basis of test data and, as such, are viewed as security violations which could result in criminal prosecution and/or disciplinary action to an educator’s professional certificate.

- A. Failing to administer tests on the test dates specified by the SCDE.

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- B. Failing to maintain an appropriate testing environment, free from undue distractions.
- C. Failing to proctor the test to ensure that examinees are engaged in appropriate test-taking activities.
- D. Providing examinees with access to test questions or specific test content prior to testing.
- E. Providing examinees with access to answer keys prior to or during testing.
- F. Keeping, copying, reproducing, or using in any manner inconsistent with the instructions provided by or through the SCDE any test, test question, or specific test content.
- G. Keeping, copying, or reproducing in any manner inconsistent with the instructions provided by or through the SCDE any portion of examinee responses to any item or any section of a secured test.
- H. Coaching examinees, altering examinee responses, or interfering with examinee responses in any way prior to, during, or after testing. This includes hinting to examinees about the correctness of their responses.
- I. Failing to follow instructions specified in the test manuals for the distribution, storage, or return of test materials or failing to account for test materials before, during, or after testing.
- J. Failing to follow all directions pertaining to the administration of a test as specified in the test manuals for that test. This section includes failure to clear the memory of calculators used on a test as directed in the test manual.
- K. Allowing, participating in, assisting in, or encouraging any unauthorized access to test materials prior to, during, or after testing.
- L. Disclosing the contents of any portion of secure materials or discussing the contents of secure tests with examinees, teachers, or other educators before, during, or after testing.
- M. Leaving in view of examinees during test administration materials that are content or conceptually related to the subject areas being assessed.
- N. Providing references or tools other than those specifically allowed in test manuals. Providing references or tools during test administration at times other than those specifically allowed in test manuals.
- O. Failing to provide accommodations and/or customized materials as specified in the student's Individualized Education Program (IEP) or 504 plan. Providing accommodations and/or customized materials not included in the student's IEP or 504 plan.
- P. Excluding examinees or exempting from assessment students who should be assessed.
- Q. Failing to return test materials for all examinees.
- R. Engaging in inappropriate test preparation practices that invalidate the test scores. These practices include activities that result in an increase in test scores without a simultaneous increase in the examinee's real achievement or performance in the content area.
- S. Revealing test scores or test performance to anyone not involved in the education of the examinee.
- T. Altering test scores in electronic records or files.
- U. Failing to report a security breach.

X. The SCDE has the right and responsibility to observe test administration activities without prior notice in order to monitor adherence to test security. Examinees should be made aware that monitoring may occur.

XI. Any suspected violation of security must be reported to the South Carolina Law Enforcement Division.

XII. If a security breach occurs in a district, or charter school, rendering test forms or test items unusable, funds equivalent to replacement costs may be withheld from the district or charter school by the SCDE at the discretion of the State Board of Education.

XIII. At the discretion of the State Board of Education, an educator may receive a public or private reprimand or the credential of an educator may be suspended or revoked based on evidence of violation of test security provisions.

Fiscal Impact Statement:

There is no fiscal impact.

Statement of Rationale:

The amendments are being made to ensure that charter schools are held to the same standards as non-charter schools in the public school districts.

Document No. 4532
STATE BOARD OF EDUCATION
CHAPTER 43

Statutory Authority: 1976 Code Sections 59-5-60 (2004), 59-18-310 (Supp. 2014), and
59-18-320 (Supp. 2013)

43-260. Use and Dissemination of Test Results

Synopsis:

The State Board of Education (SBE) proposes to repeal Regulation 43-260, Use and Dissemination of Test Results. The requirements of this regulation are to be merged with Regulation 43-262, Assessment Program.

Notice of Drafting for the proposed repeal of this regulation was published in the *State Register* on August 22, 2014.

Instructions:

Repeal in its entirety.

Text:

43-260. Repealed.

Fiscal Impact Statement:

There is no fiscal impact.

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Statement of Rationale:

The requirements of this regulation are being merged into R.43-262, Assessment Program, so assessment requirements will be provided in a single regulation. Repealing this regulation will comport with current practice.

Document No. 4474
DEPARTMENT OF EMPLOYMENT AND WORKFORCE
CHAPTER 47
Statutory Authority: 1976 Code Section 41-29-110

47-23. Offers of Work

Synopsis:

The South Carolina Department of Employment and Workforce proposes to amend Regulation 47-23 to provide guidance on what is considered available suitable work. The Notice of Drafting regarding this regulation was published in the *State Register* on August 22, 2014.

Section-by-Section Discussion

47-23. This regulation is being amended to provide guidance on what is considered available suitable work.

Instructions:

Print as shown below.

Text:

47-23. Offers of Work.

A. Section 41-35-120(5) directs that a claimant may be disqualified from the receipt of benefits should he fail without good cause to apply for available suitable work, when so directed by the employment office or the Department; or should he refuse to accept available suitable work when offered him by the employment office or the employer; or should he decline to return to his customary self-employment (if any) when so directed by the department.

1. Pursuant to the requirements of Section 41-35-120(5)(b), in determining whether work is suitable for an individual, the Department must consider, based on a standard of reasonableness, as it relates to the particular individual concerned, the degree of risk involved to his health, safety, morals, his physical fitness and prior training, his experience and prior earnings, his length of unemployment and prospects for securing local work in his customary occupation, and the distance of the available work from his residence.

a. In considering the prior earnings of a claimant and the length of unemployment:

i. Available suitable work within the first eight (8) weeks of eligibility for unemployment insurance benefits includes employment that pays ninety percent (90%) of the wage earned from the claimant's most recent bona fide employer. A claimant who refuses to accept work that pays at least ninety percent (90%) of the wage earned from the claimant's most recent bona fide employer has refused to accept available suitable work.

ii. Available suitable work once a claimant collects more than eight (8) weeks of unemployment insurance benefits includes employment that pays seventy-five percent (75%) of the wage earned from the claimant's most recent bona fide employer. A claimant who refuses to accept work that pays at least seventy-five percent of the wage earned from the claimant's most recent bona fide employer after collecting more than eight (8) weeks of unemployment insurance benefits has refused to accept available suitable work.

b. However, a claimant is not required to accept work if the reduction in the wage as described in A.1.a. is less than minimum wage.

2. No provisions of 47-23 will circumvent the requirements of Section 41-35-120(5)(c).

B. A written offer of work made directly by an employer shall set out the nature of the work offered, the probable wages and hours per week, the shift or daily hours of the proposed employment, the expected duration of employment, the time and place the claimant should report, and the name of the person to whom he is to report. No disqualification will be imposed by reason of the failure of a claimant without good cause to accept a direct offer of available suitable work unless the employer submits a copy of such an offer to the Department together with a certification that it was either received and refused by the claimant, or that it was directed by registered or certified mail to the last known address of the claimant and that no response was made by the claimant. Provided, however, that no direct offer of available suitable work made in accordance with this regulation shall be considered unless a notice of such offer of work is received by the Department.

C. An oral offer of available suitable work may be made directly by an employer, but before a claimant shall be disqualified to receive benefits by reason of his failure to accept, without good cause, available suitable work so offered, a sworn statement shall be submitted by the employer to the Department setting forth that the offer of work was made directly to the claimant, the nature of work offered, the wages and hours per week, the shift or daily hours of the proposed employment, the expected duration of the employment, the time and place the claimant should have reported for duty, and any reason given by the claimant for his refusal to accept the work. Provided, however, that no direct offer of work made in accordance with this regulation shall be considered unless a notice of such offer of work is received by the Department.

D. A claimant who tests positive for drugs after being given a drug test as a condition of employment by a prospective employer shall be deemed disqualified to receive benefits by reason of his failure to accept a suitable offer of work. Also deemed disqualified is:

1. An insured worker who fails to provide a specimen pursuant to a request from the prospective employer, or otherwise fails or refuses to cooperate by providing an adulterated specimen; or

2. An insured worker who provides a blood, hair, or urine specimen during a drug test administered on behalf of the prospective employer, which tests positive for illegal drugs or legal drugs used unlawfully, provided:

a. The sample was collected and labeled by a licensed health care professional or another individual authorized to collect and label test samples by federal or state law, including law enforcement personnel;

b. The test was performed by a laboratory certified by the USDHHS/SAMSHA, the College of American Pathologists or the State Law Enforcement Division; and

c. An initial test was confirmed on the specimen using the gas chromatography/mass spectrometry method, or an equivalent or more accurate scientifically accepted method approved by the USDHHS/SAMSHA;

For purposes of this item, "unlawfully" means without a prescription.

Fiscal Impact Statement:

There will be no increased costs to the State or its political subdivisions.

Statement of Rationale:

Claimants do not have a regulation or a statute to guide them in determining how the wage in an offer of work would be considered when determining whether the position is available suitable work and if their refusal to accept would be considered a disqualification. The purpose of amending Regulation 47-23 is to provide guidance as to how the Department considers prior earnings and length of unemployment as listed in the requirements of South Carolina Code Section 41-35-120(5)(b).

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Document No. 4475

DEPARTMENT OF EMPLOYMENT AND WORKFORCE
CHAPTER 47

Statutory Authority: 1976 Code Sections 41-29-110 and 41-31-45(C)

47-500. Definitions

47-501. Unemployment Trust Fund Solvency

Synopsis:

The South Carolina Department of Employment and Workforce proposes to add regulations 47-500 and 47-501 in Article 5. Unemployment Trust Fund, as required by SC Code Ann. 41-31-45(C), to define how the Department will determine the income necessary to be raised each year to return the trust fund to an adequate level as defined in SC Code Ann. 41-31-45(A)(5).

Notice of Drafting for the proposed regulation was published in the *State Register* on August 22, 2014.

Section-by-Section Discussion

47-500. Definitions.

This section provides definitions for terms used in the following section.

47-501. Unemployment Trust Fund Solvency.

This section provides details on how the income necessary to be raised each year to set state unemployment insurance tax rates will be determined based on economic conditions.

Instructions:

Print regulation as shown below.

Text:

47-500. Definitions.

- (1) “Department” means the South Carolina Department of Employment and Workforce.
- (2) “Fund adequacy target” means an average high-cost multiple of one. See S.C. Code Ann. § 41-31-45(A)(5).
- (3) “Solvency surcharge” is a surcharge imposed on contributory employers in each year the unemployment trust fund is solvent but the trust fund reserve does not meet the fund adequacy target.
- (4) “Fiscal year” begins on July first of each year and ends on June thirtieth of the succeeding year.
- (5) “Tax year” begins on January first of each year and ends on December thirty-first of each year.
- (6) “Trust fund reserve” means the unemployment compensation fund, excluding distributions from the federal government, pursuant to 42 U.S.C. 1103, commonly referred to as the Reed Act. See S.C. Code Ann. § 41-31-45 (A)(6) and § 41-33-10.

(7) “Cap” is the greater amount of either: (1) the actual benefits paid in the prior fiscal year or (2) the projected benefits for the next tax year.

47-501. Unemployment Trust Fund Solvency.

Pursuant to South Carolina Code Annotated Section 41-31-45(C) and Section 41-31-50(1)(b), the Department must annually calculate the income necessary to pay benefits and reach the fund adequacy target for the unemployment trust fund. The Department determines the total income needed as follows:

(1) Projected benefits will be determined for the next tax year in consultation with the United States Department of Labor and with annual data provided by the Congressional Budget Office, subject to subsection (2).

(2) The income needed to pay benefits and return the unemployment trust fund to the fund adequacy target may also include a solvency surcharge. A solvency surcharge shall be in effect for each tax year that the trust fund reserve is less than the fund adequacy target, as of June 30th, subject to 47-501(2)(a). The aggregate amount of the solvency surcharge will be determined for each tax year to be the amount calculated to return the unemployment trust fund to the fund adequacy target within five years subject to the following:

(a) When actual benefits paid in the prior fiscal year are greater than the actual tax collections received in the prior fiscal year, then the cap, as defined in 47-500(7), is triggered. For the purpose of this section, tax collections shall exclude all penalties, interests, contingency surcharges, and recording fees. Once the cap is triggered then:

(i) If projected benefits for the next year are less than the cap, then the solvency surcharge shall be the difference between the cap and the projected benefits.

(ii) If projected benefits for the next tax year are equal to the cap, then no additional solvency surcharge will be added for the next tax year.

(3) After the cap has been triggered, as described in 47-501(2)(a), and in the prior fiscal year, actual benefits paid were less than actual tax collections, then tax rates for the next tax year will be set based on returning the unemployment trust fund to the fund adequacy target within the next five years.

(4) If the balance of the unemployment trust fund, as of the end of the most recently completed fiscal year, is greater than the fund adequacy target, then the Department may use the surplus amount to reduce taxes in the next tax year.

(5) Notwithstanding the provisions of 47-501(2), once the fund adequacy target has been met, in subsequent tax years, the solvency surcharge shall be set in the event the unemployment trust fund balance does not meet the fund adequacy target, as of the end of the most recently completed fiscal year, as shown in the following table:

Percentage the unemployment trust fund balance is below the fund adequacy target	Rebuilding period
More than 0.0000%, but less than 1.8750%	One year
1.8750% or more, but less than 3.7500%	Two years
3.7500% or more, but less than 5.6250%	Three years
5.62500% or more, but less than 7.5000%	Four years
7.5000% or more	Five years

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(6) In a fiscal year in which the fund adequacy target is reached, the Department will determine tax rates for the following tax year without a solvency surcharge and pursuant to South Carolina Code Annotated Section 41-31-50.

Fiscal Impact Statement:

No additional state funding is requested. The South Carolina Department of Employment and Workforce estimates that no additional costs will be incurred by the state and its political subdivisions in complying with the proposed Regulation 47-500 and 47-501.

Statement of Rationale:

Regulations 47-500 and 47-501 establish the procedure by which the South Carolina Department of Employment and Workforce will determine the amount of income necessary to pay benefits and return the unemployment trust fund to an adequate level. These regulations also provide guidance to the Department for setting tax rates in the midst of a recession during the rebuilding process as well as a mechanism to lower tax rates for businesses if the trust fund exceeds its adequacy target. The Department will consult with the United States Department of Labor and review annual data provided by the Congressional Budget Office in determining the projected benefits.

Document No. 4548

STATE BOARD OF FINANCIAL INSTITUTIONS CONSUMER FINANCE DIVISION

CHAPTER 15

Statutory Authority: 1976 Code Sections 37-22-110 et seq.,
particularly Section 37-22-260(A)&(B)

15-64. Mortgage Lending

Synopsis:

The South Carolina State Board of Financial Institutions - Consumer Finance Division seeks to amend regulation 15-64 in order to comply with the Secure and Fair Enforcement for Mortgage Licensing Act of 2008 (S.A.F.E. Act) and with rules issued by the Consumer Financial Protection Bureau (CFPB). Further, state-specific items in the South Carolina Mortgage Lending Act will be clarified or modified to meet the statutory requirements of both the S.A.F.E. Act and CFPB rules.

The Notice of Drafting was published in the *State Register* on October 24, 2014.

Instructions:

Print the amended regulation exactly as shown below.

Text:

ARTICLE 4

MORTGAGE LENDING ACT REGULATIONS

15-64. Mortgage Lending.

A. Definitions shall be those contained in the Mortgage Lending Act, S.C. Code Ann. Section 37-22-110 et seq.; Secure and Fair Enforcement for Mortgage Licensing Act of 2008, 12 USC 5101, et seq.; S.A.F.E. Act, 12 CFR Parts 1007 & 1008 et seq.; and the following:

(1) Act – means the South Carolina Mortgage Lending Act, S.C. Code Ann. Section 37-22-110 et seq.

(2) Day – means all calendar days including Saturdays, Sundays and legal public holidays.

(3) Employee for purposes of compliance with the federal income tax laws – means a natural person whose manner and means of performance of work are subject to the right of control of, or are controlled by, a person, and whose compensation for federal income tax purposes is reported, or required to be reported, on a W-2 form issued by the controlling person. (See IRS Publication 1779 and Form SS-8)

(4) Notice – means written notification received by the Commissioner within seven (7) days of any change except as defined in Section 37-22-180(A)

(5) Prior Written Consent – means written consent given by the Commissioner authorizing a change of control prior to that change of control taking place. To request authorization from the Commissioner, all information regarding acquisition via stock purchase or other device must be sent to the Commissioner at least 30 days prior to the change of control.

B. Use of NMLS&R unique identifier

(1) The Nationwide Mortgage Licensing System & Registry (NMLS&R) unique identifier for the licensed Mortgage Lender/Servicer, the licensed Branch Office and the licensed Mortgage Loan Originator must be displayed on all mortgage loan applications. The NMLS&R unique identifier of the Mortgage Lender/Servicer and the unique identifier of the Mortgage Loan Originator must also be placed on the Promissory Note or Loan Contract and the Security Agreement as well as any other documents required by 12 CFR 1026.36(g). Only the unique identifier of the licensed Mortgage Lender/Servicer is required to be displayed on all other mortgage loan forms.

(2) For advertising purposes, the NMLS&R unique identifier of the licensed Mortgage Lender/Servicer and, if included in the advertisement, the licensed Mortgage Loan Originator must be used in all advertising as it is defined in the Act.

C. All South Carolina residential mortgage loans secured by real property are subject to the provisions of all South Carolina and federal law related to mortgage loans including, but not limited to, the Real Estate Settlement Procedures Act of 1974 (RESPA), 12 USC Section 2601 et seq.

D. Reports

(1) The Mortgage Log required pursuant to Section 37-22-210 shall:

(a) be completed electronically as required by the Consumer Finance Division. The licensee is responsible for all costs associated with the electronic filing, and

(b) include all mortgage loans or applications where a credit report is requested, regardless of whether a mortgage loan is originated or modified.

(2) The Annual Report required by Section 37-22-220 shall include, in addition to other statutory requirements, an Expanded Mortgage Call Report (See Secure and Fair Enforcement for Mortgage Licensing Act of 2008, 12 USC 5101 et seq.; SAFE Mortgage Licensing Act, 12 CFR parts 1007 & 1008 et seq. consisting of:

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(a) a loan activity report submitted electronically on a quarterly basis as required by the Nationwide Mortgage Licensing System & Registry (NMLS&R) by the Mortgage Lender/Servicer for all locations and loan originators, and

(b) a corresponding financial condition report submitted electronically as required by the Nationwide Mortgage Licensing System & Registry (NMLS&R).

(3) The Commissioner at his or her discretion may require or accept an Expanded Mortgage Call Report filed through the Nationwide Mortgage Licensing System & Registry (NMLS&R) or similar filing in lieu of the annual report required in 37-22-220(B).

E. An applicant must supply required information to the Consumer Finance Division pursuant to Section 37-22-140(M) within 120 days of initial submission or the application will be abandoned as incomplete.

F. The Nationwide Mortgage Licensing System & Registry (NMLS&R) may be used to store the List required by Section 37-22-210(A) and the Roster required by Section 37-22-210(B) in lieu of the Commissioners' office so long as the information may be provided in a reasonable time upon request.

Fiscal Impact Statement:

The Consumer Finance Division estimates that the additional costs incurred by the State in complying with the proposed regulation will be approximately \$0.

Statement of Rationale:

The South Carolina Mortgage Lending Act (Act) specifically provides for the Commissioner of the Consumer Finance Division of the South Carolina State Board of Financial Institutions to promulgate regulations necessary to effectuate the purposes of the Act and to waive or modify, in whole or in part, by rule, regulation, or order, any or all of the requirements of this chapter and establish new requirements as reasonably necessary to participate in the Nationwide Mortgage Licensing System and Registry (NMLS&R). Regulation 15-64 is being amended to further clarify mortgage licensing requirements imposed by the Act, to modify those requirements where reasonable to facilitate the use of the NMLS&R as directed in Section 37-22-270 and to ensure conformity between the Act and federal law.

Document No. 4481

DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL CHAPTER 61

Statutory Authority: 1976 Code Sections 48-1-10 et seq.

61-62. Air Pollution Control Regulations and Standards

Synopsis:

Pursuant to the Clean Air Act, 42 U.S.C. Section 7401 *et seq.*, and the South Carolina Pollution Control Act, 1976 Code Section 48-1-10 *et seq.*, the South Carolina Department of Health and Environmental Control ("Department") amended South Carolina (SC) Regulation 61-62, *Air Pollution Control Regulations and Standards*, and the State Implementation Plan ("SIP"), as follows:

1. The Department amended Regulation 61-62.5, Standard No. 1, *Emissions from Fuel Burning Operations*, to exempt owners or operators of propane fired units from having to maintain a startup and shutdown log in order to be consistent with the same exemption already allowed for owners or operators of natural gas fired units.

2. The Department also amended Regulation 61-62.5, Standard No. 2, *Ambient Air Quality Standards*, to remove from the list of pollutants Gaseous Fluorides (as hydrogen fluoride (HF)). HF is a federal Hazardous Air Pollutant or HAP. It has no primary or secondary national ambient air quality standard and, therefore, is more appropriately regulated under Regulation 61-62.5, Standard No. 8, *Toxic Air Pollutants* rather than Standard No. 2.

3. The Department repealed Regulation 61-62.5, Standard No. 5.1, *Best Available Control Technology (BACT)/Lowest Achievable Emission Rate (LAER) Applicable to Volatile Organic Compounds*. Because other regulations such as Regulation 61-62.5, Standard No. 5, *Volatile Organic Compounds*; Regulation 61-62.5, Standard No. 7, *Prevention of Significant Deterioration*; and Regulation 61-62.5, Standard No. 7.1, *Nonattainment New Source Review* are available to limit VOC emissions, the Department finds that Regulation 61-62.5, Standard No. 5.1 is no longer necessary.

4. The Department also amended Regulation 61-62.5, Standard No. 7, *Prevention of Significant Deterioration*, to modify the criteria for creditability of an increase or decrease in actual emissions and modify various text to create consistency with 40 Code of Federal Regulations (CFR) 52.21, *Prevention of Significant Deterioration of Air Quality*.

5. The Department also amended Regulation 61-62.5, Standard No. 7.1, *Nonattainment New Source Review (NSR)*, to add timing flexibility language to the section of the regulation governing the calculation of emission offsets. Because of public notice requirements, the Department was unable to submit these revisions for approval as part of the “2013 General Assembly Package” but agreed the changes would be submitted for approval as part of the current set of revisions (2014 General Assembly Package).

6. The Department also amended Regulation 61-62.5, Standard No. 8, *Toxic Air Pollutants*, to add maximum allowable concentration time frame of “24-Hour Average” to table and add Hydrogen Fluoride (HF) as a pollutant (See item 2 for justification).

7. The Department also amended Regulation 61-62.60, *South Carolina Designated Facility Plan and New Source Performance Standards*, to correct an error in punctuation.

8. The Department also amended Regulation 61-62.70, *Title V Operating Permit Program*, to make a change to Section 62.70.5(c) to correct a unit of measurement error for consistency with language in Regulation 61-62.5, Standard No. 8, *Toxic Air Pollutants*.

9. The Department has also made other changes to Regulation 61-62 that include corrections for consistency, clarification, reference, punctuation, codification, formatting, and spelling to improve the overall text of Regulation 61-62 as necessary.

A Notice of Drafting was published in the *State Register* in Volume 38, Issue 4 on April 25, 2014.

Discussion of Revisions:

SECTION CITATION/EXPLANATION OF CHANGE:

Regulation 61-62.5, Standard No. 1, Emissions from Fuel Burning Operations

Regulation 61-62.5, Standard No. 1, Section I, Visible Emissions:

Paragraph C is amended to add the text “and propane” to specify the exemption for owners or operators of propane fired units from having to maintain a startup and shutdown log in order to be consistent with the same exemption already allowed for owners or operators of natural gas fired units.

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Regulation 61-62.5, Standard No. 1, Section IV, Opacity Monitoring Requirements:

Paragraph B.1 is amended to replace the word “semiannual” with the hyphenated word “semi-annual” for consistency within the regulation.

Regulation 61-62.5, Standard No. 1, Section IV, Opacity Monitoring Requirements:

Paragraph B.3 is amended to replace the word “quarterly” with the hyphenated word “semi-annual” for consistency within the regulation.

Regulation 61-62.5, Standard No. 2, Ambient Air Quality Standards

Regulation 61-62.5, Standard No. 2, Table:

Table is amended to strike the pollutant “Gaseous Fluorides (as HF)” and all associated parameters.

Regulation 61-62.5, Standard No. 5.1, Best Available Control Technology (BACT)/Lowest Achievable Emission Rate (LAER) Applicable to Volatile Organic Compounds

Regulation 61-62.5, Standard No. 5.1 is stricken in its entirety.

Regulation 61-62.5, Standard No. 7, Prevention of Significant Deterioration

Regulation 61-62.5, Standard No. 7, Section (a)(2), Applicability procedures:

Paragraph (a)(2)(iv)(f) is amended to add the text “for each type of emissions unit” for consistency with language in federal regulation 40 CFR 52.21.

Regulation 61-62.5, Standard No. 7, Section (b), Definitions:

Paragraph (b)(4)(i)(a) is amended to add a comma after the word “startups;” strike the second instance of the word “and;” add a comma after the word “shutdowns;” and add the text “and malfunctions” to the end of this paragraph for consistency with language in federal regulation 40 CFR 52.21.

Regulation 61-62.5, Standard No. 7, Section (b), Definitions:

Paragraph (b)(4)(ii)(a) is amended to add a comma after the word “startups;” strike the second instance of the word “and;” add a comma after the word “shutdowns;” and add the text “and malfunctions” to the end of this paragraph for consistency with language in federal regulation 40 CFR 52.21.

Regulation 61-62.5, Standard No. 7, Section (b), Definitions:

Paragraph (b)(5)(ii)(b) is amended to add the text “52.21 or under regulations approved pursuant to 40 CFR 51.166” for consistency with language in federal regulation 40 CFR 52.21; and to strike the text “and would be constructed in the same state as the state proposing the redesignation” for clarity.

Regulation 61-62.5, Standard No. 7, Section (b), Definitions:

Paragraph (b)(8) is amended to strike the text “regulated NSR” and add the text “subject to regulation under the Clean Air Act” for consistency with language in federal regulation 40 CFR 52.21.

Regulation 61-62.5, Standard No. 7, Section (b), Definitions:

Paragraph (b)(15) is amended to strike the word “actual” for consistency with language in federal regulation 40 CFR 52.21.

Regulation 61-62.5, Standard No. 7, Section (b), Definitions:

Paragraph (b)(30)(v) is added for consistency with language in federal regulation 40 CFR 52.21.

Regulation 61-62.5, Standard No. 7, Section (b), Definitions:

Paragraph (b)(32)(i)(a) is amended to strike the underline from the phrase “North American Industrial Classification System” to correct a typographical error.

Regulation 61-62.5, Standard No. 7, Section (b), Definitions:

Paragraph (b)(34)(iii)(c) is amended to strike the text “the date that the increase from” and the word “occurs”; and add the text “construction on” and the word “commences” to make the contemporaneous period and the creditability for an increase or decrease in actual emissions the same in order to be consistent with federal regulation 40 CFR 52.21.

Regulation 61-62.5, Standard No. 7, Section (b), Definitions:

Paragraph (b)(34)(iii)(d) is added for consistency with language in federal regulation 40 CFR 52.21.

Regulation 61-62.5, Standard No. 7, Section (b), Definitions:

Paragraph (b)(34)(vi)(b) is amended to strike the word “and” for consistency with language in federal regulation 40 CFR 52.21.

Regulation 61-62.5, Standard No. 7, Section (b), Definitions:

Paragraph (b)(34)(vi)(c) is amended to strike the period at the end of the sentence and replace it with a semicolon; and add the word “and” for consistency with language in federal regulation 40 CFR 52.21.

Regulation 61-62.5, Standard No. 7, Section (b), Definitions:

Paragraph (b)(41)(ii)(b) is amended to add a comma after the word “startups;” strike the second instance of the word “and;” add a comma after the word “shutdowns;” and add the text “and malfunctions” to the end of this paragraph for consistency with language in federal regulation 40 CFR 52.21.

Regulation 61-62.5, Standard No. 7, Section (i), Exemptions:

Paragraph (i)(3) is amended to add a comma after the text “(m)” for punctuational correctness.

Regulation 61-62.5, Standard No. 7, Section (i), Exemptions:

Paragraph (i)(4) is amended to add a comma after the text “(m)” for punctuational correctness.

Regulation 61-62.5, Standard No. 7, Section (i), Exemptions:

Paragraph (i)(8)(ii) is amended to add a comma after the text “(m)(1)(ii);” strike the first instance of the word “and;” and add a comma after the text “(m)(1)(iv)” for punctuational and grammatical correctness.

Regulation 61-62.5, Standard No. 7, Section (i), Exemptions:

Paragraph (i)(10) is amended to add a colon at the end of the sentence for punctuational correctness.

Regulation 61-62.5, Standard No. 7, Section (i), Exemptions:

Paragraph (i)(10)(i) is amended to strike the comma after the word “applies” and replace it with a semicolon for punctuation consistency.

Regulation 61-62.5, Standard No. 7, Section (m), Air quality analysis:

Paragraph (m)(1)(i)(a) is amended to strike the word “omit” and replace it with the word “emit” for grammatical correctness.

Regulation 61-62.5, Standard No. 7, Section (n), Source information:

Paragraph (n)(1)(i) is amended to add a comma after the text “(n)” for punctuational correctness.

Regulation 61-62.5, Standard No. 7, Section (u)(4):

Paragraph (u)(4) is amended to add the words “Clean Air” before the word “Act” for clarity.

Regulation 61-62.5, Standard No. 7, Section (aa), Actuals PALs:

Paragraph (aa)(3)(ii) is amended to strike the letter “s” from the word “malfunctions” for consistency with federal regulation 40 CFR 52.21.

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Regulation 61-62.5, Standard No. 7, Section (aa), Actuals PALs:

Paragraph (aa)(6)(ii) is amended to strike the text “Emissions from,” the word “operation,” the phrase “less than,” the letter “s” from the phrase “24-months,” and the phrase “prior to the date of the PAL permit application.” The paragraph is also amended to add the text “For newly constructed,” the phrase “actual construction,” the text “after the,” the text “period,” and the phrase “the emissions” for consistency with language in federal regulation 40 CFR 52.21.

Regulation 61-62.5, Standard No. 7, Section (aa), Actuals PALs:

Paragraph (aa)(8)(ii)(b)(2) is amended to strike the text “qtate” and replace with the word “state” to correct typographical error.

Regulation 61-62.5, Standard No. 7.1, Nonattainment New Source Review (NSR)

Regulation 61-62.5, Standard No. 7.1, Section (c), Definitions:

Paragraph (c)(2)(A)(i) is amended to strike the second instance of the word “and;” add a comma after the word “shutdowns;” and add the text “and malfunctions” to the end of this paragraph for consistency with language in federal regulation 40 CFR 52.21.

Regulation 61-62.5, Standard No. 7.1, Section (c), Definitions:

Paragraph (c)(2)(B)(i) is amended to add a comma after the word “startups,” strike the second instance of the word “and;” and add the text “and malfunctions” to the end of this paragraph for consistency with language in federal regulation 40 CFR 52.21.

Regulation 61-62.5, Standard No. 7.1, Section (c), Definitions:

Paragraph (c)(1)(B)(ii) is amended to strike the second instance of the word “and;” add a comma after the word “shutdowns;” and add the text “and malfunctions” to the end of this paragraph for consistency with language in federal regulation 40 CFR 52.21.

Regulation 61-62.5, Standard No. 7.1, Section (d), Permitting Requirements:

Paragraph (d)(1)(C)(v)(b)(2) is added to provide flexibility to NSR applicants that have been open for more than one year and less than two years. However, this provision does not allow the use of potential emissions in emission offsets calculations.

Regulation 61-62.5, Standard No. 7.1, Section (i), Actuals PALs:

Paragraph (i)(6)(ii) is amended to strike the word “operation,” the phrase “less than,” the letter “s” from the phrase “24-months,” and the phrase “prior to the date of the PAL permit application.” The paragraph is also amended to add the phrase “actual construction,” the text “after the,” and the word “period” for consistency with language in federal regulation 40 CFR 52.21.

Regulation 61-62.5, Standard No. 8, Toxic Air Pollutant

Regulation 61-62.5, Standard No. 8, Section II, Toxic Air Emissions:

Section II.E.Table is amended to add maximum allowable concentration time frame of “24-Hour Average” to table.

Regulation 61-62.5, Standard No. 8, Section II, Toxic Air Emissions:

Section II.E.Table is amended to add the pollutant “Hydrogen Fluoride (HF)” to include its Chemical Abstract Service (CAS) Number, Category, and Maximum Allowable Concentration. HF is a federal Hazardous Air Pollutant, has no primary or secondary national ambient air quality standard, and therefore is more appropriately regulated under Regulation 61-62.5, Standard No. 8, *Toxic Air Pollutants* rather than Standard No. 2 as is currently.

Regulation 61-62.60, South Carolina Designated Facility Plan and New Source Performance Standards

Regulation 61-62.60, Subpart LLL, “Standards of Performance for Onshore Natural Gas Processing; SO₂ Emissions:”

Subpart LLL, Title is amended to strike the semicolon and replace with a colon for punctuational correctness.

Regulation 61-62.70, Title V Operating Permit Program

Regulation 61-62.70, Section 70.5, Permit applications:

Section 70.5(c) is amended to strike the word “year” and replace with the word “month” to correct a unit of measurement error for consistency with language in Regulation 61-62.5, Standard No. 8, *Toxic Air Pollutants*.

Regulation 61-62.70, Section 70.6, Permit content:

Section 70.6(c)(4) is amended to add a hyphen to the word “semiannually” for consistency with the regulation.

Instructions:

Amend Regulation 61-62, Air Pollution Control Regulations and Standards, pursuant to each instruction provided below with the text of the amendments.

Text:**Regulation, 62.5, Standard No. 1, Emissions from Fuel Burning Operations****Regulation 61-62.5, Standard No. 1, Section I.C shall be revised as follows:**

C. Special Provisions

The opacity standards set forth above do not apply during startup or shutdown. Owners and operators shall, to the extent practicable, maintain and operate any source including associated air pollution control equipment in a manner consistent with good air pollution control practices for minimizing emissions. In addition, the owner or operator of fuel burning sources except natural gas and propane fired units, shall maintain a log of the time, magnitude, duration, and any other pertinent information to determine periods of startup and shutdown and make available to the Department upon request.

Regulation 61-62.5, Standard No. 1, Section IV.B.1 shall be revised as follows:

B. Continuous Opacity Monitor Reporting Requirements

1. The owner or operator of any fossil fuel-fired steam generator subject to the provisions of Section IV.A shall submit a written Continuous Opacity Monitor report to the Department semi-annually or more often if requested. All semi-annual reports must be postmarked by the 30th day following the end of each semi-annual period. The report shall include, at a minimum, the information in items B.1.a through B.1.c below. A letter shall be sent in lieu of a semi-annual report if no incidences occurred during the reporting period

Regulation 61-62.5, Standard No. 1, Section IV.B.3 shall be revised as follows:

3. The owner or operator shall maintain a file of all information contained in the semi-annual reports, calibration data for the opacity monitoring system(s), relevant records of adjustments and maintenance performed on such system(s), and all other data generated by the continuous opacity monitoring system(s), for a minimum of two (2) years from the date of submission of such reports or collection of such data. The information contained on file must be made available for review by Department personnel upon request.

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Regulation 61-62.5, Standard No. 2, Table shall be revised as follows:

Pollutant	Reference	Measuring Interval	Standard Level			
			mg/m ³	µg/m ³	ppm	ppb
Sulfur Dioxide	40 CFR 50.4 40 CFR 50.5	3 hour (secondary)	-	1300	0.5	-
		40 CFR 50.17 1 hour (primary)	-	-	-	75
PM ₁₀	40 CFR 50.6	24 hour	-	150	-	-
PM _{2.5}	40 CFR 50.13	24 hour (primary)	-	35	-	-
		40 CFR 50.18 Annual (primary)	-	12	-	-
	40 CFR 50.18	24 hour (secondary)	-	35	-	-
		Annual (secondary)	-	15	-	-
Carbon Monoxide	40 CFR 50.8	1 hour (no secondary)	40	-	35	-
		8 hour (no secondary)	10	-	9	-
Ozone	40 CFR 50.10	8 hour (1997)	-	-	0.08	-
	40 CFR 50.15	8 hour (2008)	-	-	0.075	-
Nitrogen Dioxide	40 CFR 50.11	Annual	-	100	0.053	53
		1 hour	-	-	-	100
Lead	40 CFR 50.16	Rolling 3-month Average	-	0.15	-	-

Regulation 61-62.5, Standard No. 5.1, Best Available Control Technology (BACT)/Lowest Achievable Emission Rate (LAER) Applicable to Volatile Organic Compounds

Regulation 61-62.5, Standard No. 5.1 is stricken in its entirety.

Regulation 61-62.5, Standard No. 7, Prevention of Significant Deterioration

Regulation 61-62.5, Standard No. 7, Section (a)(2)(iv)(f) shall be revised as follows:

(f) **Hybrid test for projects that involve multiple types of emissions units.** A significant emissions increase of a regulated NSR pollutant is projected to occur if the sum of the emissions increases for each emissions unit, using the method specified in paragraphs (a)(2)(iv)(c) and (d) as applicable with respect to each emissions unit, for each type of emissions unit equals or exceeds, the significant amount for that pollutant (as defined in paragraph (b)(49)).

Regulation 61-62.5, Standard No. 7, Section (b)(4)(i)(a) shall be revised as follows:

(a) The average rate shall include fugitive emissions to the extent quantifiable, and emissions associated with startups, shutdowns, and malfunctions.

Regulation 61-62.5, Standard No. 7, Section (b)(4)(ii)(a) shall be revised as follows:

(a) The average rate shall include fugitive emissions to the extent quantifiable, and emissions associated with startups, shutdowns, and malfunctions.

Regulation 61-62.5, Standard No. 7, Section (b)(5)(ii)(b) shall be revised as follows:

(b) Is subject to 40 CFR 52.21 or under regulations approved pursuant to 40 CFR 51.166.

Regulation 61-62.5, Standard No. 7, Section (b)(8) shall be revised as follows:

(8) **“Best available control technology (BACT)”** means an emissions limitation (including a visible emission standard) based on the maximum degree of reduction for each pollutant subject to regulation under the Clean Air Act which would be emitted from any proposed major stationary source or major modification which the Department, on a case-by-case basis, taking into account energy, environmental, and economic impacts and other costs, determines is achievable for such source or modification through application of production processes or available methods, systems, and techniques, including fuel cleaning or treatment or innovative fuel combustion techniques for control of such pollutant. In no event shall application of BACT result in emissions of any pollutant which would exceed the emissions allowed by any applicable standard under 40 CFR 60 and 61. If the Department determines that technological or economic limitations on the application of measurement methodology to a particular emissions unit would make the imposition of an emissions standard infeasible, a design, equipment, work practice, operational standard, or combination thereof, may be prescribed instead to satisfy the requirement for the application of BACT. Such standard shall, to the degree possible, set forth the emissions reduction achievable by implementation of such design, equipment, work practice or operation, and shall provide for compliance by means which achieve equivalent results.

Regulation 61-62.5, Standard No. 7, Section (b)(15) shall be revised as follows:

(15) **“Construction”** means any physical change or change in the method of operation (including fabrication, erection, installation, demolition, or modification of an emissions unit) that would result in a change in emissions.

Regulation 61-62.5, Standard No. 7, Section (b)(30)(v) shall be added as follows:

(v) Fugitive emissions shall not be included in determining, for any of the purposes of this section whether a physical change in or change in the method of operation of a major stationary source is a major modification, unless the source belongs to one of the source categories listed in paragraph b(32)(iii) of this section.

Regulation 61-62.5, Standard No. 7, Section (b)(32)(i)(a) shall be revised as follows:

(a) Any of the following stationary sources of air pollutants which emits, or has the potential to emit, 100 tpy or more of any regulated NSR pollutant: Fossil fuel-fired steam electric plants of more than 250 million British thermal units per hour heat input, coal cleaning plants (with thermal dryers), kraft pulp mills, portland cement plants, primary zinc smelters, iron and steel mill plants, primary aluminum ore reduction plants, primary copper smelters, municipal incinerators capable of charging more than 250 tons of refuse per day, hydrofluoric, sulfuric, and nitric acid plants, petroleum refineries, lime plants, phosphate rock processing plants, coke oven batteries, sulfur recovery plants, carbon black plants (furnace process), primary lead smelters, fuel conversion plants, sintering plants, secondary metal production plants, chemical process plants (which does not include ethanol production facilities that produce ethanol by natural fermentation included in North American Industrial Classification System (NAICS) codes 325193 or 312140), fossil fuel boilers (or combinations thereof) totaling more than 250 million British thermal units per hour heat input, petroleum storage and transfer units with a total

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storage capacity exceeding 300,000 barrels, taconite ore processing plants, glass fiber processing plants, and charcoal production plants;

Regulation 61-62.5, Standard No. 7, Section (b)(34)(iii)(c) shall be revised as follows:

(c) It occurs within five years before construction on the particular change commences.

Regulation 61-62.5, Standard No. 7, Section (b)(34)(iii)(d) shall be added as follows:

(d) As it pertains to an increase or decrease in fugitive emissions (to the extent quantifiable), it occurs at an emissions unit that is part of one of the source categories listed in paragraph (b)(32)(iii) of this section or it occurs at an emission unit that is located at a major stationary source that belongs to one of the listed source categories.

Regulation 61-62.5, Standard No. 7, Section (b)(34)(vi)(b) shall be revised as follows:

(b) It is federally enforceable at and after the time that actual construction on the particular change begins;

Regulation 61-62.5, Standard No. 7, Section (b)(34)(vi)(c) shall be revised as follows:

(c) It has approximately the same qualitative significance for public health and welfare as that attributed to the increase from the particular change; and

Regulation 61-62.5, Standard No. 7, Section (b)(41)(ii)(b) shall be revised as follows:

(b) Shall include fugitive emissions to the extent quantifiable and emissions associated with startups, shutdowns, and malfunctions; and

Regulation 61-62.5, Standard No. 7, Section (i)(3) shall be revised as follows:

(3) The requirements of paragraphs (k), (m), and (o) shall not apply to a major stationary source or major modification with respect to a particular pollutant, if the allowable emissions of that pollutant from the source, or the net emissions increase of that pollutant from the modification:

Regulation 61-62.5, Standard No. 7, Section (i)(4) shall be revised as follows:

(4) The requirements of paragraphs (k), (m), and (o) as they relate to any maximum allowable increase for a Class II area shall not apply to a major modification at a stationary source that was in existence on March 1, 1978, if the net increase in allowable emissions of each regulated NSR pollutant from the modification after the application of BACT would be less than fifty (50) tpy.

Regulation 61-62.5, Standard No. 7, Section (i)(8)(ii) shall be revised as follows:

(ii) The requirements for air quality monitoring of PM₁₀ in paragraphs (m)(1), (m)(1)(ii), (m)(1)(iv), and (m)(3) shall apply to a particular source or modification if the owner or operator of the source or modification submits an application for a permit under this section after June 1, 1988 and no later than December 1, 1988. The data shall have been gathered over at least the period from February 1, 1988 to the date the application becomes otherwise complete in accordance with the provisions set forth under paragraph (m)(1)(viii), except that if the Department determines that a complete and adequate analysis can be accomplished with monitoring data over a shorter period (not to be less than four (4) months), the data that paragraph (m)(1)(iii) requires shall have been gathered over a shorter period.

Regulation 61-62.5, Standard No. 7, Section (i)(10) shall be revised as follows:

(10) The requirements in paragraph (k)(2) shall not apply to a stationary source or modification with respect to any maximum allowable increase for PM₁₀ if:

Regulation 61-62.5, Standard No. 7, Section (i)(10)(i) shall be revised as follows:

(i) The owner or operator of the source or modification submitted an application for a permit under this section before the provisions embodying the maximum allowable increases for PM₁₀ took effect in an implementation plan to which this section applies; and

Regulation 61-62.5, Standard No. 7, Section (m)(1)(i)(a) shall be revised as follows:

(a) For the source, each pollutant that it would have the potential to emit in a significant amount;

Regulation 61-62.5, Standard No. 7, Section (n)(1) shall be revised as follows:

(1) With respect to a source or modification to which paragraphs (j), (l), (n), and (p) apply, such information shall include:

Regulation 61-62.5, Standard No. 7, Section (u)(4) shall be revised as follows:

(u)(4) In the case of a source or modification which proposes to construct in a Class III area, emissions from which would cause or contribute to air quality exceeding the maximum allowable increase applicable if the area were designated a Class II area, and where no standard under Section 111 of the Clean Air Act has been promulgated for such source category, the Administrator must approve the determination of BACT as set forth in the permit.

Regulation 61-62.5, Standard No. 7, Section (aa)(3)(ii) shall be revised as follows:

(ii) Calculations of the baseline actual emissions (with supporting documentation). Baseline actual emissions are to include emissions associated not only with operation of the unit, but also emissions associated with startup, shutdown, and malfunction.

Regulation 61-62.5, Standard No. 7, Section (aa)(6)(ii) shall be revised as follows:

(ii) For newly constructed units (which do not include modification to existing units) on which actual construction began after the 24-month period, the emissions must be added to the PAL level in an amount equal to the potential to emit of the units.

Regulation 61-62.5, Standard No. 7, Section (aa)(8)(ii)(b)(2) shall be revised as follows:

(2) Reduce the PAL consistent with any other requirement, that is enforceable as a practical matter, and that the state may impose on the major stationary source under the State Implementation Plan; and

Regulation 61-62.5, Standard No. 7.1, Section (c)(2)(A)(i) shall be revised as follows:

(i) The average rate shall include fugitive emissions to the extent quantifiable, and emissions associated with startups, shutdowns, and malfunctions.

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Regulation 61-62.5, Standard No. 7.1, Section (c)(2)(B)(i) shall be revised as follows:

(i) The average rate shall include fugitive emissions to the extent quantifiable, and emissions associated with startups, shutdowns, and malfunctions.

Regulation 61-62.5, Standard No. 7.1, Section (c)(11)(B)(ii) shall be revised as follows:

(ii) Shall include fugitive emissions to the extent quantifiable, and emissions associated with startups, shutdowns, and malfunctions; and

Regulation 61-62.5, Standard No. 7.1, Section (d)(1)(C)(v)(b)(2) shall be added as follows:

(2) For any emissions unit that has been operating for a consecutive period of at least 12 months but less than 24 months on the base year inventory date, based on the unit's potential to emit, emissions shall be calculated to equal the amount needed to complete a 24 month period on the base year inventory date.

Regulation 61-62.5, Standard No. 7.1, Section (i)(6)(ii) shall be revised as follows:

(ii) For newly constructed units (which do not include modifications to existing units) on which actual construction began after the 24-month period, the emissions must be added to the PAL level in an amount equal to the potential to emit of the units.

Regulation 61-62.5, Standard No. 8, Section II.E.Table shall be revised as follows:

Chemical Name	CAS Number	Category	Maximum Allowable 24-Hour Average Concentration ($\mu\text{g}/\text{m}^3$)*
Acetaldehyde	75-07-0	2	1800.00
Acetamide	60-35-5	3	+
Acetic Anhydride	108-24-7	1	500.00
Acetonitrile	75-05-8	1	1750.00
Acetophenone	98-86-2	3	+
2-Acetylaminofluorene	53-96-3	3	+
Acrolein	107-02-8	3	1.25
Acrylamide	79-06-1	2	0.30
Acrylic Acid	79-10-7	3	147.50
Acrylonitrile	107-13-1	3	22.50
Aldicarb	116-06-3	2	6.00
Allyl Chloride	107-05-1	2	30.00
p-Aminodiphenyl (4-Aminobiphenyl)	92-67-1	3	0.00
Ammonium Chloride	12125-02-9	1	250.00

Chemical Name	CAS Number	Category	Maximum Allowable 24-Hour Average Concentration ($\mu\text{g}/\text{m}^3$)*
Aniline	62-53-3	3	50.00
o-Anisidine	90-04-0	3	2.50
p-Anisidine	104-94-9	3	2.50
Antimony Compounds	>	1	2.50
Arsenic Pentoxide	1303-28-2	3	1.00
Arsenic	7440-38-2	3	1.00
Benzene	71-43-2	3	150.00
Benzidine	92-87-5	3	0.00
Benzotrichloride	98-07-7	3	300.00
Benzyl Chloride	100-44-7	3	25.00
Beryllium Oxide	1304-56-9	3	0.01
Beryllium Sulfate	13510-49-1	3	0.01
Beryllium	7440-41-7	3	0.01
Biphenyl	92-52-4	3	6.00
Bis(Chloromethyl) Ether	542-88-1	3	0.03
Bis(2-ethylhexyl)phthalate (DEHP)	117-81-7	3	25.00
Bromoform	75-25-2	3	25.85
1,3-Butadiene	106-99-0	3	110.50
1-Butanethiol (n-Butyl Mercaptan)	109-79-5	2	15.00
n-Butylamine	109-73-9	3	75.00
Cadmium Oxide	1306-19-0	3	0.25
Cadmium Sulfate	10124-36-4	3	0.20
Cadmium	7440-43-9	3	0.25
Calcium Cyanamide	156-62-7	3	2.50
Caprolactam, vapor	105-60-2	1	500.00
Caprolactam, dust	105-60-2	1	25.00
Captan	133-06-2	3	25.00
Carbaryl	63-25-2	3	25.00

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Chemical Name	CAS Number	Category	Maximum Allowable 24-Hour Average Concentration ($\mu\text{g}/\text{m}^3$)*
Carbon Disulfide	75-15-0	3	150.00
Carbon Tetrachloride	56-23-5	3	150.00
Carbonyl Sulfide	463-58-1	3	12250.00
Catechol	120-80-9	3	297.00
Chloramben	133-90-4	3	+
Chlordane	57-74-9	3	2.50
Chlorine	7782-50-5	1	75.00
Chloroacetic Acid	79-11-8	3	900.00
2-Chloroacetophenone	532-27-4	1	7.50
Chlorobenzene	108-90-7	3	1725.00
Chlorobenzilate	510-15-6	3	+
Chloroform	67-66-3	3	250.00
Chloromethyl Methyl Ether	107-30-2	3	+
p-Chloronitrobenzene	100-00-5	3	5.00
Chloroprene	126-99-8	3	175.00
Chromium (+6) Compounds	>	3	2.50
Cobalt Compounds	>	3	0.25
Coke Oven Emissions	>	3	+
Cresols/cresylic acid and mixture	1319-77-3	3	220.00
m-Cresol	108-39-4	3	110.50
o-Cresol	95-48-7	3	110.50
p-Cresol	106-44-5	3	110.50
Cumene	98-82-8	2	9.00 #
Cyanamide	420-04-2	1	50.00
Cyanic Acid	420-05-3	1	500.00
Cyanide	57-12-5	1	125.00
Cyanide compounds ¹	>	1	+
Cyanoacetamide	107-91-5	1	125.00

Chemical Name	CAS Number	Category	Maximum Allowable 24-Hour Average Concentration ($\mu\text{g}/\text{m}^3$)*
Cyanogen	460-19-5	1	500.00
2,4-D,salts and esters	94-75-7	3	50.00
DDE	3547-04-4	3	+
Diazomethane	334-88-3	3	2.00
Dibenzofuran	132-64-9	3	+
1,2-Dibromo-3-chloropropane	96-12-8	3	0.05
Dibutylphthalate	84-74-2	3	25.00
p-Dichlorobenzene	106-46-7	2	4500.00
3,3 -Dichlorobenzidine	91-94-1	3	0.15
1,3-Dichloropropene	542-75-6	3	20.00 #
Dichlorvos	62-73-7	3	4.52
Diethanolamine	111-42-2	2	129.00
n,n-Diethylaniline (n,n-Dimethylaniline)	121-69-7	2	250.00
Diethyl Phthalate	84-66-2	3	25.00
Diethyl Sulfate	64-67-5	3	+
Diisodecyl Phthalate	2671-40-0	2	50.00
3,3-Dimethoxybenzidine	119-90-4	3	0.30
3,3'-Dimethyl Benzidine	119-93-7	3	+
Dimethyl Carbamoyl Chloride	79-44-7	3	+
Dimethyl Formamide	68-12-2	2	300.00
1,1-Dimethyl Hydrazine	57-14-7	3	5.00
1,2-Dimethyl Hydrazine	540-73-8	3	5.00
Dimethyl Phthalate	131-11-3	3	25.00
Dimethyl Sulfate	77-78-1	3	2.50
4-Dimethylaminoazobenzene	60-11-7	3	125.00
m-Dinitrobenzene	99-65-0	2	10.00
4,6-Dinitro-o-cresol and salts	534-52-1	2	2.00
2,4-Dinitrophenol	51-28-5	3	+

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Chemical Name	CAS Number	Category	Maximum Allowable 24-Hour Average Concentration ($\mu\text{g}/\text{m}^3$)*
2,4-Dinitrotoluene	121-14-2	3	1.50
Dioctyl Phthalate	117-84-0	2	50.00
1,4-Dioxane	123-91-1	3	450.00
1,2-Diphenylhydrazine	122-66-7	3	+
Epichlorohydrin	106-89-8	3	50.00
1,2-Epoxybutane	106-88-7	3	+
Ethanethiol	75-08-1	2	10.00
Ethanolamine	141-43-5	1	200.00
Ethyl Acrylate	140-88-5	3	102.50
Ethyl Benzene	100-41-4	2	4350.00
Ethyl Chloride	75-00-3	2	26400.00
Ethylene Dibromide	106-93-4	2	770.00
Ethylene Dichloride	107-06-2	3	200.00
Ethylene Glycol	107-21-1	3	650.00
Ethylene Oxide	75-21-8	3	10.00
Ethylene Thiourea	96-45-7	3	+
Ethylene Imine	151-56-4	3	5.00
Ethylidene Dichloride	75-34-3	3	2025.00
Formaldehyde	50-00-0	2	15.00
Formamide	75-12-7	1	750.00
Formic Acid	64-18-6	1	225.00
Furfural	98-01-1	1	200.00
Furfuryl Alcohol	98-00-0	2	400.00
Glycidaldehyde	765-34-4	3	75.00
Glycol Ethers ² (mono- and di- ethers of diethylene glycol or triethylene glycol)	>	1	+
Glycol Ethers ² (mono- and di- ethers of ethylene glycol)	>	3	+
Heptachlor	76-44-8	3	2.50
Hexachlorobenzene	118-74-1	3	+

Chemical Name	CAS Number	Category	Maximum Allowable 24-Hour Average Concentration ($\mu\text{g}/\text{m}^3$)*
Hexachlorobutadiene	87-68-3	3	1.20
Hexachlorocyclohexane (multiple isomers)	608-73-1	2	5.00
Hexachlorocyclopentadiene	77-47-4	3	0.50
Hexachloroethane	67-72-1	3	48.50
Hexachloronaphthalene	1335-87-1	3	1.00
Hexamethylene-1,6-diisocyanate	822-06-0	2	0.34
Hexamethylphosphoramide	680-31-9	3	14.50
Hexane	110-54-3	3	900.00
Hydrazine	302-01-2	3	0.50
Hydrochloric Acid	7647-01-0	1	175.00
Hydrogen Cyanide	74-90-8	1	250.00
Hydrogen Fluoride (HF)	7664-39-3	3	2.05
Hydrogen Sulfide	7783-06-4	2	140.00
Hydroquinone	123-31-9	2	20.00
Isophorone	78-59-1	2	250.00
Isopropylamine	75-31-0	1	300.00
Kepone (Chlordecone)	143-50-0	3	0.00
Ketene	463-51-4	3	4.50
Lead Arsenate	7645-25-2	3	0.75
Lead (+2) Arsenate	7784-40-9	3	0.75
Lindane	58-89-9	3	2.50
Malathion	121-75-5	2	100.00
Maleic Anhydride	108-31-6	2	10.00
Manganese Compounds	>	3	25.00
Mercury	7439-97-6	3	0.25
Methanol	67-56-1	3	1310.00
Methoxychlor	72-43-5	3	50.00
Methyl Bromide	74-83-9	3	100.00

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Chemical Name	CAS Number	Category	Maximum Allowable 24-Hour Average Concentration ($\mu\text{g}/\text{m}^3$)*
Methyl Chloride	74-87-3	3	515.00
Methyl Chloroform (1,1,1-Trichloroethane)	71-55-6	3	9550.00
Methylene Biphenyl Isocyanate	101-68-8	2	2.00
4,4-Methylene Bis(2-chloroaniline)	101-14-4	3	1.10
4,4-Methylenedianiline	101-77-9	3	4.00
Methyl Ethyl Ketone (2-Butanone)	78-93-3	1	14750.00
Methyl Hydrazine	60-34-4	3	1.75
Methyl Iodide	74-88-4	3	58.00
Methyl Isobutyl Ketone	108-10-1	2	2050.00
Methyl Isocyanate	624-83-9	3	0.23
Methyl Mercaptan	74-93-1	2	10.00
Methyl Methacrylate	80-62-6	1	10250.00
Methylamine	74-89-5	1	300.00
Methylene Chloride	75-09-2	1	8750.00
Methyl-t-Butyl Ether	1634-04-4	1	+
Mineral Fibers, Fine ³	>	3	+
Mineral Oil Mist (Paraffin Oil)	8012-95-1	3	25.00
Mirex	2385-85-5	3	4500.00
Naphthalene	91-20-3	1	1250.00
a-Naphthylamine	134-32-7	3	0.00
b-Naphthylamine	91-59-8	3	0.00
Nickel Carbonyl	13463-39-3	3	1.75
Nickel Oxide	1313-99-1	3	5.00
Nickel Sulfate	7786-81-4	3	5.00
Nickel	7440-02-0	3	0.50
Nitric Acid	7697-37-2	1	125.00
p-Nitroaniline	100-01-6	3	15.00
Nitrobenzene	98-95-3	3	25.00

Chemical Name	CAS Number	Category	Maximum Allowable 24-Hour Average Concentration ($\mu\text{g}/\text{m}^3$)*
4-Nitrobiphenyl	92-93-3	3	0.00
Nitrogen Mustard	51-75-2	3	0.00
Nitroglycerin	55-63-0	2	5.00
p-Nitrophenol	100-02-7	3	0.00
1-Nitropropane	108-03-2	1	2250.00
2-Nitropropane	79-46-9	3	182.00
p-Nitrosophenol	104-91-6	3	0.00
n-Nitroso-n-methylurea	684-93-5	3	+
n-Nitrosodimethylamine	62-75-9	3	0.00
n-Nitrosomorpholine	59-89-2	3	5000.00
p-Nitrotoluene	99-99-0	3	5.50
Octachloronaphthalene	2234-13-1	3	0.50
Oxalic Acid	144-62-7	2	10.00
Paraquat	1910-42-5	3	0.50
Parathion	56-38-2	3	0.50
Pentachloronitrobenzene (Quintobenzene)	82-68-8	3	+
Pentachlorophenol	87-86-5	2	5.00
Phenol	108-95-2	2	190.00
p-Phenylenediamine	106-50-3	2	1.00
Phenylhydrazine	100-63-0	2	200.00
Phosgene (Carbonyl Chloride)	75-44-5	2	4.00
Phosphine	7803-51-2	3	2.09
Phosphoric Acid	7664-38-2	1	25.00
Phosphorus	7723-14-0	2	0.50
Phthalic Anhydride	85-44-9	3	30.30
Picric Acid	88-89-1	2	1.00
Polychlorinated Biphenyls (PCB) (multiple compounds)	>	3	2.50
Polycyclic Organic Matter ⁴	>	3	160.00

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Chemical Name	CAS Number	Category	Maximum Allowable 24-Hour Average Concentration ($\mu\text{g}/\text{m}^3$)*
1,3-Propane Sultone	1120-71-4	3	+
b-Propiolactone	57-57-8	3	7.50
Propionaldehyde	123-38-6	1	+
Propoxur	114-26-1	3	2.50
Propylene Dichloride	78-87-5	3	1750.00
Propylene Oxide	75-56-9	3	250.00
1,2-Propylenimine	75-55-8	3	23.35
Pyrethrin I	121-21-1	3	25.00
Pyrethrin II	121-29-9	3	25.00
Pyrethrum	8003-34-7	2	50.00
Quinoline	91-22-5	3	+
Quinone	106-51-4	3	2.00
Rotenone	83-79-462	2	50.00
Selenium Compounds	>	3	1.00
Sodium Hydroxide ⁵	1310-73-2	1	50.00
Styrene	100-42-5	1	5325.00
Styrene Oxide	96-09-3	3	+
Sulfuric Acid	7664-93-9	2	10.00
Tetrachlorinated Dibenzo-p-dioxins	1746-01-6	3	0.00
1,1,2,2-Tetrachloroethane (Acetylene Tetrachloride)	79-34-5	3	35.00
Tetrachloroethylene (Perchloroethylene)	127-18-4	2	3350.00
Titanium Tetrachloride	7550-45-0	1	2500.00
Toluene	108-88-3	3	2000.00
2,4-Toluenediamine	95-80-7	3	+
Toluene Diisocyanate	26471-62-5	2	0.40
Toluene-2,4- diisocyanate	584-84-9	2	0.40
o-Toluidine	95-53-4	3	43.85
Toxaphene	8001-35-2	3	2.50

Chemical Name	CAS Number	Category	Maximum Allowable 24-Hour Average Concentration ($\mu\text{g}/\text{m}^3$)*
1,2,4-Trichlorobenzene	120-82-1	2	400.00
1,1,2-Trichloroethane	79-00-5	3	273.00
Trichloroethylene	79-01-6	1	6750.00
2,4,5-Trichlorophenol	95-95-4	3	+
2,4,6-Trichlorophenol	88-06-2	3	+
Triethylamine	121-44-8	3	207.00
Trifluralin	1582-09-8	3	+
2,2,4-Trimethylpentane	540-84-1	1	8750.00
Urethane (Carbamic Acid Ethyl Ester)	51-79-6	2	5000.00
Vinyl Acetate	108-05-4	3	176.00
Vinyl Bromide	593-60-2	3	100.00
Vinyl Chloride	75-01-4	3	50.00
Vinyl Fluoride	75-02-5	2	19.00
Vinylidene chloride	75-35-4	3	99.00
Xylene	1330-20-7	2	4350.00
m-Xylene	108-38-3	2	4350.00
o-Xylene	95-47-6	2	4350.00
p-Xylene	106-42-3	2	4350.00
Xylidine	1300-73-8	3	50.00

Regulation 61-62.60, South Carolina Designated Facility Plan and New Source Performance Standards

Regulation 61-62.60, Subpart LLL, Title is revised as follows:

Subpart LLL - “Standards of Performance for Onshore Natural Gas Processing: SO₂ Emissions”

The provisions of 40 CFR Part 60 Subpart LLL, as originally published in the Federal Register and as subsequently amended upon publication in the Federal Register as listed below, are incorporated by reference as if fully repeated herein.

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40 CFR Part 60 Subpart LLL			
Federal Register Citation	Volume	Date	Notice
Original Promulgation	Vol. 50	October 1, 1985	[50 FR 40160]
Revision	Vol. 54	February 14, 1989	[54 FR 6679]
Revision	Vol. 65	October 17, 2000	[65 FR 61744]
Revision	Vol. 77	August 16, 2012	[77 FR 49490]

Regulation 61-62.70, Title V Operating Permit Program

Regulation 61-62.70, Section 70.5(c) is revised as follows:

(c) Standard application form and required information. Information as described below for each emissions unit at a Part 70 source shall be included in a Department approved application. Air emissions or air emission units that are insignificant are exempted. However, for these emission units which are exempted, a list of the emission units must be included in the application. "Insignificant Activity" generally means any air emissions or air emissions unit at a plant that has the potential to emit less than 5 tpy of any criteria pollutant or less than 1000 pounds per month of any compound listed in Regulation 61-62.5, Standard No. 8, Toxic Air Pollutants. The Department may determine that certain types or classes of units may be considered insignificant at higher emission levels, or that, due to the nature of the pollutant(s) emitted, a unit may be considered significant at a lower emission rate. The Department shall maintain a list subject to EPA approval of air emissions or air emission units which are considered to be insignificant. No emission or activity can be excluded from a Title V operating permit to the extent it is needed to determine compliance with an applicable requirement, as defined under Section 70.2(f) An application may not omit information needed to determine the applicability of, or to impose, any applicable requirement, or to evaluate the fee amount required under the schedule approved pursuant to Section 70.9. The Department approved forms and attachments shall include the elements specified below:

Regulation 61-62.70, Section 70.6(c)(4) is revised as follows:

(4) Progress reports consistent with an applicable schedule of compliance and Section 70.5(c)(8) to be submitted at least semi-annually, or at a more frequent period if specified in the applicable requirement or by the Department. Such progress reports shall contain the following:

Fiscal Impact Statement:

The Department estimates that there will be no increased costs to the State or its political subdivisions as a result of the amendments to Regulation 61-62, *Air Pollution Control Regulations and Standards*, which are being made to streamline State requirements and therefore reduce economic burden.

Statement of Need and Reasonableness:

This Statement of Need and Reasonableness was determined by staff analysis pursuant to S.C. Code Section 1-23-115(C)(1)-(3) and (9)-(11).

DESCRIPTION OF REGULATION:

Purpose: The amendments to Regulation 61-62, *Air Pollution Control Regulations and Standards*, will support the Department's goal of promoting and protecting the health of the public and the environment in a more efficient and effective manner. These amendments will expand and clarify definitions applicable to air pollution control regulations and standards; streamline permitting options; clarify reporting requirements; and provide corrections for consistency, clarification, reference, punctuation, codification, formatting, and spelling to improve the overall text of Regulation 61-62.

Legal Authority: The legal authority for Regulation 61-62, *Air Pollution Control Regulations and Standards*, is S.C. Code Section 48-1-10 *et seq.* In accordance with 1976 Code Section 1-23-120(A), legislative review is required.

Plan for Implementation: The amendments will take effect upon approval of the South Carolina General Assembly and publication as final regulations in the *State Register*. A copy of Regulation 61-62, *Air Pollution Control Regulations and Standards*, that incorporates these amendments, will be made available electronically on the Department's website at <http://www.scdhec.gov/Agency/RegulationsAndUpdates/LawsAndRegulations/Air/>. The Department will also send an email to stakeholders and will communicate with affected facilities during the permitting process.

DETERMINATION OF NEED AND REASONABLENESS OF THE REGULATION AMENDMENTS BASED ON ALL FACTORS HEREIN AND EXPECTED BENEFITS:

The Department amended Regulation 61-62, *Air Pollution Control Regulations and Standards*, to codify and update "General" language.

The Department also amended Regulation 61-62.5, Standard No. 1, *Emissions from Fuel Burning Operations*, to exempt owners or operators of propane fired units from having to maintain a startup and shutdown log in order to be consistent with the same exemption already allowed for owners or operators of natural gas fired units.

The Department also amended Regulation 61-62.5, Standard No. 2, *Ambient Air Quality Standards*, to remove from the list of pollutants Gaseous Fluorides (as hydrogen fluoride (HF)). HF is a federal Hazardous Air Pollutant or HAP. It has no primary or secondary national ambient air quality standard and therefore is more appropriately regulated under Regulation 61-62.5, Standard No. 8, *Toxic Air Pollutants* rather than Standard No. 2.

The Department repealed Regulation 61-62.5, Standard No. 5.1, *Best Available Control Technology (BACT)/Lowest Achievable Emission Rate (LAER) Applicable to Volatile Organic Compounds*. Because other regulations such as Regulation 61-62.5, Standard No. 5, *Volatile Organic Compounds*; Regulation 61-62.5, Standard No. 7, *Prevention of Significant Deterioration*; and Regulation 61-62.5, Standard No. 7.1, *Nonattainment New Source Review*, are available to limit VOC emissions, the Department finds that Regulation 61-62.5, Standard No. 5.1 is no longer necessary.

The Department also amended Regulation 61-62.5, Standard No. 7, *Prevention of Significant Deterioration*, to modify the criteria for creditability of an increase or decrease in actual emissions and modify various text to create consistency with 40 CFR 52.21, *Prevention of Significant Deterioration of Air Quality*.

The Department also amended Regulation 61-62.5, Standard No. 7.1, *Nonattainment New Source Review (NSR)*, to add timing flexibility language to the section of the regulation governing the calculation of emission offsets. Because of public notice requirements, the Department was unable to submit these revisions for approval as part of the "2013 General Assembly Package" but agreed the changes would be submitted for approval as part of the current set of revisions (2014 General Assembly Package).

The Department also amended Regulation 61-62.5, Standard No. 8, *Toxic Air Pollutants*, to add maximum allowable concentration time frame of "24-Hour Average" to table and add Hydrogen Fluoride (HF) as a pollutant (See Standard No. 2 amendment above for justification).

The Department also amended Regulation 61-62.60, *South Carolina Designated Facility Plan and New Source Performance Standards*, to correct an error in punctuation.

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The Department also amended Regulation 61-62.70, *Title V Operating Permit Program*, to make a change to Section 62.70.5(c) to correct a unit of measurement error for consistency with language in Regulation 61-62.5, Standard No. 8, *Toxic Air Pollutants*.

The intent of these amendments is to simplify and correct certain issues in our regulatory guidelines to support the Department's goal of promoting and protecting the health of the public and the environment in a more efficient and effective manner. There would be no detrimental effect on the environment and public health if these amendments to Regulation 61-62, *Air Pollution Control Regulations and Standards*, and the SIP are adopted.

DETERMINATION OF COSTS AND BENEFITS:

There will be no increased cost to the State or its political subdivisions resulting from this revision. Amendments to Regulation 62-61, *Air Pollution Control Regulations and Standards*, and the SIP will help streamline state requirements within current Prevention of Significant Deterioration, New Source Review and Title V Permit Program standards.

The amendments will benefit the regulated community by clarifying the regulations and increasing their ease of use which will reduce economic burden.

UNCERTAINTIES OF ESTIMATES:

There are no uncertainties of estimates relative to the costs to the State or its political subdivisions.

EFFECT ON ENVIRONMENT AND PUBLIC HEALTH:

The amendments to Regulation 61-62, *Air Pollution Control Regulations and Standards*, seek to provide continued protection of the environment and public health.

DETRIMENTAL EFFECT ON THE ENVIRONMENT AND PUBLIC HEALTH IF THE REGULATIONS ARE NOT IMPLEMENTED:

There will be no detrimental effect on the environment and/or public health associated with these revisions. To the contrary, the state's delegated authority to implement programs beneficial to public health and the environment may be compromised if these amendments were not adopted. Permit streamlining and regulatory text clarification seek to have a positive effect on both the environment and public health.

Statement of Rationale:

The Department began this process by developing an internal workgroup to evaluate the existing air quality regulations to provide clarification, delete or update obsolete requirements, and correct typographical errors as necessary and in response to comments received.

The Department also held an external stakeholder meeting to take recommendations and comments on those regulatory amendments identified by the workgroup. Several comments were received during the external stakeholder process and they were taken into consideration in developing the amendments to Regulation 61-62 and the SIP. These regulatory amendments will provide clarity and specificity to the existing regulations, omit obsolete requirements, and provide additional permitting options to the regulated community.

Document No. 4496
DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL
CHAPTER 61

Statutory Authority: 1976 Code Sections 44-75-10 et seq.

61-96. Athletic Trainers.

Synopsis:

Regulation 61-96 was last substantively amended on May 28, 2010. The purpose of this regulation is to ensure the highest degree of professional conduct by those engaged in offering athletic trainer services to the public and to safeguard the public's health, safety, and welfare by establishing minimum qualifications for those individuals wishing to offer athletic trainer services to the public. The purpose of this amendment is to update the nomenclature and renewal notification requirements. In addition, stylistic changes were included for corrections for clarity, readability, grammar and overall improvement of the text of the regulation.

A Notice of Drafting was published in the *State Register* on May 23, 2014.

Changes made at the request of the House Medical,
 Military, Public and Municipal Affairs Committee
 by letter dated February 24, 2015:

Section J.2.b and J.3.a. Changes were made regarding continuing education requirements.

Section-by-Section Discussion of Amendments:

Table of Contents. The Table is revised to bring it current with changes in the text.

Section A. Purpose, Administration and Definitions.

No changes

Section B. Description of the Profession.

No changes.

Section C. Certification.

Section 4. was revised to update the renewal notification process and requirement of maintaining current update information.

Section 5 was revised to clarify the language which specifies the existing addition of late fee and restoration fee.

Section D. Fees.

Section 1.b. was revised language to current accepted parlance.

Section 1.c. was revised language to current accepted parlance.

Section 1.e. was revised to clarify the language which specifies the existing addition of a late fee.

Section 1.f. was revised to clarify the language which specifies the existing addition of a restoration fee.

Section 2. was revised, combined and renumbered to reflect a single fee for both items combined.

Section E. Reciprocity.

No changes.

Section F. Exemption from Certification.

No changes.

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Section G. Grandfather Provision.

No changes.

Section H. Change of Name and Address.

Section 2. was revised to update the process for updating one's address

Section I. Professional Identification.

Section 2. revised "said" to "original".

Section J. Continuing Education.

Section 2.a. was revised to allow Athletic Trainers' Advisory Committee (SCATA) to approve additional CPR courses.

Section 2.b. was revised to use SCATA acronym since it was mention already in Section 2.a. and to correct grammar.

Section K. Revocation, Suspension and Denial of Certification; Penalties; Appeals Process.

No changes.

Section L. Athletic Trainers' Advisory Committee.

No changes.

Section M. Responsibilities of the Department.

No changes.

Instructions: Replace Regulation 61-96, Athletic Trainers in its entirety.

Text:

61-96. Athletic Trainers.

(Statutory Authority: Sections 44-75-10 et seq., S.C. Code of Laws, 1976, as amended)

Contents:

61-96.A. Purpose, Administration and Definitions.

61-96.B. Description of the Profession.

61-96.C. Certification.

61-96.D. Fees.

61-96.E. Reciprocity.

61-96.F. Exemption from Certification.

61-96.G. Grandfather Provision.

61-96.H. Change of Name and Address.

61-96.I. Professional Identification.

61-96.J. Continuing Education.

61-96.K. Revocation, Suspension and Denial of Certification; Penalties; Appeals Process.

61-96.L. Athletic Trainers Advisory Committee.

61-96.M. Responsibilities of the Department.

A. Purpose, Administration and Definitions.

1. Purpose: The purpose of this regulation is to assure the highest degree of professional conduct by those engaged in offering athletic trainer services to the public and to safeguard the public's health, safety, and welfare

by establishing minimum qualifications for those individuals wishing to offer athletic trainer services to the public.

2. Administration: All regulations pertaining to the administration of the "Athletic Trainers' Act of South Carolina", Sections 44-75-10 et seq., S.C. Code of Laws, 1976, as amended, shall be administered by the South Carolina Department of Health and Environmental Control, 2600 Bull Street, Columbia, South Carolina.

3. Definitions: For the purpose of these Standards, the following definitions shall apply:

a. "Law" as used in these rules shall mean the "Athletic Trainers' Act of South Carolina", Sections 44-75-10 et seq., S.C. Code of Laws, 1976, as amended.

b. "Board" shall mean the Board of the South Carolina Department of Health and Environmental Control.

c. "Department" means the South Carolina Department of Health and Environmental Control.

d. "Committee" shall mean the South Carolina Athletic Trainers' Advisory Committee.

e. "Athletic Trainer" means a person with specific qualifications as set forth in Section 44-75-50 of the Law who, upon the advice and consent of a licensed physician, carries out the practice of care, prevention, and physical rehabilitation of athletic injuries, and who, in carrying out these functions, may use physical modalities, including, but not limited to, heat, light, sound, cold, electricity, or mechanical devices related to rehabilitation and treatment.

f. "Certificate" means official acknowledgement by the Department that an individual has successfully completed the education and other requirements referred to in the "Athletic Trainers' Act of South Carolina", Sections 44-75-10 et seq., which entitles that individual to perform the functions and duties of an athletic trainer.

g. "Licensed Physician" means a physician licensed by the South Carolina State Board of Medical Examiners.

h. "Employment of Athletic Trainer" shall mean a person who is engaged as an athletic trainer if the person is employed on a salary or contractual basis by an educational institution, a hospital, rehabilitation clinic, professional organization, or other bona fide athletic organization and performs the duties of an athletic trainer as a major responsibility of this employment.

i. "Advice and Consent of a Licensed Physician" shall mean the general written or oral standing orders and/or protocol signed by a licensed physician.

B. Description of the Profession.

An athletic trainer is an individual who has successfully completed the college or university undergraduate degree and fulfilled the requirements for certification as established by the Board of Certification, Inc., in association with the National Athletic Trainers' Association (NATA), and successfully completed the Athletic Trainers Certification Examination as administered by the Board of Certification, Inc. Through a combination of formal classroom instruction and clinical experience, the athletic trainer is prepared to apply a wide variety of specific health care skills and knowledge within the domains/standards. The seven domains/standards of athletic training from which these specific tasks are measured in the examination are:

1. Direction: The athletic trainer renders services or treatment under the advice and consent of a licensed physician.

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2. Prevention: The athletic trainer understands and uses preventative measures to assure the highest quality of care for every patient.

3. Immediate Care: The athletic trainer provides standard and immediate care procedures used in emergency situations, independent of setting.

4. Clinical Evaluation and Diagnosis: Prior to treatment the athletic trainer assesses the patient's level of function. The patient's input is considered as an integral part of the initial assessment. The athletic trainer follows the standards of clinical practice in an area of diagnostic reasoning and medical decision making.

5. Treatment Rehabilitation and Re-Conditioning: The athletic trainer develops the treatment program and determines the appropriate treatment, rehabilitation and/or reconditioning strategies. The treatment program objectives include long and short term goals and appraisal of those that the patient can realistically be expected to achieve from the program. This assessment measure determines effectiveness of the program and is incorporated into the program.

6. Program Discontinuation: The athletic trainer, in collaboration with the licensed physician, recommends discontinuation of athletic training services when the patient has received optimal benefit of the program. The athletic trainer, at the time of discontinuation, notes the final assessment of the patient's status.

7. Organization and Administration: All services are documented in writing by the athletic trainer and are part of the patient's permanent records. The athletic trainer accepts responsibility of recording details of the patient's health care status.

C. Certification.

1. Requirements: A person who seeks certification as an athletic trainer in the State of South Carolina must successfully complete the Athletic Trainer Certification Examination as administered by the Board of Certification, Inc., and satisfy the following requirements:

- a. Meets the athletic training curriculum requirements of a college or university; and
- b. Submits a certified transcript from the college or university along with the completed application.

2. Applications:

a. Each candidate for certification must file a written application on a form furnished upon request from the Department. The application must be completed in its entirety and must include all relative documents and fees.

b. An application must be completed by the applicant and reviewed by the Department within ninety (90) days of the date that the first document has been received by the Department. Any application not completed within this period will become void. Any consideration of certification after this date will require the applicant to submit a new application, new documents and appropriate fees. The applicant will be notified in writing of approval or denial of request for certification.

c. Once an application is reviewed by the Department, no refund of the application fee shall be issued.

d. Certification will remain current for two (2) years from the issue date.

3. Examination: The applicant must pass the Athletic Trainer Certification Examination as administered by the Board of Certification, Inc., in association with the National Athletic Trainers' Association before a certificate for South Carolina certification can be issued from the Department.

4. Renewal: With renewal being every two (2) years, the Department shall send a renewal application form, sixty (60) days prior to the renewal date, to the last address registered with the Department in the South Carolina Credentialing Information System (CIS), to the person to whom the certification was issued or renewed during the preceding renewal period. The athletic trainer shall then:

- a. Complete the renewal application form;
- b. Submit proof of continuing education credit as detailed in Section J, Continuing Education;
- c. Enclose the renewal fee; and
- d. File the above with the Department prior to the renewal date.

5. Failure to Renew: An athletic trainer who does not file with the Department his or her renewal application by the renewal date will be deemed to have allowed his or her certification to expire. Such certification may be reinstated by the Department, at its discretion, by the payment of an additional late renewal fee, provided the application is made within six (6) months of the renewal date. After six (6) months, an additional restoration fee will be charged to those individuals who wish to restore certification.

6. Reinstatement: A certificate which is revoked for failure to renew may be reinstated at the direction of the Department and the Committee within two (2) years of its expiration date. Any consideration for recertification will necessitate submission of a new application and will require the applicant to meet the then existing requirements.

D. Fees.

To be certified, athletic trainers practicing in the State of South Carolina must pay the fees according to the fee schedule listed below unless otherwise exempted by law. Appropriate fees must be made payable by credit card, check or money order to the South Carolina Department of Health and Environmental Control.

1. Fees:

- (a) Application Fee: The application fee shall be fifty dollars (\$50) due upon receipt of the application.
- (b) Examination Fee: The examination fee will be the current examination fee of the Board of Certification, Inc. (BOC) in association with the National Athletic Trainers' Association. This fee is in addition to the application fee.
- (c) Re-Examination Fee: The re-examination fee shall be the current BOC in association with the National Athletic Trainers' Association re-examination fee.
- (d) Biennial Renewal Fee: The biennial renewal fee shall be forty dollars (\$40) due on the anniversary date of the second year after the applicant is certified. Renewal fees will be due on the anniversary date every two years after that.
- (e) Late Renewal Fees: An additional fifteen (\$15) late renewal fee for a total of fifty-five (\$55) will be charged to those individuals who renew with a six (6) month period after the biennial renewal date.
- (f) Restoration Fee: An additional one-hundred (\$100) restoration fee for a total of one-hundred forty dollars (\$140) will be charged to those individuals who fail to renew within the six (6) month late renewal schedule.

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2. Other Fees:

Duplicate Certificate and ID Certificate Card: Seven dollars (\$7).

E. Reciprocity.

Certification by Reciprocity: A certificate may be issued by the Department to any qualified athletic trainer holding certification in any other state if such other state recognizes the certificate of South Carolina in the same manner. The applicant must meet the following requirements for reciprocal certification:

1. The applicant is currently certified to practice athletic training under the laws of another state or territory.
2. The requirements for said certification are equivalent to those required in South Carolina.
3. The applicant's certificate has not been, and is not presently, suspended or revoked.

F. Exemption from Certification.

No person shall represent him or herself as an athletic trainer unless he or she is certified by the Department, except as otherwise provided in this section. Exemptions apply as follows:

1. Licensed, registered, or certified professionals such as licensed physicians, nurses, physical therapists, and chiropractors practicing their professions are exempt if they do not assert to the public by any title or description as being athletic trainers.

2. A person rendering services that are the same as or similar to those within the scope of practice provided for in the Law is exempt as long as he or she is otherwise now employed or employed in the future as a faculty or staff member at the school in question and does not represent him or herself to be an athletic trainer.

3. Persons employed prior to June 19, 1984 by the State Department of Education, local boards of education, or private secondary or elementary schools for the treatment of injuries received by students participating in school sports activities are exempt.

4. A person serving as a student-trainer or in any similar position if the service is carried out under the supervision of a licensed physician or certified athletic trainer is exempt.

G. Grandfather Provision.

The Department may issue a certificate to an applicant who was actively engaged as an athletic trainer for a two-year period from June 19, 1979 to June 19, 1984. The applicant shall submit the following for documentation:

1. A notarized record of being employed on a salaried basis with an educational institute or bona fide athletic organization for the duration of the institution's school year, or the length of the athletic organization's season and performed the duties of an athletic trainer as the major responsibility of his employment.

2. A certified oath verifying that the documents submitted to the Department are "true and accurate".

3. Payment of an application fee as prescribed by the Department.

H. Change of Name and Address.

1. Change of Name: A request for a change of name from that under which the original certificate was issued shall be accompanied by a certified copy of a marriage certificate, court order or documentation of legal name change and appropriate fee. See fee schedule.

2. Change of Address: Each person who has a certificate shall keep the Department apprised in writing of his or her current name and address his or her contact information in CIS current at all times.

I. Professional Identification.

1. Titles and Abbreviations: A person certified by the Department to practice and perform athletic training in South Carolina may use the title, "State Certified Athletic Trainer and/or the abbreviation S.C.A.T.".

2. Production and Display of Certificate: A person certified by the Department to practice and perform athletic training in South Carolina shall carry said original card at all times, and show said original card when requested.

J. Continuing Education.

1. Definition and Philosophy: Each individual certified as an athletic trainer is responsible for service to the consumer and is accountable to the consumer, the employer, and the profession for evidence of maintaining high levels of skill and knowledge. Continuing education is defined as education beyond the basic preparation required for entry into the profession, directly related to the performance and practice of athletic training.

2. Requirements: Regulations set the requirement for attending and completing two courses during the two (2) year certification period. These courses are as follows:

a. A course in cardiopulmonary resuscitation (CPR) offered by the American Red Cross, or the American Heart Association, or any other CPR course approved by the South Carolina Athletic Trainers' Advisory Committee (SCATA).

b. A designated professional seminar offered yearly by the SCATA at the Association's annual conference.

c. A seminar shall mean two (2) designated courses within the scope of that year's conference.

d. The development of the course content and the monitoring of the courses will be under the supervision of the Committee.

e. At the completion of the appropriate courses during the seminar, a card will be issued to the athletic trainer by a member of the Committee.

f. Equivalent courses may be approved by the Committee.

g. The Committee will set the continuing education standards on an annual basis.

3. Reporting Procedures for Continuing Education: It is the responsibility of the athletic trainer to submit to the Department, by the renewal date of certification, proof of the completion of the continuing education requirements. Documentation shall include:

a. A photocopy of a current CPR card from either the American Red Cross or the American Heart Association or any other CPR course approved by SCATA; and

b. A photocopy of the SCATA professional seminar card, signed by a member of the committee.

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4. Enforcement: Without documentation of the required continuing education, as outlined in J.2 and J.3 above, an athletic trainer's certification will not be renewed at the two-year renewal date. Documentation for the continuing education units must be current at the time of renewal.

5. Appeals: If the athletic trainer is unable to obtain the proper continuing education units by the time of renewal, he/she may submit a letter of appeal with the renewal application. This letter must document the reason(s) the athletic trainer was unable to obtain the necessary continuing education units. The Committee will recommend the course of action to be taken.

K. Revocation, Suspension and Denial of Certification; Penalties; Appeals Process.

1. Standards of Conduct: At the discretion of the Department, athletic trainers may have their certificates suspended or revoked at any time the Department determines that the holder of the certificate no longer meets the prescribed qualifications set forth by the Department or has committed any of the following acts:

a. Has engaged in any conduct considered by the Board or Department to be detrimental to the profession of athletic training;

b. Has used fraud or deceit in procuring or, attempting to procure, a certificate or renewal of a certificate to practice athletic training;

c. Has violated, aided, or abetted others in violation of any provision of the law, or these regulations;

d. Has practiced athletic training without a valid certificate.

2. Penalties:

Any person violating the provisions of Sections 44-75-10 et seq. is guilty of a misdemeanor and upon conviction must be punished by a fine of not less than twenty-five (\$25) nor more than two hundred dollars (\$200).

3. Actions: The Committee may recommend revocation or suspension of a certificate. Revocation may be for a period up to two years.

4. Appeals Process: Decisions to deny, suspend or revoke an athletic trainer's certification becomes the final agency decision fifteen (15) days after notice of the Department decision has been mailed to the applicant or holder of the certificate by certified mail, return receipt requested, unless a written request for final review is filed with the DHEC Board by the applicant or holder of the certificate pursuant to Section 44-1-60 of the S.C. Code of Laws, 1976, as amended, and applicable law.

L. Athletic Trainers' Advisory Committee.

1. Organization: The South Carolina Athletic Trainers' Advisory Committee shall consist of nine members appointed by the Board. Two members must be from the Department, one must be from the State Board of Medical Examiners, four must be certified athletic trainers and two must be from the general public who are not certified or licensed in any health care fields and are not in any way associated with athletic trainers.

2. Officers: The Advisory Committee shall annually elect a chairman and vice-chairman from its membership. These two officers shall have all the privileges of re-election.

3. Meetings: The Committee must meet at least once a year. Additional meetings may be held on call of the chairman or at the written request of two Committee members. A record must be kept of all transactions which have been called for by the chairman and a written report shall be submitted for the minutes at the next regularly

scheduled meeting. A quorum of two thirds of the Committee membership is required for any meeting of the Committee.

M. Responsibilities of the Department.

The South Carolina Department of Health and Environmental Control, with the advice of the Committee, shall:

1. Coordinate with the Committee chairman to develop and distribute an agenda for committee meetings.
2. Post public notices of upcoming Committee meetings per the Freedom of Information Act and notify the media of the meetings. The following statement shall be read by the chairman of the Committee at the beginning of each public meeting: "Let the minutes reflect that, as required by the provisions of the South Carolina Freedom of Information Act, Section 30-4-80(E) of the S.C. Code of Laws, 1976, as amended, notification of this meeting has been given to all persons, organizations, local news media and other news media which have requested such notification".
3. Assure that the Committee's address and telephone number is listed in the state telephone directory.
4. Take Committee meeting minutes, type, and send to the chairman for signature within two weeks after the meeting. The Department will distribute the minutes to committee members within one week after receiving a signature from the chairman.
5. Receive applications for athletic trainer certification and process for routine action. Unusual applications will be brought before the full Committee. If there is a problem, or if the Department needs additional information, the applicant is notified in writing of the delay by the Department.
6. Collect application fees, certification renewal fees, and other fees deemed necessary for the certification program. These fees are non-refundable to the applicant.
7. Maintain a record of each athletic trainer's certification expiration date.
8. Work with the Committee chairman to develop a formal budget for the Committee.
9. Develop and maintain an inquiry log to track all correspondence related to the athletic trainer's certification program and record all complaints.
10. Develop and update a rules and regulations manual for the certification program.
11. Investigate violations and complaints and follow-up with proper legal procedures.

Fiscal Impact Statement:

The regulation will have no substantial fiscal or economic impact on the State or its political subdivisions. Implementation of this regulation will not require additional resources beyond those allowed. There is no anticipated additional cost by the Department or State government due to any inherent requirements of this regulation.

Statement of Need and Reasonableness:

The Department's Bureau of Health Facilities Licensing formulated this statement determined by analysis pursuant to S.C. Code Ann Section 1-23-115 C(1)-(3) and (9)-(11) (2005).

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DESCRIPTION OF REGULATION: R. 61-96, *Athletic Trainers*.

Purpose: The purpose of this amendment is to revise the language and content of the Athletic Trainers Regulation. In addition, stylistic changes were included for corrections for clarity, readability, codification and overall improvement of the text of the regulation.

Legal Authority: 1976 Code Section 44-75-10 et seq.

Plan for Implementation: Upon approval from the S.C. General Assembly and publication as a final regulation in the South Carolina State Register, copies of the R.61-96, including these amendments, will be available electronically on the South Carolina Legislature Online website and under the Health Facilities & Services category of the Department's regulation development website at <http://www.scdhec.gov/Agency/RegulationsAndUpdates/LawsAndRegulations/>. Printed copies will be available for a fee from the Department's Freedom of Information Office. Staff will educate the regulated community on the provisions of the Act and the requirements of the regulation.

DETERMINATION OF NEED AND REASONABLENESS OF THE REGULATION BASED ON ALL FACTORS HEREIN AND EXPECTED BENEFITS:

The Department last amended R.61-96 May 28, 2010. S.C. Code Section 1-23-120(J) (Supp. 2012) requires state agencies to perform a review of its regulations every five (5) years and update them if necessary.

Statutory mandates, issues found in the review, and necessity for overall updates render the amendments needed and reasonable. The amendments update the regulation of Athletic Trainer credentialing in South Carolina. The amendments increase the quality regarding stylistic changes for clarity and readability.

DETERMINATION OF COSTS AND BENEFITS:

Internal Costs: Implementation of this regulation will not require additional resources. There is no anticipated additional cost by the Department or State government due to any inherent requirements of this regulation.

External Costs: There are no external costs anticipated.

External Benefits: The amendments update the renewal notification requirements for Athletic Trainers while maintaining the interests of patient health and safety and lessening provider burdens.

UNCERTAINTIES OF ESTIMATES:

None.

EFFECT ON THE ENVIRONMENT AND PUBLIC HEALTH:

There will be no effect on the environment.

The amendments will reasonably simplify the Athletic Trainer regulations in South Carolina.

DETRIMENTAL EFFECT ON THE ENVIRONMENT AND PUBLIC HEALTH IF THE REGULATION IS NOT IMPLEMENTED:

There would not be a detrimental effect on the environment.

If the revision is not implemented, unnecessary burdens will be placed on the Athletic Trainer providers and the Department by not updating the regulations.

Statement of Rationale:

The Department revises this regulation pursuant to the S.C. Code Ann. Section 1-23-120(J) (Supp. 2012) requirement that state agencies perform a review of its regulations every five (5) years and update them if necessary. The amendments clarify the requirements for certification and recertification, and bring the regulation up to national standards and best practices.

Document No. 4541

DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL
CHAPTER 61

Statutory Authority: 1976 Code Sections 44-56-30 et seq.

61-79. Hazardous Waste Management Regulations

Synopsis:

These amendments of R. 61-79 seek to provide opportunities for the regulated community to use best demonstrated available technologies for treatment of a specific type of waste while reducing compliance costs for industry, revise the definition of solid waste, and make technical corrections and correct typographical errors. See the Section-by-Section Discussion of Amendments below and the Statements of Need and Reasonableness and Rationale herein.

A Notice of Drafting was published in the *State Register* on July 25, 2014.

Section-by-Section Discussion of Amendments:

1. The Department has amended R.61-79 to adopt the “Removal of Saccharin and Its Salts from the Lists of Hazardous Constituents,” published on January 18, 2011, at 75 FR 78918-78926:

261.33(f). The table has been modified to remove the following: U202 Saccharin, & salts.

261 Appendix VIII. Hazardous Constituents. The table has been modified to remove the entries for Saccharin and Saccharin salts.

268.40. The table Treatment Standards for Hazardous Wastes has been modified to remove the following: U202 Saccharin and salts.

2. The Department has amended R.61-79 to adopt the “Academic Laboratories Generator Standards Technical Corrections,” published in the Federal Register on December 20, 2010 at 75 FR 79304-79308.

262.200 Definitions. The definition of “Central Accumulation Area” has been modified to change 262.34(a) to 262.34(a)-(b) in the first sentence.

262.206(b)(3)(i). This sentence has been modified to change the word “consolidating” to “bulking.”

262.212(e)(1). This paragraph has been modified to remove the phrase “(or on the label that is affixed or attached to this container, if that is preferred).”

262.214(a)(1). This sentence has been modified to change the word “including” to “as follows.”

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262.214(b)(1). This sentence has been modified to remove the following language: “including how the eligible academic entity will manage containers used for in-line collection of unwanted materials, such as with high performance liquid chromatographs and other laboratory equipment”

3. The Department has amended R.61-79 to adopt the “Revision of the Land Disposal Treatment Standards for Carbamate Wastes,” published in the Federal Register on June 13, 2011 at 76 FR 34147-34157.

268.40 Table of Treatment Standards for Hazardous Wastes. This table has been modified for the following entries: K156; K157; K158; K159; K161; P127; P128; P185; P188; P189; P190; P191; P192; P194; P196; P197; P198; P199; P201; P202; P203; P204; P205; U271; U278; U279; U280; U364; U367; U372; U373; U387; U389; U394; U395; U404; U409; U410; U411 to allow carbamate wastewaters to be treated using combustion, chemical oxidation, biodegradation or carbon absorption, and to allow carbamate nonwastewaters to be treated by combustion.

268.48. Table of Universal Treatment Standards.

The following constituents have been deleted from this table: Aldicarb sulfone; Barban; Bendiocarb; Benomyl; Butylate; Carbaryl; Carbenzadim; Carbofuran; Carbofuran phenol; Carbosulfan; m-Cumenyl methylcarbamate; Dithiocarbamates (total); EPTC; Formetanate hydrochloride; Methiocarb; Methomyl; Metolcarb; Mexacarbate; Molinate; Oxyamyl; Pebulate; Physostigmine; Physotigmine solicylate; Promecarb; Propham; Popoxur; Prosulfocarb; Thiodicarb; Thiophanate-methyl; Triallate; Triethylamin; Vernolate.

4. The Department has amended R.61-79 to adopt the “Hazardous Waste Technical Corrections and Clarifications,” published in the Federal Register on May 14, 2012 at 77 FR 22229-22232.

261.32(a). The table has been modified for K107 to change the words “carboxylic hydrazides” to “carboxylic acid hydrazides.” The table has been modified for K124 to remove a space in the word “ethylenedisithiocarbamic.” The table has been modified for K069 to change the word “effecting” to “affecting.”

266.20(b). This paragraph has been modified to add the phrase “of this chapter” after “268.32” and “268.7(b)(6).”

5. The Department has amended R.61-79 to adopt the “Conditional Exclusions for Solvent Contaminated Wipes,” published in the Federal Register on July 31, 2013 at 78 FR 46448-46485.

260.10 Definitions. The new definitions: “No free liquids;” “Solvent-contaminated wipe;” “Wipe” have been added in alphabetical order.

261.4(a)(25). New subitem (25) has been added and reserved.

261.4(a)(26). New subitem (26) has been added with language that describes how solvent-contaminated wipes that are sent for cleaning and reuse are not solid wastes from the point of generation, provided that when accumulated, stored and transported, are contained in non-leaking, closed containers that are labeled “Excluded Solvent-Contaminated Wipes.” The containers must be able to contain free liquids, should free liquids occur. The solvent-contaminated wipes may be accumulated by the generator for up to 180 days from the start date of accumulation for each container prior to being sent for cleaning and when sent must contain no free liquids as defined in Section 260.10. Any free liquids removed from the solvent-contaminated wipes or from the container holding the wipes must be managed according to the applicable regulations found in parts 260 through 273.

Generators must maintain at their site the name and address of the laundry or dry cleaner that is receiving the solvent-contaminated wipes, documentation that the 180-day accumulation time limit is being met, the description of the process the generator is using to ensure the solvent-contaminated wipes contain no free liquids at the point of being laundered or dry cleaned on-site or at the point of being transported off-site for laundering

or dry cleaning and that they are sent to a laundry or dry cleaner whose discharge, if any, is regulated under sections 301 and 402 or section 307 of the Clean Water Act.

261.4(b)(16). New subitem (16) has been added and reserved.

261.4(b)(17). New subitem (17) has been added and reserved.

261.4(b)(18). New subitem (18) has been added with language that describes how solvent-contaminated wipes, except for wipes that are hazardous waste due to the presence of trichloroethylene, that are sent for disposal are not hazardous wastes from the point of generation provided that when accumulated, stored, and transported, are contained in non-leaking, closed containers that are labeled “Excluded Solvent-Contaminated Wipes.” The containers must be able to contain free liquids, should free liquids occur. The solvent-contaminated wipes may be accumulated by the generator for up to 180 days from the start date of accumulation for each container prior to being sent for disposal and when transported must contain no free liquids as defined in section 260.10. Free liquids removed from the solvent-contaminated wipes or from the container holding the wipes must be managed according to the applicable regulations found in parts 260 through 273.

Generators must maintain at their site the name and address of the landfill or combustor that is receiving the solvent-contaminated wipes, documentation that the 180 day accumulation time limit is being met, and the description of the process the generator is using to ensure solvent-contaminated wipes contain no free liquids at the point of being transported for disposal. Generators must also document that the wipes are sent to either a municipal solid waste landfill, a hazardous waste landfill, a municipal waste combustor or another facility regulated under section 129 of the Clean Air Act, or to a hazardous waste combustor, boiler, or industrial furnace regulated under parts 264, 265, or 266 subpart H.

6. The Department has amended R.61-79 to incorporate three recommended changes identified in its internal 2013 review for the South Carolina Governor’s Regulatory Review Task Force.

262.34. This section was modified to make the South Carolina regulations for small quantity generators who must transport waste 200 miles or more for off-site treatment, storage or disposal consistent with the federal regulations.

263.23(a). This paragraph was modified to add the word “disposing” to wherever it states, “blending, mixing, treating, or storing.”

264.340(e). A new paragraph has been added with the following language: The owner or operator of an incinerator may conduct trial burns subject only to the requirements of Section 270.62 (hazardous waste incinerator permits).

Instructions: Amend R.61-79 pursuant to each individual instruction provided with the text of the amendments below.

Text:

Revise 61-79.260.10 to add the following definitions in alphabetical order within this section:

“No free liquids” as used in 261.4(a)(26) and 261.4(b)(18), means that solvent-contaminated wipes may not contain free liquids as determined by Method 9095B (Paint Filter Liquids Test), included in “Test Methods for Evaluating Solid Waste, Physical/Chemical Methods” (EPA Publication SW-846), which is incorporated by reference, and that there is no free liquid in the container holding the wipes. No free liquids may also be determined using another standard or test method as defined by an authorized state.

“Solvent-contaminated wipe” means,

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(1) a wipe that, after use or after cleaning up a spill, either:

(i) Contains one or more of the F001 through F005 solvents listed in 261.31 or the corresponding P- or U-listed solvents found in 261.33;

(ii) Exhibits a hazardous characteristic found in part 261 subpart C when that characteristic results from a solvent listed in part 261; and/or

(iii) Exhibits only the hazardous waste characteristic of ignitability found in 261.21 due to the presence of one or more solvents that are not listed in part 261.

(2) Solvent-contaminated wipes that contain listed hazardous waste other than solvents, or exhibit the characteristic of toxicity, corrosivity, or reactivity due to contaminants other than solvents, are not eligible for the exclusions at 261.4(a)(26) and 261.4(b)(18).

“Wipe” means a woven or non-woven shop towel, rag, pad, or swab made of wood pulp, fabric, cotton, polyester blends, or other material.

Revise 61-79.261.4(a) to add subitem 261.4(a)(25) to read:

261.4(a)(25) [Reserved]

Revise 61-79.261.4(a) to add subitem 261.4(a)(26) to read:

(26) Solvent-contaminated wipes that are sent for cleaning and reuse are not solid wastes from the point of generation, provided that:

(i) The solvent-contaminated wipes, when accumulated, stored, and transported, are contained in non-leaking, closed containers that are labeled “Excluded Solvent-Contaminated Wipes.” The containers must be able to contain free liquids, should free liquids occur. During accumulation, a container is considered closed when there is complete contact between the fitted lid and the rim, except when it is necessary to add or remove solvent-contaminated wipes. When the container is full, or when the solvent-contaminated wipes are no longer being accumulated, or when the container is being transported, the container must be sealed with all lids properly and securely affixed to the container and all openings tightly bound or closed sufficiently to prevent leaks and emissions;

(ii) The solvent-contaminated wipes may be accumulated by the generator for up to 180 days from the start date of accumulation for each container prior to being sent for cleaning;

(iii) At the point of being sent for cleaning on-site or at the point of being transported off-site for cleaning, the solvent-contaminated wipes must contain no free liquids as defined in Section 260.10 of this chapter.

(iv) Free liquids removed from the solvent-contaminated wipes or from the container holding the wipes must be managed according to the applicable regulations found in parts 260 through 273:

(v) Generators must maintain at their site the following documentation:

(A) Name and address of the laundry or dry cleaner that is receiving the solvent-contaminated wipes;

(B) Documentation that the 180-day accumulation time limit in 261.4(a)(26)(ii) is being met;

(C) Description of the process the generator is using to ensure the solvent-contaminated wipes contain no free liquids at the point of being laundered or dry cleaned on-site or at the point of being transported off-site for laundering or dry cleaning;

(vi) The solvent-contaminated wipes are sent to a laundry or dry cleaner whose discharge, if any, is regulated under sections 301 and 402 or section 307 of the Clean Water Act.

Revise 61-79.261.4(b) to add and reserve subitem 261.4(b)(16) to read:

261.4(b)(16) [Reserved]

Revise 61-79.261.4(b) to add and reserve subitem 261.4(b)(17) to read:

261.4(b)(17) [Reserved]

Revise 61-79.261.4(b) to add subitem 261.4(b)(18) to read:

(18) Solvent-contaminated wipes, except for wipes that are hazardous waste due to the presence of trichloroethylene, that are sent for disposal are not hazardous wastes from the point of generation provided that:

(i) The solvent-contaminated wipes, when accumulated, stored, and transported, are contained in non-leaking, closed containers that are labeled “Excluded Solvent-Contaminated Wipes.” The containers must be able to contain free liquids, should free liquids occur. During accumulation, a container is considered closed when there is complete contact between the fitted lid and the rim, except when it is necessary to add or remove solvent-contaminated wipes. When the container is full, or when the solvent-contaminated wipes are no longer being accumulated, or when the container is being transported, the container must be sealed with all lids properly and securely affixed to the container and all openings tightly bound or closed sufficiently to prevent leaks and emissions;

(ii) The solvent-contaminated wipes may be accumulated by the generator for up to 180 days from the start date of accumulation for each container prior to being sent for disposal;

(iii) At the point of being transported for disposal, the solvent-contaminated wipes must contain no free liquids as defined in section 260.10 of this chapter.

(iv) Free liquids removed from the solvent-contaminated wipes or from the container holding the wipes must be managed according to the applicable regulations found in parts 260 through 273;

(v) Generators must maintain at their site the following documentation:

(A) Name and address of the landfill or combustor that is receiving the solvent-contaminated wipes;

(B) Documentation that the 180 day accumulation time limit in 261.4(b)(18)(ii) is being met;

(C) Description of the process the generator is using to ensure solvent-contaminated wipes contain no free liquids at the point of being transported for disposal;

(vi) The solvent-contaminated wipes are sent for disposal:

(A) To a municipal solid waste landfill regulated under part 258, including 258.40, or to a hazardous waste landfill regulated under parts 264 or 265; or

(B) To a municipal waste combustor or other combustion facility regulated under section 129 of the Clean Air Act or to a hazardous waste combustor, boiler, or industrial furnace regulated under parts 264, 265, or 266 subpart H.

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Revise table 61-79.261.32(a) Hazardous Wastes from Specific Sources. Modify the entry for K107 to read: “Column bottoms from product separation from the production of 1,1-dimethylhydrazine (UDMH) from carboxylic acid hydrazides.” Modify the entry for K124 to remove a space in the word “ethylenebisdithiocarb amic” so that it reads “ethylenebisdithiocarbamic.” Modify the entry for K069 to change “effecting” to “affecting.”

Industry, SC & EPA HW #	261.32 Hazardous Wastes from specific sources - Hazardous waste	Hazard code
Wood preservation:		
K001	Bottom sediment sludge from the treatment of wastewaters from wood preserving processes that use creosote and/or pentachlorophenol.	(T)
Inorganic pigments:		
K002	Wastewater treatment sludge from the production of chrome yellow and orange pigments.	(T)
K003	Wastewater treatment sludge from the production of molybdate orange pigments.	(T)
K004	Wastewater treatment sludge from the production of zinc yellow pigments.	(T)
K005	Wastewater treatment sludge from the production of chrome green pigments.	(T)
K006	Wastewater treatment sludge from the production of chrome oxide green pigments (anhydrous and hydrated).	(T)
K007	Wastewater treatment sludge from the production of iron blue pigments.	(T)
K008	Oven residue from the production of chrome oxide green pigments.	(T)
Organic chemicals:		
K009	Distillation bottoms from the production of acetaldehyde from ethylene.	(T)
K010	Distillation side cuts from the production of acetaldehyde from ethylene.	(T)
K011	Bottom stream from the wastewater stripper in the production of acrylonitrile.	(R, T)
K013	Bottom stream from the acetonitrile column in the production of acrylonitrile.	(R, T)
K014	Bottoms from the acetonitrile purification column in the production of acrylonitrile.	(T)
K015	Still bottoms from the distillation of benzyl chloride.	(T)
K016	Heavy ends or distillation residues from the production of carbon tetrachloride.	(T)
K017	Heavy ends (still bottoms) from the purification column in the production of epichlorohydrin.	(T)

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K018	Heavy ends from the fractionation column in ethyl chloride production.	(T)
K019	Heavy ends from the distillation of ethylene dichloride in ethylene dichloride production.	(T)
K020	Heavy ends from the distillation of vinyl chloride in vinyl chloride monomer production.	(T)
K021	Aqueous spent antimony catalyst waste from fluoromethanes production.	(T)
K022	Distillation bottom tars from the production of phenol/acetone from cumene.	(T)
K023	Distillation light ends from the production of phthalic anhydride from naphthalene.	(T)
K024	Distillation bottoms from the production of phthalic anhydride from naphthalene.	(T)
K025	Distillation bottoms from the production of nitrobenzene by the nitration of benzene.	(T)
K026	Stripping still tails from the production of methy ethyl pyridines.	(T)
K027	Centrifuge and distillation residues from toluene diisocyanate production.	(R, T)
K028	Spent catalyst from the hydrochlorinator reactor in the production of 1,1,1-trichloroethane.	(T)
K029	Waste from the product steam stripper in the production of 1,1,1-trichloroethane.	(T)
K030	Column bottoms or heavy ends from the combined production of trichloroethylene and perchloroethylene.	(T)
K083	Distillation bottoms from aniline production.	(T)
K085	Distillation or fractionation column bottoms from the production of chlorobenzenes.	(T)
K093	Distillation light ends from the production of phthalic anhydride from ortho-xylene.	(T)
K094	Distillation bottoms from the production of phthalic anhydride from ortho-xylene.	(T)
K095	Distillation bottoms from the production of 1,1,1-trichloroethane.	(T)

K096	Heavy ends from the heavy ends column from the production of 1,1,1-trichloroethane.	(T)
K103	Process residues from aniline extraction from the production of aniline.	(T)
K104	Combined wastewater streams generated from nitrobenzene/aniline production.	(T)
K105	Separated aqueous stream from the reactor product washing step in the production of chlorobenzenes.	(T)
K107	Column bottoms from product separation from the production of 1,1-dimethylhydrazine (UDMH) from carboxylic acid hydrazides.	(C, T)
K108	Condensed column overheads from product separation and condensed reactor vent gases from the production of 1,1-dimethylhydrazine (UDMH) from carboxylic acid hydrazides.	(I, T)
K109	Spent filter cartridges from product purification from the production of 1,1-dimethylhydrazine (UDMH) from carboxylic acid hydrazides.	(T)
K110	Condensed column overheads from intermediate separation from the production of 1,1-dimethylhydrazine (UDMH) from carboxylic acid hydrazides.	(T)
K111	Product washwaters from the production of dinitrotoluene via nitration of toluene.	(C, T)
K112	Reaction by-product water from the drying column in the production of toluenediamine via hydrogenation of dinitrotoluene.	(T)
K113	Condensed liquid light ends from the purification of toluenediamine in the production of toluenediamine via hydrogenation of dinitrotoluene.	(T)
K114	Vicinals from the purification of toluenediamine in the production of toluenediamine via hydrogenation of dinitrotoluene.	(T)
K115	Heavy ends from the purification of toluenediamine in the production of toluenediamine via hydrogenation of dinitrotoluene.	(T)
K116	Organic condensate from the solvent recovery column in the production of toluene diisocyanate via phosgenation of toluenediamine.	(T)

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K117	Wastewater from the reactor vent gas scrubber in the production of ethylene dibromide via bromination of ethene.	(T)
K118	Spent adsorbent solids from purification of ethylene dibromide in the production of ethylene dibromide via bromination of ethene.	(T)
K136	Still bottoms from the purification of ethylene dibromide in the production of ethylene dibromide via bromination of ethene.	(T)
K149	Distillation bottoms from the production of alpha- (or methyl-) chlorinated toluenes, ring-chlorinated toluenes, benzoyl chlorides, and compounds with mixtures of these functional groups, (This waste does not include still bottoms from the distillation of benzyl chloride.).	(T)
K150	Organic residuals, excluding spent carbon adsorbent, from the spent chlorine gas and hydrochloric acid recovery processes associated with the production of alpha- (or methyl-) chlorinated toluenes, ring-chlorinated toluenes, benzoyl chlorides, and compounds with mixtures of these functional groups.	(T)
K151	Wastewater treatment sludges, excluding neutralization and biological sludges, generated during the treatment of wastewaters from the production of alpha- (or methyl-) chlorinated toluenes, ring-chlorinated toluenes, benzoyl chlorides, and compounds with mixtures of these functional groups.	(T)
K156	Organic waste (including heavy ends, still bottoms, light ends, spent solvents, filtrates, and decantates) from the production of carbamates and carbamoyl oximes. (This listing does not apply to wastes generated from the manufacture of 3-iodo-2-propynyl n-butylcarbamate.).	(T)

K157	Wastewaters (including scrubber waters, condenser waters, washwaters, and separation waters) from the production of carbamates and carbamoyl oximes. (This listing does not apply to wastes generated from the manufacture of 3-iodo-2-propynyl n-butylcarbamate.).	(T)
K158	Bag house dusts and filter/separation solids from the production of carbamates and carbamoyl oximes. (This listing does not apply to wastes generated from the manufacture of 3-iodo-2-propynyl n-butylcarbamate.).	(T)
K159	Organics from the treatment of thiocarbamate wastes	(T)
K161	Purification solids (including filtration, evaporation, and centrifugation solids), bag house dust and floor sweepings from the production of dithiocarbamate acids and their salts. (This listing does not include K125 or K126.).	(R, T)

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K174	Wastewater treatment sludges from the production of ethylene dichloride or vinyl chloride monomer (including sludges that result from commingled ethylene dichloride or vinyl chloride monomer wastewater and other wastewater), unless the sludges meet the following conditions: (i) they are disposed of in a subtitle C or non-hazardous landfill licensed or permitted by the state or federal government; (ii) they are not otherwise placed on the land prior to final disposal; and (iii) the generator maintains documentation demonstrating that the waste was either disposed of in an on-site landfill or consigned to a transporter or disposal facility that provided a written commitment to dispose of the waste in an off-site landfill. Respondents in any action brought to enforce the requirements of subtitle C must, upon a showing by the government that the respondent managed wastewater treatment sludges from the production of vinyl chloride monomer or ethylene dichloride, demonstrate that they meet the terms of the exclusion set forth above. In doing so, they must provide appropriate documentation (e.g., contracts between the generator and the landfill owner/operator, invoices documenting delivery of waste to landfill, etc.) that the terms of the exclusion were met. (6/02)	(T)
K175	Wastewater treatment sludges from the production of vinyl chloride monomer using mercuric chloride catalyst in an acetylene-based process. (6/02)	(T)

K181	<p>Nonwastewaters from the production of dyes and/or pigments (including nonwastewaters commingled at the point of generation with nonwastewaters from other processes) that, at the point of generation, contain mass loadings of any of the constituents identified in paragraph (c) of this section that are equal to or greater than the corresponding paragraph (c) levels, as determined on a calendar year basis. These wastes will not be hazardous if the nonwastewaters are: (i) disposed in a Subtitle D landfill unit subject to the design criteria in R 61-107.258.40, (ii) disposed in a Subtitle C landfill unit subject to either 264.301 or 265.301, (iii) disposed in other Subtitle D landfill units that meet the design criteria in R. 61-107.258.40, 264.301, or 265.301, or (iv) treated in a combustion unit that is permitted under Subtitle C, or an onsite combustion unit that is permitted under the Clean Air Act. For the purposes of this listing, dyes and/or pigments production is defined in paragraph (b)(1) of this section. Paragraph (d) of this section describes the process for demonstrating that a facility's nonwastewaters are not K181. This listing does not apply to wastes that are otherwise identified as hazardous under 261.21-261.24 and 261.31-261.33 at the point of generation. Also, the listing does not apply to wastes generated before any annual mass loading limit is met. (2/07)</p>	(T)
Inorganic chemicals:		
K071	<p>Brine purification muds from the mercury cell process in chlorine production, where separately prepurified brine is not used.</p>	(T)
K073	<p>Chlorinated hydrocarbon waste from the purification step of the diaphragm cell process using graphite anodes in chlorine production.</p>	(T)
K106	<p>Wastewater treatment sludge from the mercury cell process in chlorine production.</p>	(T)

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K176	Baghouse filters from the production of antimony oxide, including filters from the production of intermediates (e.g., antimony metal or crude antimony oxide). (6/03)	(E)
K177	Slag from the production of antimony oxide that is speculatively accumulated or disposed, including slag from the production of intermediates (e.g., antimony metal or crude antimony oxide). (6/03)	(T)
K178	Residues from manufacturing and manufacturing site storage of ferric chloride from acids formed during the production of titanium dioxide using the chloride-ilmenite process. (6/03)	(T)
Pesticides:		
K031	By-product salts generated in the production of MSMA and cacodylic acid.	(T)
K032	Wastewater treatment sludge from the production of chlordane.	(T)
K033	Wastewater and scrub water from the chlorination of cyclopentadiene in the production of chlordane.	(T)
K034	Filter solids from the filtration of hexachlorocyclopentadiene in the production of chlordane.	(T)
K035	Wastewater treatment sludges generated in the production of creosote.	(T)
K036	Still bottoms from toluene reclamation distillation in the production of disulfoton.	(T)
K037	Wastewater treatment sludges from the production of disulfoton.	(T)
K038	Wastewater from the washing and stripping of phorate production.	(T)
K039	Filter cake from the filtration of diethylphosphorodithioic acid in the production of phorate.	(T)
K040	Wastewater treatment sludge from the production of phorate.	(T)
K041	Wastewater treatment sludge from the production of toxaphene.	(T)
K042	Heavy ends or distillation residues from the distillation of tetrachlorobenzene in the production of 2,4,5-T.	(T)
K043	2,6-Dichlorophenol waste from the production of 2,4-D.	(T)
K097	Vacuum stripper discharge from the chlordane chlorinator in the production of chlordane.	(T)

K098	Untreated process wastewater from the production of toxaphene.	(T)
K099	Untreated wastewater from the production of 2,4-D.	(T)
K123	Process wastewater (including supernates, filtrates, and washwaters) from the production of ethylenebisdithiocarbamic acid and its salt.	(T)
K124	Reactor vent scrubber water from the production of ethylenebisdithiocarbamic acid and its salts.	(C, T)
K125	Filtration, evaporation, and centrifugation solids from the production of ethylenebisdithiocarbamic acid and its salts.	(T)
K126	Baghouse dust and floor sweepings in milling and packaging operations from the production or formulation of ethylenebisdithiocarbamic acid and its salts.	(T)
K131	Wastewater from the reactor and spent sulfuric acid from the acid dryer from the production of methyl bromide.	(C, T)
K132	Spent absorbent and wastewater separator solids from the production of methyl bromide.	(T)
Explosives:		
K044	Wastewater treatment sludges from the manufacturing and processing of explosives.	(R)
K045	Spent carbon from the treatment of wastewater containing explosives.	(R)
K046	Wastewater treatment sludges from the manufacturing, formulation and loading of lead-based initiating compounds.	(T)
K047	Pink/red water from TNT operations.	(R)
Petroleum refining:		
K048	Dissolved air flotation (DAF) float from the petroleum refining industry.	(T)
K049	Slop oil emulsion solids from the petroleum refining industry.	(T)
K050	Heat exchanger bundle cleaning sludge from the petroleum refining industry.	(T)
K051	API separator sludge from the petroleum refining industry.	(T)
K052	Tank bottoms (leaded) from the petroleum refining industry.	(T)

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K169	Crude oil storage tank sediment from petroleum refining operations (8/00)	(T)
K170	Clarified slurry oil tank sediment and/or in-line filter/separation solids from petroleum refining operations (8/00)	(T)
K171	Spent Hydrotreating catalyst from petroleum refining operations, including guard beds used to desulfurize feeds to other catalytic reactors (this listing does not include inert support media)	(I, T)
K172	Spent Hydrorefining catalyst from petroleum refining operations, including guard beds used to desulfurize feeds to other catalytic reactors (this listing does not include inert support media.) (8/00)	(I, T)
Iron and Steel		
K061	Emission control dust/sludge from the primary production of steel in electric furnaces.	(T)
K062	Spent pickle liquor generated by steel finishing operations of facilities within the iron and steel industry (SIC Codes 331 and 332).	(C, T)
Primary aluminum:		
K088	Spent potliners from primary aluminum reduction.	(T)
Secondary lead:		
K069	Emission control dust/sludge from secondary lead smelting. (Note: This listing is stayed administratively for sludge generated from secondary acid scrubber systems. The stay will remain in effect until further administrative action is taken. If EPA takes further action affecting this stay, EPA will publish a notice of the action in the Federal Register).	(T)
K100	Waste leaching solution from acid leaching of emission control dust/sludge from secondary lead smelting.	(T)
Veterinary pharmaceuticals:		
K084	Wastewater treatment sludges generated during the production of veterinary pharmaceuticals from arsenic or organo-arsenic compounds.	(T)

K101	Distillation tar residues from the distillation of aniline-based compounds in the production of veterinary pharmaceuticals from arsenic or organo-arsenic compounds.	(T)
K102	Residue from the use of activated carbon for decolorization in the production of veterinary pharmaceuticals from arsenic or organo-arsenic compounds.	(T)
Ink formulation:		
K086	Solvent washes and sludges, caustic washes and sludges, or water washes and sludges from cleaning tubs and equipment used in the formulation of ink from pigments, driers, soaps, and stabilizers containing chromium and lead.	(T)
Coking:		
K060	Ammonia still lime sludge from coking operations.	(T)
K087	Decanter tank tar sludge from coking operations(6/95).	(T)
K141	Process residues from the recovery of coal tar, including, but not limited to, collecting sump residues from the production of coke from coal or the recovery of coke by-products produced from coal. This listing does not include K087 (decanter tank tar sludges from coking operations).	(T)
K142	Tar storage tank residues from the production of coke from coal or from the recovery of coke by-products produced from coal.	(T)
K143	Process residues from the recovery of light oil, including, but not limited to, those generated in stills, decanters, and wash oil recovery units from the recovery of coke by-products produced from coal.	(T)
K144	Wastewater sump residues from light oil refining, including, but not limited to, intercepting or contamination sump sludges from the recovery of coke by-products produced from coal.	(T)
K145	Residues from naphthalene collection and recovery operations from the recovery of coke by-products produced from coal.	(T)
K147	Tar storage tank residues from coal tar refining.	(T)

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K148	Residues from coal tar distillation, including but not limited to, still bottoms.	(T)
Organotins:		
K900	Waste residues from the manufacture of organotin compounds which contain tri-(organo) substituted tin compounds, to include tributyltin and its analogs. (5/02)	(T)

61-79.261.33(f) List of Subpart D Toxic Hazardous Wastes. Modify the table to remove "U202 Saccharin & salts".

261.33(f) Lists of Subpart D Toxic Hazardous Wastes		
HW #	CAS#	Substance (11/90; 12/92; 12/93; 5/96, 9/98)
U394	30558-43-1	A2213 (5/96)
U001	75-07-0	Acetaldehyde (I)
U034	75-87-6	Acetaldehyde, trichloro-
U187	62-44-2	Acetamide, N-(4-ethoxyphenyl)-
U005	53-96-3	Acetamide, N-9H-fluoren-2-yl-
U240	¹ 94-75-7	Acetic acid, (2,4-dichlorophenoxy)-, salts & esters
U112	141-78-6	Acetic acid ethyl ester (I)
U144	301-04-2	Acetic acid, lead(2+) salt
U214	563-68-8	Acetic acid, thallium(1+) salt
see F027	93-76-5	Acetic acid, (2,4,5-trichlorophenoxy)-
U002	67-64-1	Acetone (I)
U003	75-05-8	Acetonitrile (I,T)
U004	98-86-2	Acetophenone
U005	53-96-3	2-Acetylaminofluorene
U006	75-36-5	Acetyl chloride (C,R,T)
U007	79-06-1	Acrylamide
U008	79-10-7	Acrylic acid (I)
U009	107-13-1	Acrylonitrile
U011	61-82-5	Amitrole
U012	62-53-3	Aniline (I,T)
U136	75-60-5	Arsinic acid, dimethyl-
U014	492-80-8	Auramine
U015	115-02-6	Azaserine
U010	50-07-7	Azirino[2',3':3,4]pyrrolo(1,2-a)indole-4,7-dione, 6-amino-8-[[[(aminocarbonyloxy)methyl]-1,1a,2,8,8a,8b-hexahydro-8a-methoxy-5-methyl-, [1aS-(1aalpha, 8beta,8aalpha,8balph)]-
U280	101-27-9	Barban. (5/96)
U278	22781-23-3	Bendiocarb. (5/96)
U364	22961-82-6	Bendiocarb phenol. (5/96)
U271	17804-35-2	Benomyl. (5/96)
U157	56-49-5	Benz[j]aceanthrylene, 1,2-dihydro-3-methyl-
U016	225-51-4	Benz[c]acridine
U017	98-87-3	Benzal chloride
U192	23950-58-5	Benzamide, 3,5-dichloro-N-(1,1-dimethyl-2-propynyl)-

261.33(f) Lists of Subpart D Toxic Hazardous Wastes		
HW #	CAS#	Substance (11/90; 12/92; 12/93; 5/96, 9/98)
U018	56-55-3	Benz[a]anthracene
U094	57-97-6	Benz[a]anthracene, 7,12-dimethyl-
U012	62-53-3	Benzenamine (I,T)
U014	492-80-8	Benzenamine, 4,4'-carbonimidoylbis[N,N- dimethyl-
U049	3165-93-3	Benzenamine, 4-chloro-2-methyl-, hydrochloride
U093	60-11-7	Benzenamine, N,N-dimethyl-4-(phenylazo)-
U328	95-53-4	Benzenamine, 2-methyl-
U353	106-49-0	Benzenamine, 4-methyl-
U158	101-14-4	Benzenamine, 4,4'-methylenebis[2-chloro-
U222	636-21-5	Benzenamine, 2-methyl-, hydrochloride
U181	99-55-8	Benzenamine, 2-methyl-5-nitro-
U019	71-43-2	Benzene (I,T)
U038	510-15-6	Benzenoacetic acid, 4-chloro-alpha-(4- chlorophenyl)-alpha-hydroxy-, ethyl ester
U030	101-55-3	Benzene, 1-bromo-4-phenoxy-
U035	305-03-3	Benzenobutanoic acid, 4-[bis(2- chloroethyl)amino]-
U037	108-90-7	Benzene, chloro-
U221	25376-45-8	Benzenediamine, ar-methyl-
U028	117-81-7	1,2-Benzenedicarboxylic acid, bis(2-ethylhexyl) ester
U069	84-74-2	1,2-Benzenedicarboxylic acid, dibutyl ester
U088	84-66-2	1,2-Benzenedicarboxylic acid, diethyl ester
U102	131-11-3	1,2-Benzenedicarboxylic acid, dimethyl ester
U107	117-84-0	1,2-Benzenedicarboxylic acid, dioctyl ester
U070	95-50-1	Benzene, 1,2-dichloro-
U071	541-73-1	Benzene, 1,3-dichloro-
U072	106-46-7	Benzene, 1,4-dichloro-
U060	72-54-8	Benzene, 1,1'-(2,2-dichloroethylidene)bis[4-chloro-
U017	98-87-3	Benzene, (dichloromethyl)-
U223	26471-62-5	Benzene, 1,3-diisocyanatomethyl- (R,T)
U239	1330-20-7	Benzene, dimethyl- (I)
U201	108-46-3	1,3-Benzenediol
U127	118-74-1	Benzene, hexachloro-
U056	110-82-7	Benzene, hexahydro- (I)
U220	108-88-3	Benzene, methyl-
U105	121-14-2	Benzene, 1-methyl-2,4-dinitro-
U106	606-20-2	Benzene, 2-methyl-1,3-dinitro-
U055	98-82-8	Benzene, (1-methylethyl)- (I)
U169	98-95-3	Benzene, nitro-
U183	608-93-5	Benzene, pentachloro-
U185	82-68-8	Benzene, pentachloronitro-
U020	98-09-9	Benzenesulfonic acid chloride (C,R)
U020	98-09-9	Benzenesulfonyl chloride (C,R)
U207	95-94-3	Benzene, 1,2,4,5-tetrachloro-
U061	50-29-3	Benzene, 1,1'-(2,2,2-trichloroethylidene)bis[4- chloro-
U247	72-43-5	Benzene, 1,1'-(2,2,2-trichloroethylidene)bis[4- methoxy-
U023	98-07-7	Benzene, (trichloromethyl)-
U234	99-35-4	Benzene, 1,3,5-trinitro-
U021	92-87-5	Benzidine
U202	181-07-2	1,2-Benzisothiazol-3(2H)-one, 1,1-dioxide, & salts
U278	22781-23-3	1,3-Benzodioxol-4-ol, 2,2dimethyl, methyl carbamate. (5/96)

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261.33(f) Lists of Subpart D Toxic Hazardous Wastes		
HW #	CAS#	Substance (11/90; 12/92; 12/93; 5/96, 9/98)
U364	22961-82-6	1,3-Benzodioxolol, 2,2-dimethyl,
U203	94-59-7	1,3-Benzodioxole, 5-(2-propenyl)-
U141	120-58-1	1,3-Benzodioxole, 5-(1-propenyl)-
U367	1563-38-8	7-Benzofuranol, 2,3-dihydro2,2-dimethyl (5/96)
U090	94-58-6	1,3-Benzodioxole, 5-propyl-
U064	189-55-9	Benzo[<i>rst</i>]pentaphene
U248	¹ 81-81-2	2H-1-Benzopyran-2-one, 4-hydroxy-3-(3-oxo-1-phenyl-butyl)-, & salts, when present at concentrations of 0.3% or less
U022	50-32-8	Benzo[<i>a</i>]pyrene
U197	106-51-4	<i>p</i> -Benzoquinone
U023	98-07-7	Benzotrichloride (C,R,T)
U085	1464-53-5	2,2'-Bioxirane
U021	92-87-5	[1,1'-Biphenyl]-4,4'-diamine
U073	91-94-1	[1,1'-Biphenyl]-4,4'-diamine, 3,3'-dichloro-
U091	119-90-4	[1,1'-Biphenyl]-4,4'-diamine, 3,3'-dimethoxy-
U095	119-93-7	[1,1'-Biphenyl]-4,4'-diamine, 3,3'-dimethyl-
U225	75-25-2	Bromoform
U030	101-55-3	4-Bromophenyl phenyl ether
U128	87-68-3	1,3-Butadiene, 1,1,2,3,4,4-hexachloro-
U172	924-16-3	1-Butanamine, N-butyl-N-nitroso-
U031	71-36-3	1-Butanol (I)
U159	78-93-3	2-Butanone (I,T)
U160	1338-23-4	2-Butanone, peroxide (R,T)
U053	4170-30-3	2-Butenal
U074	764-41-0	2-Butene, 1,4-dichloro- (I,T)
U143	303-34-4	2-Butenoic acid, 2-methyl-, 7-[[2,3-dihydroxy-2-(1-methoxyethyl)-3-methyl-1-oxobutoxy]methyl]- 2,3,5,7a-tetrahydro-1H-pyrrolizin-1-yl ester,... [1S-[1alpha(Z),7(2S*,3R*),7aalpha]]-
U031	71-36-3	n-Butyl alcohol (I)
U136	75-60-5	Cacodylic acid
U032	13765-19-0	Calcium chromate
U372	10605-21-7	Carbamic acid, 1H-benzimidazol-2-yl, methyl
U271	17804-35-2	Carbamic acid, [1-[(butylamino)carbonyl]-1H-benzimidazol-2-yl]-, methyl ester. (5/96)
U280	101-27-9	Carbamic acid, (3-chlorophenyl)-, 4-chloro-2-butynyl ester. (5/96)
U373	122-42-9	Carbamic acid, phenyl-, 1-methylethyl ester.
U409	23564-05-8	Carbamic acid, [1,2-phenylenebis(iminocarbonothioyl)]bis-, dimethyl ester. (5/96)
U238	51-79-6	Carbamic acid, ethyl ester
U178	615-53-2	Carbamic acid, methylnitroso-, ethyl ester
U097	79-44-7	Carbamic chloride, dimethyl-
U114	¹ 111-54-6	Carbamodithioic acid, 1,2-ethanediybis-, salts & esters
U062	2303-16-4	Carbamothioic acid, bis(1-methylethyl)-, S-(2,3-dichloro-2-propenyl) ester
U389	2303-17-5	Carbamothioic acid, bis(1-methylethyl)-, S-(2,3,3-trichloro-2-propenyl) ester. (5/96)

261.33(f) Lists of Subpart D Toxic Hazardous Wastes		
HW #	CAS#	Substance (11/90; 12/92; 12/93; 5/96, 9/98)
U387	52888-80-9	Carbamothioic acid, dipropyl-, S-(phenylmethyl) ester. (5/96)
U279	63-25-2	Carbaryl. (5/96)
U372	10605-21-7	Carbendazim. (5/96)
U367	1563-38-8	Carbofuran phenol. (5/96)
U215	6533-73-9	Carbonic acid, dithallium(1+) salt
U033	353-50-4	Carbonic difluoride
U156	79-22-1	Carbonochloridic acid, methyl ester (I, T)
U033	353-50-4	Carbon oxyfluoride (R, T)
U211	56-23-5	Carbon tetrachloride
U034	75-87-6	Chloral
U035	305-03-3	Chlorambucil
U036	57-74-9	Chlordane, alpha & gamma isomers
U026	494-03-1	Chlornaphazin
U037	108-90-7	Chlorobenzene
U038	510-15-6	Chlorobenzilate
U039	59-50-7	p-Chloro-m-cresol
U042	110-75-8	2-Chloroethyl vinyl ether
U044	67-66-3	Chloroform
U046	107-30-2	Chloromethyl methyl ether
U047	91-58-7	beta-Chloronaphthalene
U048	95-57-8	o-Chlorophenol
U049	3165-93-3	4-Chloro-o-toluidine, hydrochloride
U032	13765-19-0	Chromic acid H ₂ CrO ₄ , calcium salt
U050	218-01-9	Chrysene
U051	----	Creosote
U052	1319-77-3	Cresol (Cresylic acid)
U053	4170-30-3	Crotonaldehyde
U055	98-82-8	Cumene (I)
U246	506-68-3	Cyanogen bromide (CN)Br
U197	106-51-4	2,5-Cyclohexadiene-1,4-dione
U056	110-82-7	Cyclohexane (I)
U129	58-89-9	Cyclohexane, 1,2,3,4,5,6-hexachloro-, (1alpha,2alpha,3beta,4alpha,5alpha,6beta)-
U057	108-94-1	Cyclohexanone (I)
U130	77-47-4	1,3-Cyclopentadiene, 1,2,3,4,5,5-hexachloro-
U058	50-18-0	Cyclophosphamide
U240	¹ 94-75-7	2,4-D, salts & esters
U059	20830-81-3	Daunomycin
U060	72-54-8	DDD
U061	50-29-3	DDT
U062	2303-16-4	Diallate
U063	53-70-3	Dibenz[a,h]anthracene
U064	189-55-9	Dibenzo[a,i]pyrene
U066	96-12-8	1,2-Dibromo-3-chloropropane
U069	84-74-2	Dibutyl phthalate

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261.33(f) Lists of Subpart D Toxic Hazardous Wastes		
HW #	CAS#	Substance (11/90; 12/92; 12/93; 5/96, 9/98)
U070	95-50-1	o-Dichlorobenzene
U071	541-73-1	m-Dichlorobenzene
U072	106-46-7	p-Dichlorobenzene
U073	91-94-1	3,3'-Dichlorobenzidine
U074	764-41-0	1,4-Dichloro-2-butene (I, T)
U075	75-71-8	Dichlorodifluoromethane
U078	75-35-4	1,1-Dichloroethylene
U079	156-60-5	1,2-Dichloroethylene
U025	111-44-4	Dichloroethyl ether
U027	108-60-1	Dichloroisopropyl ether
U024	111-91-1	Dichloromethoxy ethane
U081	120-83-2	2,4-Dichlorophenol
U082	87-65-0	2,6-Dichlorophenol
U084	542-75-6	1,3-Dichloropropene
U085	1464-53-5	1,2:3,4-Diepoxybutane (I, T)
U108	123-91-1	1,4-Diethyleneoxide
U028	117-81-7	Diethylhexyl phthalate
U395	5952-26-1	Diethylene glycol, dicarbamate. (5/96)
U086	1615-80-1	N,N'-Diethylhydrazine
U087	3288-58-2	O,O-Diethyl S-methyl dithiophosphate
U088	84-66-2	Diethyl phthalate
U089	56-53-1	Diethylstilbesterol
U090	94-58-6	Dihydrosafrole
U091	119-90-4	3,3'-Dimethoxybenzidine
U092	124-40-3	Dimethylamine (I)
U093	60-11-7	p-Dimethylaminoazobenzene
U094	57-97-6	7,12-Dimethylbenz[a]anthracene
U095	119-93-7	3,3'-Dimethylbenzidine
U096	80-15-9	alpha,alpha-Dimethylbenzylhydroperoxide (R)
U097	79-44-7	Dimethylcarbamoyl chloride
U098	57-14-7	1,1-Dimethylhydrazine
U099	540-73-8	1,2-Dimethylhydrazine
U101	105-67-9	2,4-Dimethylphenol
U102	131-11-3	Dimethyl phthalate
U103	77-78-1	Dimethyl sulfate
U105	121-14-2	2,4-Dinitrotoluene
U106	606-20-2	2,6-Dinitrotoluene
U107	117-84-0	Di-n-octyl phthalate
U108	123-91-1	1,4-Dioxane
U109	122-66-7	1,2-Diphenylhydrazine
U110	142-84-7	Dipropylamine (I)
U111	621-64-7	Di-n-propylnitrosamine
U041	106-89-8	Epichlorohydrin
U001	75-07-0	Ethanal (I)
U174	55-18-5	Ethanamine, N-ethyl-N-nitroso-
U404	121-44-8	Ethanamine, N,N-diethyl- (5/96)
U155	91-80-5	1,2-Ethanediamine, N,N-dimethyl-N'-2- pyridinyl-N'-(2-thienylmethyl)-
U067	106-93-4	Ethane, 1,2-dibromo-
U076	75-34-3	Ethane, 1,1-dichloro-
U077	107-06-2	Ethane, 1,2-dichloro-

261.33(f) Lists of Subpart D Toxic Hazardous Wastes		
HW #	CAS#	Substance (11/90; 12/92; 12/93; 5/96, 9/98)
U131	67-72-1	Ethane, hexachloro-
U024	111-91-1	Ethane, 1,1'-[methylenebis(oxy)]bis[2-chloro-
U117	60-29-7	Ethane, 1,1'-oxybis-(I)
U025	111-44-4	Ethane, 1,1'-oxybis[2-chloro-
U184	76-01-7	Ethane, pentachloro-
U208	630-20-6	Ethane, 1,1,1,2-tetrachloro-
U209	79-34-5	Ethane, 1,1,2,2-tetrachloro-
U218	62-55-5	Ethanethioamide
U226	71-55-6	Ethane, 1,1,1-trichloro-
U227	79-00-5	Ethane, 1,1,2-trichloro-
U410	59669-26-0	Ethanimidothioic acid, N,N'-[thiobis[(methylimino)carbonyloxy]]bis-, dimethyl ester (5/96)
U394	30558-43-1	Ethanimidothioic acid, 2-(dimethylamino)-N- hydroxy-2-oxo-, methyl ester.
U359	110-80-5	Ethanol, 2-ethoxy-
U173	1116-54-7	Ethanol, 2,2'-(nitrosoimino)bis-
U395	5952-26-1	Ethanol, 2,2'-oxybis-, dicarbamate. (5/96)
U004	98-86-2	Ethanone, 1-phenyl-
U043	75-01-4	Ethene, chloro-
U042	110-75-8	Ethene, (2-chloroethoxy)-
U078	75-35-4	Ethene, 1,1-dichloro-
U079	156-60-5	Ethene, 1,2-dichloro-, (E)-
U210	127-18-4	Ethene, tetrachloro-
U228	79-01-6	Ethene, trichloro-
U112	141-78-6	Ethyl acetate (I)
U113	140-88-5	Ethyl acrylate (I)
U238	51-79-6	Ethyl carbamate (urethane)
U117	60-29-7	Ethyl ether (I)
U114	¹ 111-54-6	Ethylenebisdithiocarbamic acid, salts & esters
U067	106-93-4	Ethylene dibromide
U077	107-06-2	Ethylene dichloride
U359	110-80-5	Ethylene glycol monoethyl ether
U115	75-21-8	Ethylene oxide (I, T)
U116	96-45-7	Ethylenethiourea
U076	75-34-3	Ethylidene dichloride
U118	97-63-2	Ethyl methacrylate
U119	62-50-0	Ethyl methanesulfonate
U120	206-44-0	Fluoranthene
U122	50-00-0	Formaldehyde
U123	64-18-6	Formic acid (C, T)
U124	110-00-9	Furan (I)
U125	98-01-1	2-Furancarboxaldehyde (I)
U147	108-31-6	2,5-Furandione
U213	109-99-9	Furan, tetrahydro-(I)
U125	98-01-1	Furfural (I)
U124	110-00-9	Furfuran (I)
U206	18883-66-4	Glucopyranose, 2-deoxy-2-(3-methyl-3-nitrosoureido)-, D-
U206	18883-66-4	D-Glucose, 2-deoxy-2-[[[(methylnitrosoamino)- carbonyl]amino]-
U126	765-34-4	Glycidylaldehyde
U163	70-25-7	Guanidine, N-methyl-N'-nitro-N-nitroso-

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261.33(f) Lists of Subpart D Toxic Hazardous Wastes		
HW #	CAS#	Substance (11/90; 12/92; 12/93; 5/96, 9/98)
U127	118-74-1	Hexachlorobenzene
U128	87-68-3	Hexachlorobutadiene
U130	77-47-4	Hexachlorocyclopentadiene
U131	67-72-1	Hexachloroethane
U132	70-30-4	Hexachlorophene
U243	1888-71-7	Hexachloropropene
U133	302-01-2	Hydrazine (R, T)
U086	1615-80-1	Hydrazine, 1,2-diethyl-
U098	57-14-7	Hydrazine, 1,1-dimethyl-
U099	540-73-8	Hydrazine, 1,2-dimethyl-
U109	122-66-7	Hydrazine, 1,2-diphenyl-
U134	7664-39-3	Hydrofluoric acid (C, T)
U134	7664-39-3	Hydrogen fluoride (C, T)
U135	7783-06-4	Hydrogen sulfide
U135	7783-06-4	Hydrogen sulfide H ₂ S
U096	80-15-9	Hydroperoxide, 1-methyl-1-phenylethyl- (R)
U116	96-45-7	2-Imidazolidinethione
U137	193-39-5	Indeno[1,2,3-cd]pyrene
U190	85-44-9	1,3-Isobenzofurandione
U140	78-83-1	Isobutyl alcohol (I, T)
U141	120-58-1	Isosafrole
U142	143-50-0	Kepone
U143	303-34-4	Lasiocarpine
U144	301-04-2	Lead acetate
U146	1335-32-6	Lead, bis(acetato-O)tetrahydroxytri-
U145	7446-27-7	Lead phosphate
U146	1335-32-6	Lead subacetate
U129	58-89-9	Lindane
U163	70-25-7	MNNG
U147	108-31-6	Maleic anhydride
U148	123-33-1	Maleic hydrazide
U149	109-77-3	Malononitrile
U150	148-82-3	Melphalan
U151	7439-97-6	Mercury
U152	126-98-7	Methacrylonitrile (I, T)
U092	124-40-3	Methanamine, N-methyl- (I)
U029	74-83-9	Methane, bromo-
U045	74-87-3	Methane, chloro- (I, T)
U046	107-30-2	Methane, chloromethoxy-
U068	74-95-3	Methane, dibromo-
U080	75-09-2	Methane, dichloro-
U075	75-71-8	Methane, dichlorodifluoro-
U138	74-88-4	Methane, iodo-
U119	62-50-0	Methanesulfonic acid, ethyl ester

261.33(f) Lists of Subpart D Toxic Hazardous Wastes		
HW #	CAS#	Substance (11/90; 12/92; 12/93; 5/96, 9/98)
U211	56-23-5	Methane, tetrachloro-
U153	74-93-1	Methanethiol (I, T)
U225	75-25-2	Methane, tribromo-
U044	67-66-3	Methane, trichloro-
U121	75-69-4	Methane, trichlorofluoro-
U036	57-74-9	4,7-Methano-1H-indene, 1,2,4,5,6,7,8,8- octachloro-2,3,3a,4,7,7a-hexahydro-
U154	67-56-1	Methanol (I)
U155	91-80-5	Methapyrilene
U142	143-50-0	1,3,4-Metheno-2H-cyclobuta[cd]pentalen-2-one, 1,1a,3,3a,4,5,5,5a,5b,6-decachlorooctahydro-
U247	72-43-5	Methoxychlor
U154	67-56-1	Methyl alcohol (I)
U029	74-83-9	Methyl bromide
U186	504-60-9	1-Methylbutadiene (I)
U045	74-87-3	Methyl chloride (I, T)
U156	79-22-1	Methyl chlorocarbonate (I, T)
U226	71-55-6	Methyl chloroform
U157	56-49-5	3-Methylcholanthrene
U158	101-14-4	4,4'-Methylenebis(2-chloroaniline)
U068	74-95-3	Methylene bromide
U080	75-09-2	Methylene chloride
U159	78-93-3	Methyl ethyl ketone (MEK) (I, T)
U160	1338-23-4	Methyl ethyl ketone peroxide (R, T)
U138	74-88-4	Methyl iodide
U161	108-10-1	Methyl isobutyl ketone (I)
U162	80-62-6	Methyl methacrylate (I, T)
U161	108-10-1	4-Methyl-2-pentanone (I)
U164	56-04-2	Methylthiouracil
U010	50-07-7	Mitomycin C
U059	20830-81-3	5,12-Naphthacenedione, 8-acetyl-10-[(3-amino-2,3,6-trideoxy)-alpha-L-lyxohexopyranosyl]oxy]-7,8,9,10-tetrahydro-6,8,11-trihydroxy-1-methoxy-, (8S-cis)-
U167	134-32-7	1-Naphthalenamine
U168	91-59-8	2-Naphthalenamine
U026	494-03-1	Naphthalenamine, N,N'-bis(2-chloroethyl)-
U165	91-20-3	Naphthalene
U047	91-58-7	Naphthalene, 2-chloro-
U166	130-15-4	1,4-Naphthalenedione
U236	72-57-1	2,7-Naphthalenedisulfonic acid, 3,3'-[(3,3'-dimethyl[1,1'-biphenyl]-4,4'-diyl)bis(azo)bis[5-amino-4-hydroxy]-, tetrasodium salt
U279	63-25-2	1-Naphthalenol, methylcarbamate. (5/96)
U166	130-15-4	1,4-Naphthoquinone
U167	134-32-7	alpha-Naphthylamine
U168	91-59-8	beta-Naphthylamine
U217	10102-45-1	Nitric acid, thallium(1+) salt
U169	98-95-3	Nitrobenzene (I, T)
U170	100-02-7	p-Nitrophenol
U171	79-46-9	2-Nitropropane (I, T)
U172	924-16-3	N-Nitrosodi-n-butylamine
U173	1116-54-7	N-Nitrosodiethanolamine
U174	55-18-5	N-Nitrosodiethylamine
U176	759-73-9	N-Nitroso-N-ethylurea

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261.33(f) Lists of Subpart D Toxic Hazardous Wastes		
HW #	CAS#	Substance (11/90; 12/92; 12/93; 5/96, 9/98)
U177	684-93-5	N-Nitroso-N-methylurea
U178	615-53-2	N-Nitroso-N-methylurethane
U179	100-75-4	N-Nitrosopiperidine
U180	930-55-2	N-Nitrosopyrrolidine
U181	99-55-8	5-Nitro-o-toluidine
U193	1120-71-4	1,2-Oxathiolane, 2,2-dioxide
U058	50-18-0	2H-1,3,2-Oxazaphosphorin-2-amine, N,N- bis(2-chloroethyl)tetrahydro-, 2-oxide
U115	75-21-8	Oxirane (I, T)
U126	765-34-4	Oxiranecarboxyaldehyde
U041	106-89-8	Oxirane, (chloromethyl)-
U182	123-63-7	Paraldehyde
U183	608-93-5	Pentachlorobenzene
U184	76-01-7	Pentachloroethane
U185	82-68-8	Pentachloronitrobenzene (PCNB)
See F027	87-86-5	Pentachlorophenol
U161	108-10-1	Pentanol, 4-methyl-
U186	504-60-9	1,3-Pentadiene (I)
U187	62-44-2	Phenacetin
U188	108-95-2	Phenol
U048	95-57-8	Phenol, 2-chloro-
U039	59-50-7	Phenol, 4-chloro-3-methyl-
U081	120-83-2	Phenol, 2,4-dichloro-
U082	87-65-0	Phenol, 2,6-dichloro-
U089	56-53-1	Phenol, 4,4'-(1,2-diethyl-1,2-ethenediyl)bis-, (E)-
U101	105-67-9	Phenol, 2,4-dimethyl-
U052	1319-77-3	Phenol, methyl-
U132	70-30-4	Phenol, 2,2'-methylenebis[3,4,6-trichloro-
U411	114-26-1	Phenol, 2-(1-methylethoxy)-, methylcarbamate. (5/96)
U170	100-02-7	Phenol, 4-nitro-
See F027	87-86-5	Phenol, pentachloro-
See F027	58-90-2	Phenol, 2,3,4,6-tetrachloro-
See F027	95-95-4	Phenol, 2,4,5-trichloro-
See F027	88-06-2	Phenol, 2,4,6-trichloro-
U150	148-82-3	L-Phenylalanine, 4-[bis(2-chloroethyl)amino]-
U145	7446-27-7	Phosphoric acid, lead(2+) salt (2:3)
U087	3288-58-2	Phosphorodithioic acid, O,O-diethyl S-methyl ester
U189	1314-80-3	Phosphorus sulfide (R)
U190	85-44-9	Phthalic anhydride
U191	109-06-8	2-Picoline
U179	100-75-4	Piperidine, 1-nitroso-
U192	23950-58-5	Pronamide
U194	107-10-8	1-Propanamine (I, T)
U111	621-64-7	1-Propanamine, N-nitroso-N-propyl-

261.33(f) Lists of Subpart D Toxic Hazardous Wastes		
HW #	CAS#	Substance (11/90; 12/92; 12/93; 5/96, 9/98)
U110	142-84-7	1-Propanamine, N-propyl- (I)
U066	96-12-8	Propane, 1,2-dibromo-3-chloro-
U083	78-87-5	Propane, 1,2-dichloro-
U149	109-77-3	Propanedinitrile
U171	79-46-9	Propane, 2-nitro- (I, T)
U027	108-60-1	Propane, 2,2'-oxybis[2-chloro-
U193	1120-71-4	1,3-Propane sultone
See F027	93-72-1	Propanoic acid, 2-(2,4,5-trichlorophenoxy)-
U235	126-72-7	1-Propanol, 2,3-dibromo-, phosphate (3:1)
U140	78-83-1	1-Propanol, 2-methyl- (I, T)
U002	67-64-1	2-Propanone (I)
U007	79-06-1	2-Propenamide
U084	542-75-6	1-Propene, 1,3-dichloro-
U243	1888-71-7	1-Propene, 1,1,2,3,3,3-hexachloro-
U009	107-13-1	2-Propenenitrile
U152	126-98-7	2-Propenenitrile, 2-methyl- (I, T)
U008	79-10-7	2-Propenoic acid (I)
U113	140-88-5	2-Propenoic acid, ethyl ester (I)
U118	97-63-2	2-Propenoic acid, 2-methyl-, ethyl ester
U162	80-62-6	2-Propenoic acid, 2-methyl-, methyl ester (I, T)
U373	112-42-9	Propham. (5/96)
U411	114-26-1	Propoxur. (5/96)
U194	107-10-8	n-Propylamine (I, T)
U083	78-87-5	Propylene dichloride
U387	52888-80-9	Prosulfocarb. (5/96)
U148	123-33-1	3,6-Pyridazinedione, 1,2-dihydro-
U196	110-86-1	Pyridine
U191	109-06-8	Pyridine, 2-methyl-
U237	66-75-1	2,4-(1H,3H)-Pyrimidinedione, 5-[bis(2-chloroethyl)amino]-
U164	56-04-2	4(1H)-Pyrimidinone, 2,3-dihydro-6-methyl-2-thioxo-
U180	930-55-2	Pyrrolidine, 1-nitroso-
U200	50-55-5	Reserpine
U201	108-46-3	Resorcinol
U203	94-59-7	Safrole
U204	7783-00-8	Selenious acid
U204	7783-00-8	Selenium dioxide
U205	7488-56-4	Selenium sulfide
U205	7488-56-4	Selenium sulfide SeS ₂ (R, T)
U015	115-02-6	L-Serine, diazoacetate (ester)
See F027	93-72-1	Silvex (2,4,5-TP)
U206	18883-66-4	Streptozotocin
U103	77-78-1	Sulfuric acid, dimethyl ester
U189	1314-80-3	Sulfur phosphide (R)

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261.33(f) Lists of Subpart D Toxic Hazardous Wastes		
HW #	CAS#	Substance (11/90; 12/92; 12/93; 5/96, 9/98)
See F027	93-76-5	2,4,5-T
U207	95-94-3	1,2,4,5-Tetrachlorobenzene
U208	630-20-6	1,1,1,2-Tetrachloroethane
U209	79-34-5	1,1,2,2-Tetrachloroethane
U210	127-18-4	Tetrachloroethylene
See F027	58-90-2	2,3,4,6-Tetrachlorophenol
U213	109-99-9	Tetrahydrofuran (I)
U214	563-68-8	Thallium(I) acetate
U215	6533-73-9	Thallium(I) carbonate
U216	7791-12-0	Thallium(I) chloride
U216	7791-12-0	Thallium chloride TlCl
U217	10102-45-1	Thallium(I) nitrate
U218	62-55-5	Thioacetamide
U410	59669-26-0	Thiodicarb. (5/96)
U153	74-93-1	Thiomethanol (I, T)
U244	137-26-8	Thioperoxydicarbonic diamide [(H ₂ N)C(S)] ₂ S ₂ ,tetramethyl-
U409	23564-05-8	Thiophanate-methyl. (5/96)
U219	62-56-6	Thiourea
U244	137-26-8	Thiram
U220	108-88-3	Toluene
U221	25376-45-8	Toluenediamine
U223	26471-62-5	Toluene diisocyanate (R, T)
U328	95-53-4	o-Toluidine
U353	106-49-0	p-Toluidine
U222	636-21-5	o-Toluidine hydrochloride
U389	2303-17-5	Triallate. (5/96)
U011	61-82-5	1H-1,2,4-Triazol-3-amine
U227	79-00-5	1,1,2-Trichloroethane
U228	79-01-6	Trichloroethylene
U121	75-69-4	Trichloromonofluoromethane
See F027	95-95-4	2,4,5-Trichlorophenol
See F027	88-06-2	2,4,6-Trichlorophenol
U404	121-44-8	Triethylamine.(5/96)
U234	99-35-4	1,3,5-Trinitrobenzene (R, T)
U182	123-63-7	1,3,5-Trioxane, 2,4,6-trimethyl-
U235	126-72-7	Tris(2,3-dibromopropyl) phosphate
U236	72-57-1	Trypan blue
U237	66-75-1	Uracil mustard
U176	759-73-9	Urea, N-ethyl-N-nitroso-
U177	684-93-5	Urea, N-methyl-N-nitroso-
U043	75-01-4	Vinyl chloride

261.33(f) Lists of Subpart D Toxic Hazardous Wastes		
HW #	CAS#	Substance (11/90; 12/92; 12/93; 5/96, 9/98)
U248	¹ 81-81-2	Warfarin, & salts, when present at concentrations of 0.3% or less
U239	1330-20-7	Xylene (I)
U200	50-55-5	Yohimban-16-carboxylic acid, 11,17-dimethoxy-18-[(3,4,5-trimethoxybenzoyl)oxy]-, methyl ester, (3beta,16beta,17alpha,18beta,20alpha)-
U249	1314-84-7	Zinc phosphide Zn ₃ P ₂ , when present at concentrations of 10% or less

¹CAS Number given for parent compound only.

61-79.261 Appendix VIII Hazardous Constituents. Modify the table to remove "Saccharin" and "Saccharin salts".

Appendix VIII Hazardous Constituents		
Common name	Chemical abstracts name (9/98)	CAS #
A2213 (5/96)	Ethanimidothioic acid, 2- (dimethylamino) -N-hydroxy-2-oxo-, methyl ester	30558-43-1
Acetonitrile	Same	75-05-8
Acetophenone	Ethanone, 1-phenyl-	98-86-2
2-Acetylaminefluorone	Acetamide, N-9H-fluoren-2-yl-	53-96-3
Acetyl chloride	Same	75-36-5
1-Acetyl-2-thiourea	Acetamide, N-(aminothioxomethyl)-	591-08-2
Acrolein	2-Propenal	107-02-8
Acrylamide	2-Propenamamide	79-06-1
Acrylonitrile	2-Propenenitrile	107-13-1
Aflatoxins	Same	1402-68-2
Aldicarb	Propanal, 2-methyl-2-(methylthio)-, O-[(methylamino)carbonyl]oxime	116-06-3
Aldicarb sulfone (5/96)	Propanal, 2-methyl-2-(methylsulfonyl), O-[(methylamino)carbonyl] oxime	1646-88-4
Aldrin	1,4,5,8-Dimethanonaphthalene, 1,2,3,4,10,10-hexachloro-1,4,4a,5,8,8a-hexahydro-, (1alpha,4alpha,4abeta,5alpha,8alpha,8abeta)-	309-00-2
Allyl alcohol	2-Propen-1-ol	107-18-6
Allyl chloride	1-Propane, 3-chloro	107-05-1
Aluminum phosphide	Same	20859-73-8
4-Aminobiphenyl	[1,1'-Biphenyl]-4-amine	92-67-1
5-(Aminomethyl)-3-isoxazolol	3(2H)-Isoxazolone, 5-(aminomethyl)-	2763-96-4
4-Aminopyridine	4-Pyridinamine	504-24-5
Amitrole	1H-1,2,4-Triazol-3-amine	61-82-5
Ammonium vanadate	Vanadic acid, ammonium salt	7803-55-6
Aniline	Benzenamine	62-53-3
o-Anisidine (2-methoxyaniline)	Benzenamine, 2-Methoxy-	90-04-0
Antimony	Same	7440-36-0
Antimony compounds, N.O.S. ¹		
Aramite	Sulfurous acid, 2-chloroethyl 2-[4-(1,1-dimethylethyl)phenoxy]-1-methylethyl ester	140-57-8
Arsenic	Same	7440-38-2
Arsenic compounds, N.O.S. ¹		

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Appendix VIII Hazardous Constituents		
Common name	Chemical abstracts name (9/98)	CAS #
Arsenic acid	Arsenic acid H ₃ AsO ₄	7778-39-4
Arsenic pentoxide	Arsenic oxide As ₂ O ₅	1303-28-2
Arsenic trioxide	Arsenic oxide As ₂ O ₃	1327-53-3
Auramine	Benzenamine, 4,4'-carbonimidoylbis[N,N-dimethyl	492-80-8
Azaserine	L-Serine, diazoacetate (ester)	115-02-6
Barban (5/96)	Carbamic acid, (3-chlorophenyl) -, 4-chloro-2-butynyl ester	101-27-9
Barium	Same	7440-39-3
Barium compounds, N.O.S. ¹		
Barium cyanide	Same	542-62-1
Bendiocarb (5/96)	1,3-Benzodioxol-4-ol, 2,2-dimethyl-, methyl carbamate	22781-23-3
Bendiocarb phenol (5/96)	1,3-Benzodioxol-4-ol, 2,2-dimethyl-,	22961-82-6
Benomyl (5/96)	Carbamic acid, [1- [(butylamino) carbonyl]- 1H-benzimidazol-2-yl] -, methyl ester	17804-35-2
Benz[c]acridine	Same	225-51-4
Benz[a]anthracene	Same	56-55-3
Benzal chloride	Benzene, (dichloromethyl)-	98-87-3
Benzene	Same	71-43-2
Benzeneearsonic acid	Arsonic acid, phenyl-	98-05-5
Benzidine	[1,1'-Biphenyl]-4,4'-diamine	92-87-5
Benzo[b]fluoranthene	Benz[e]acephenanthrylene	205-99-2
Benzo[j]fluoranthene	Same	205-82-3
Benzo(k)fluoranthene (5/96)	Same	207-08-9
Benzo[a]pyrene	Same	50-32-8
p-Benzoquinone	2,5-Cyclohexadiene-1,4-dione	106-51-4
Benzotrichloride	Benzene, (trichloromethyl)-	98-07-7
Benzyl chloride	Benzene, (chloromethyl)-	100-44-7
Beryllium powder	Same	7440-41-7
Beryllium compounds, N.O.S. ¹		
Bis (pentamethylene)- thiuram tetrasulfide.	Piperidine, 1,1'-(tetrathiodicarbonothioyl)-bis-	120-54-7
Bromoacetone	2-Propanone, 1-bromo-	598-31-2
Bromoform	Methane, tribromo-	75-25-2
4-Bromophenyl phenyl ether	Benzene, 1-bromo-4-phenoxy-	101-55-3
Brucine	Strychnidin-10-one, 2,3-dimethoxy-	357-57-3
Butyl benzyl phthalate	1,2-Benzenedicarboxylic acid, butyl phenylmethyl ester	85-68-7
Butylate (5/96)	Carbamothioic acid, bis (2-methylpropyl)-, S-ethyl ester	2008-41-5
Cacodylic acid	Arsinic acid, dimethyl-	75-60-5
Cadmium	Same	7440-43-9
Cadmium compounds, N.O.S. ¹		
Calcium chromate	Chromic acid H ₂ CrO ₄ , calcium salt	13765-19-0
Calcium cyanide	Calcium cyanide Ca(CN) ₂	592-01-8
Carbaryl (5/96)	1-Naphthalenol, methylcarbamate	63-25-2
Carbendazim (5/96)	Carbamic acid, 1H-benzimidazol-2-yl, methyl ester	10605-21-7
Carbofuran (5/96)	7-Benzofuranol, 2,3-dihydro-2,2-dimethyl-, methylcarbamate	1563-66-2
Carbofuran phenol (9/96)	7-Benzofuranol, 2,3-dihydro-2,2-dimethyl-	1563-38-8

Appendix VIII Hazardous Constituents		
Common name	Chemical abstracts name (9/98)	CAS #
Carbon disulfide	Same	75-15-0
Carbon oxyfluoride	Carbonic difluoride	353-50-4
Carbon tetrachloride	Methane, tetrachloro-	56-23-5
Carbosulfan (6/96)	Carbamic acid, [(dibutylamino) thio] methyl-, 2,3-dihydro-2,2-dimethyl-7-benzofuranyl ester	55285-14-8
Chloral	Acetaldehyde, trichloro-	75-87-6
Chlorambucil	Benzenebutanoic acid, 4-[bis(2-chloroethyl)amino]-	305-03-3
Chlordane	4,7-Methano-1H-indene, 1,2,4,5,6,7,8,8-octachloro-2,3,3a,4,7,7a-hexahydro-	57-74-9
Chlordane (alpha and gamma isomers)		
Chlorinated benzenes, N.O.S. ¹		
Chlorinated ethane, N.O.S. ¹		
Chlorinated fluorocarbons, N.O.S. ¹		
Chlorinated naphthalene, N.O.S. ¹		
Chlorinated phenol, N.O.S. ¹		
Chlornaphazin	Naphthalenamine, N,N'-bis(2-chloroethyl)-	494-03-1
Chloroacetaldehyde	Acetaldehyde, chloro-	107-20-0
Chloroalkyl ethers, N.O.S. ¹		
p-Chloroaniline	Benzenamine, 4-chloro-	106-47-8
Chlorobenzene	Benzene, chloro-	108-90-7
Chlorobenzilate	Benzeneacetic acid, 4-chloro-alpha-(4-chlorophenyl)-alpha-hydroxy-, ethyl ester	510-15-6
p-Chloro-m-cresol	Phenol, 4-chloro-3-methyl-	59-50-7
2-Chloroethyl vinyl ether	Ethene, (2-chloroethoxy)-	110-75-8
Chloroform	Methane, trichloro-	67-66-3
Chloromethyl methyl ether	Methane, chloromethoxy-	107-30-2
beta-Chloronaphthalene	Naphthalene, 2-chloro-	91-58-7
o-Chlorophenol	Phenol, 2-chloro-	95-57-8
1-(o-Chlorophenyl)thiourea	Thiourea, (2-chlorophenyl)-	5344-82-1
Chloroprene	1,3-Butadiene, 2-chloro-	126-99-8
3-Chloropropionitrile	Propanenitrile, 3-chloro-	542-76-7
Chromium	Same	7440-47-3
Chromium compounds, N.O.S. ¹		
Chrysene	Same	218-01-9
Citrus red No. 2	2-Naphthalenol, 1-[(2,5-dimethoxyphenyl)azo]-	6358-53-8
Coal tar creosote	Same	8007-45-2
Copper cyanide	Copper cyanide CuCN	544-92-3
Copper dimethyldithiocarbamate	Copper, bis(dimethylcarbmodithioato-S,S')-, (6/96)	137-29-1
Creosote	Same	
p-Cresidine	2-Methoxy-5-methylbenzenamine	120-71-8
Cresol (Cresylic acid)	Phenol, methyl-	1319-77-3
Crotonaldehyde	2-Butenal	4170-30-3

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Appendix VIII Hazardous Constituents		
Common name	Chemical abstracts name (9/98)	CAS #
m-Cumenyl methylcarbamate	Phenol, 3-(methylethyl)-, methyl carbamate (5/96)	64-00-6
Cyanides (soluble salts and complexes) N.O.S. ¹		
Cyanogen	Ethanedinitrile	460-19-5
Cyanogen bromide	Cyanogen bromide (CN)Br	506-68-3
Cyanogen chloride	Cyanogen chloride (CN)Cl	506-77-4
Cycasin	beta-D-Glucopyranoside, (methyl-ONN-azoxy)methyl	14901-08-7
Cycloate	Carbamothioic acid, cyclohexylethyl-, S-ethyl ester	1134-23-2
2-Cyclohexyl-4,6-dinitrophenol	Phenol, 2-cyclohexyl-4,6-dinitro-	131-89-5
Cyclophosphamide	2H-1,3,2-Oxazaphosphorin-2-amine, N,N-bis(2-chloroethyl)tetrahydro-, 2-oxide	50-18-0
2,4-D	Acetic acid, (2,4-dichlorophenoxy)-	94-75-7
2,4-D, salts, esters		
Daunomycin	5,12-Naphthacenedione, 8-acetyl-10-[(3-amino-2,3,6-trideoxy-alpha-L-lyxo-hexopyranosyl)oxy]-7,8,9,10-tetrahydro-6,8,11-trihydroxy-1-methoxy-, (8S-cis)-	20830-81-3
Dazomet (5/96)	2H-1,3,5-thiadiazine-2-thione,tetrahydro-3,5-dimethyl	533-74-4
DDD	Benzene, 1,1'-(2,2-dichloroethylidene)bis[4-chloro-	72-54-8
DDE	Benzene, 1,1'-(dichloroethenylidene)bis[4-chloro-	72-55-9
DDT	Benzene, 1,1'-(2,2,2-trichloroethylidene)bis[4-chloro-	50-29-3
Diallate	Carbamothioic acid, bis(1-methylethyl)-, S-(2,3-dichloro-2-propenyl) ester	2303-16-4
Dibenz[a,h]acridine	Same	226-36-8
Dibenz[a,j]acridine	Same	224-42-0
Dibenz[a,h]anthracene	Same	53-70-3
7H-Dibenzo[c,g]carbazole	Same	194-59-2
Dibenzo[a,e]pyrene	Naphtho[1,2,3,4-def]chrysene	192-65-4
Dibenzo[a,h]pyrene	Dibenzo[b,def]chrysene	189-64-0
Dibenzo[a,i]pyrene	Benzo[rs]pentaphene	189-55-9
1,2-Dibromo-3-chloropropane	Propane, 1,2-dibromo-3-chloro-	96-12-8
Dibutyl phthalate	1,2-Benzenedicarboxylic acid, dibutyl ester	84-74-2
o-Dichlorobenzene	Benzene, 1,2-dichloro-	95-50-1
m-Dichlorobenzene	Benzene, 1,3-dichloro-	541-73-1
p-Dichlorobenzene	Benzene, 1,4-dichloro-	106-46-7
Dichlorobenzene, N.O.S. ¹	Benzene, dichloro-	25321-22-6
3,3'-Dichlorobenzidine	[1,1'-Biphenyl]-4,4'-diamine, 3,3'-dichloro-	91-94-1
1,4-Dichloro-2-butene	2-Butene, 1,4-dichloro-	764-41-0
Dichlorodifluoromethane	Methane, dichlorodifluoro-	75-71-8
Dichloroethylene, N.O.S. ¹	Dichloroethylene	25323-30-2
1,1-Dichloroethylene	Ethene, 1,1-dichloro-	75-35-4
1,2-Dichloroethylene	Ethene, 1,2-dichloro-, (E)-	156-60-5
Dichloroethyl ether	Ethane, 1,1'-oxybis[2-chloro-	111-44-4
Dichloroisopropyl ether	Propane, 2,2'-oxybis[2-chloro-	108-60-1
Dichloromethoxy ethane	Ethane, 1,1'-[methylenebis(oxy)]bis[2-chloro-	111-91-1
Dichloromethyl ether	Methane, oxybis[chloro-	542-88-1
2,4-Dichlorophenol	Phenol, 2,4-dichloro-	120-83-2
2,6-Dichlorophenol	Phenol, 2,6-dichloro-	87-65-0

Appendix VIII Hazardous Constituents		
Common name	Chemical abstracts name (9/98)	CAS #
Dichlorophenylarsine	Arsonous dichloride, phenyl-	696-28-6
Dichloropropane, N.O.S. ¹	Propane, dichloro-	26638-19-7
Dichloropropanol, N.O.S. ¹	Propanol, dichloro-	26545-73-3
Dichloropropene, N.O.S. ¹	1-Propene, dichloro-	26952-23-8
1,3-Dichloropropene	1-Propene, 1,3-dichloro-	542-75-6
Dieldrin	2,7:3,6-Dimethanonaphth[2,3-b]oxirene, 3,4,5,6,9,9-hexachloro-1a,2,2a,3,6,6a,7,7a-octahydro-, (1aalpha,2beta,2aalpha,3beta,6beta, 6aalpha,7beta,7aalpha)-	60-57-1
1,2:3,4-Diepoxybutane	2,2'-Bioxirane	1464-53-5
Diethylarsine	Arsine, diethyl-	692-42-2
Diethylene glycol, dicarbamate (5/96)	Ethanol, 2,2'-oxybis-, dicarbamate	5952-26-1
1,4-Diethyleneoxide	1,4-Dioxane	123-91-1
Diethylhexyl phthalate	1,2-Benzenedicarboxylic acid, bis(2-ethylhexyl) ester	117-81-7
N,N'-Diethylhydrazine	Hydrazine, 1,2-diethyl-	1615-80-1
O,O-Diethyl S-methyl dithiophosphate	Phosphorodithioic acid, O,O-diethyl S-methyl ester	3288-58-2
Diethyl-p-nitrophenyl phosphate	Phosphoric acid, diethyl 4-nitrophenyl ester	311-45-5
Diethyl phthalate	1,2-Benzenedicarboxylic acid, diethyl ester	84-66-2
O,O-Diethyl O-pyrazinyl phosphorothioate	Phosphorothioic acid, O,O-diethyl O-pyrazinyl ester	297-97-2
Diethylstilbesterol	Phenol, 4,4'-(1,2-diethyl-1,2-ethenediyl)bis-, (E)-	56-53-1
Dihydrosafrole	1,3-Benzodioxole, 5-propyl-	94-58-6
Diisopropylfluorophosphate (DFP)	Phosphorofluoridic acid, bis(1-methylethyl) ester	55-91-4
Dimethoate	Phosphorodithioic acid, O,O-dimethyl S-[2-(methylamino)-2-oxoethyl] ester	60-51-5
3,3'-Dimethoxybenzidine	[1,1'-Biphenyl]-4,4'-diamine, 3,3'-dimethoxy-	119-90-4
p-Dimethylaminoazobenzene	Benzenamine, N,N-dimethyl-4-(phenylazo)-	60-11-7
2,4-Dimethylaniline (2,4-xylidine)	Benzenamine, 2,4-dimethyl-	95-68-1
7,12-Dimethylbenz[a]anthracene	Benz[a]anthracene, 7,12-dimethyl-	57-97-6
3,3'-Dimethylbenzidine	[1,1'-Biphenyl]-4,4'-diamine, 3,3'-dimethyl-	119-93-7
Dimethylcarbamoyl chloride	Carbamic chloride, dimethyl-	79-44-7
1,1-Dimethylhydrazine	Hydrazine, 1,1-dimethyl-	57-14-7
1,2-Dimethylhydrazine	Hydrazine, 1,2-dimethyl-	540-73-8
alpha,alpha-Dimethylphenethylamine	Benzeneethanamine, alpha,alpha-dimethyl-	122-09-8
2,4-Dimethylphenol	Phenol, 2,4-dimethyl-	105-67-9
Dimethyl phthalate	1,2-Benzenedicarboxylic acid, dimethyl ester	131-11-3
Dimethyl sulfate	Sulfuric acid, dimethyl ester	77-78-1
Dimetilan (5/96)	Carbamic acid, dimethyl-, 1-[(dimethylamino) carbonyl]-5-methyl-1H-pyrazol-3-yl ester	644-64-4
Dinitrobenzene, N.O.S. ¹	Benzene, dinitro-	25154-54-5

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Appendix VIII Hazardous Constituents		
Common name	Chemical abstracts name (9/98)	CAS #
4,6-Dinitro-o-cresol	Phenol, 2-methyl-4,6-dinitro-	534-52-1
4,6-Dinitro-o-cresol salts		
2,4-Dinitrophenol	Phenol, 2,4-dinitro-	51-28-5
2,4-Dinitrotoluene	Benzene, 1-methyl-2,4-dinitro-	121-14-2
2,6-Dinitrotoluene	Benzene, 2-methyl-1,3-dinitro-	606-20-2
Dinoseb	Phenol, 2-(1-methylpropyl)-4,6-dinitro-	88-85-7
Di-n-octyl phthalate	1,2-Benzenedicarboxylic acid, dioctyl ester	117-84-0
Diphenylamine	Benzenamine, N-phenyl-	122-39-4
1,2-Diphenylhydrazine	Hydrazine, 1,2-diphenyl-	122-66-7
Di-n-propylnitrosamine	1-Propanamine, N-nitroso-N-propyl-	621-64-7
Disulfiram (5/96)	Thioperoxydicarbonic diamide, tetraethyl	97-77-8
Disulfoton	Phosphorodithioic acid, O,O-diethyl S-[2-(ethylthio)ethyl] ester	298-04-4
Dithiobiuret	Thioimidodicarbonic diamide [(H ₂ N)C(S)] ₂ NH	541-53-7
Endosulfan	6,9-Methano-2,4,3-benzodioxathiepin, 6,7,8,9,10,10-hexachloro-1,5,5a,6,9,9a-hexahydro-, 3-oxide	115-29-7
Endothall	7-Oxabicyclo[2.2.1]heptane-2,3-dicarboxylic acid	145-73-3
Endrin	2,7:3,6-Dimethanonaphth[2,3-b]oxirene, 3,4,5,6,9,9-hexachloro-1a,2,2a,3,6,6a,7,7a-octahydro-, (1aalpha,2beta,2beta,3alpha,6alpha, 6abeta,7beta,7aalpha)-	72-20-8
Endrin metabolites		
Epichlorohydrin	Oxirane, (chloromethyl)-	106-89-8
Epinephrine	1,2-Benzenediol, 4-[1-hydroxy-2-(methylamino)ethyl]-, (R)-	51-43-4
EPTC	Carbamothioic acid, dipropyl-, S-ethyl ester	759-94-4
Ethyl carbamate (urethane)	Carbamic acid, ethyl ester	51-79-6
Ethyl cyanide	Propanenitrile	107-12-0
Ethylenebisdithiocarbamic acid	Carbamodithioic acid, 1,2-ethanediybis-	111-54-6
Ethylenebisdithiocarbamic acid, salts and esters		
Ethylene dibromide	Ethane, 1,2-dibromo-	106-93-4
Ethylene dichloride	Ethane, 1,2-dichloro-	107-06-2
Ethylene glycol monoethyl ether	Ethanol, 2-ethoxy-	110-80-5
Ethyleneimine	Aziridine	151-56-4
Ethylene oxide	Oxirane	75-21-8
Ethylenethiourea	2-Imidazolidinethione	96-45-7
Ethylidene dichloride	Ethane, 1,1-dichloro-	75-34-3
Ethyl methacrylate	2-Propenoic acid, 2-methyl-, ethyl ester	97-63-2
Ethyl methanesulfonate	Methanesulfonic acid, ethyl ester	62-50-0
Ethyl Ziram (5/96)	Zinc, bis(diethylcarbamodithioato-S,S')-	14324-55-1
Famphur	Phosphorothioic acid, O-[4-[(dimethylamino)sulfonyl]phenyl] O,O-dimethyl ester	52-85-7
Ferbam (5/96)	Iron, tris(dimethylcarbamodithioat-S,S')-,	14484-64-1
Fluoranthene	Same	206-44-0
Fluorine	Same	7782-41-4
Fluoroacetamide	Acetamide, 2-fluoro-	640-19-7
Fluoroacetic acid, sodium salt	Acetic acid, fluoro-, sodium salt	62-74-8
Formaldehyde	Same	50-00-0
Formetanate hydrochloride	Methanimidamide, N,N-dimethyl-N'-[3-[(methylamino)carbonyl]oxy]phenyl]-, monohydrochloride (5/96)	23422-53-9

Appendix VIII Hazardous Constituents		
Common name	Chemical abstracts name (9/98)	CAS #
Formic acid	Same	64-18-6
Formparanate (5/96)	Methanimidamide, N,N-dimethyl-N'-[2-methyl-4- [[[(methylamino) carbonyl]oxy]phenyl]-.	17702-57-7
Glycidylaldehyde	Oxiranecarboxyaldehyde	765-34-4
Halomethanes, N.O.S. ¹		
Heptachlor	4,7-Methano-1H-indene, 1,4,5,6,7,8,8-heptachloro-3a,4,7,7a-tetrahydro-	76-44-8
Heptachlor epoxide	2,5-Methano-2H-indeno[1,2-b]oxirene, 2,3,4,5,6,7,7-heptachloro-1a,1b,5,5a,6,6a-hexahydro-, (1aalpha,1bbeta,2alpha,5alpha, 5abeta,6beta,6aalpha)-	1024-57-3
Heptachlor epoxide (alpha, beta, and gamma isomers)		
Heptachlorodibenzofurans	(5/96)	
Heptachlorodibenzo-p-dioxins	(5/96)	
Hexachlorobenzene	Benzene, hexachloro-	118-74-1
Hexachlorobutadiene	1,3-Butadiene, 1,1,2,3,4,4-hexachloro-	87-68-3
Hexachlorocyclopentadiene	1,3-Cyclopentadiene, 1,2,3,4,5,5-hexachloro-	77-47-4
Hexachlorodibenzo-p-dioxins		
Hexachlorodibenzofurans		
Hexachloroethane	Ethane, hexachloro-	67-72-1
Hexachlorophene	Phenol, 2,2'-methylenebis[3,4,6-trichloro-	70-30-4
Hexachloropropene	1-Propene, 1,1,2,3,3,3-hexachloro-	1888-71-7
Hexaethyl tetraphosphate	Tetraphosphoric acid, hexaethyl ester	757-58-4
Hydrazine	Same	302-01-2
Hydrogen cyanide	Hydrocyanic acid	74-90-8
Hydrogen fluoride	Hydrofluoric acid	7664-39-3
Hydrogen sulfide	Hydrogen sulfide H ₂ S	7783-06-4
Indeno[1,2,3-cd]pyrene	Same	193-39-5
3-Iodo-2-propynyl n-butylcarbamate (5/96)	Carbamic acid, butyl-, 3-iodo-2-propynyl ester	55406-53-6
Isobutyl alcohol	1-Propanol, 2-methyl-	78-83-1
Isodrin	1,4,5,8-Dimethanonaphthalene, 1,2,3,4,10,10-hexachloro-1,4,4a,5,8,8a-hexahydro-,(1alpha,4alpha,4abeta,5beta,8beta,-8abeta) -	465-73-6
Isolan (5/96)	Carbamic acid, dimethyl-, 3-methyl-1-(1-methylethyl)-1H-pyrazol-5-yl ester	119-38-0
Isosafrole	1,3-Benzodioxole, 5-(1-propenyl)-	120-58-1
Kepone	1,3,4-Metheno-2H-cyclobuta[cd]pentalen-2-one, 1,1a,3,3a,4,5,5a,5b,6-decachlorooctahydro-	143-50-0
Lasiocarpine	2-Butenoic acid, 2-methyl-,7-[[2,3-dihydroxy-2-(1-methoxyethyl)-3-methyl-1-oxobutoxy]methyl]-2,3,5,7a-tetrahydro-1H-pyrrolizin-1-yl ester, [1S-[1alpha(Z),7(2S*,3R*),7aalpha]]-	303-34-4
Lead	Same	7439-92-1
Lead compounds, N.O.S. ¹		
Lead acetate	Acetic acid, lead(2+) salt	301-04-2
Lead phosphate	Phosphoric acid, lead(2+) salt (2:3)	7446-27-7
Lead subacetate	Lead, bis(acetato-O)tetrahydroxytri-	1335-32-6

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Appendix VIII Hazardous Constituents		
Common name	Chemical abstracts name (9/98)	CAS #
Lindane	Cyclohexane, 1,2,3,4,5,6-hexachloro-, (1alpha,2alpha,3beta,4alpha,5alpha,6beta)-	58-89-9
Maleic anhydride	2,5-Furandione	108-31-6
Maleic hydrazide	3,6-Pyridazinedione, 1,2-dihydro-	123-33-1
Malononitrile	Propanedinitrile	109-77-3
Manganese dimethyldithiocarbamate (5/96)	Manganese, bis(dimethylcarbamodithioato-S,S')-	15339-36-3
Melphalan	L-Phenylalanine, 4-[bis(2-chloroethyl)aminol]-	148-82-3
Mercury	Same	7439-97-6
Mercury compounds, N.O.S. ¹		
Mercury fulminate	Fulminic acid, mercury(2+) salt	628-86-4
Metam Sodium (5/96)	Carbamodithioic acid, methyl-, monosodium salt	137-42-8
Methacrylonitrile	2-Propenenitrile, 2-methyl-	126-98-7
Methapyrilene	1,2-Ethanediamine, N,N-dimethyl-N'-2-pyridinyl-N'-(2-thienylmethyl)-	91-80-5
Methiocarb (5/96)	Phenol, (3,5-dimethyl-4-(methylthio)-, methylcarbamate	2032-65-7
Methomyl	Ethanimidothioic acid, N-[[[(methylamino)carbonyl]oxy]-, methyl ester	16752-77-5
Methoxychlor	Benzene, 1,1'-(2,2,2-trichloroethylidene)bis[4-methoxy-	72-43-5
Methyl bromide	Methane, bromo-	74-83-9
Methyl chloride	Methane, chloro-	74-87-3
Methyl chlorocarbonate	Carbonochloridic acid, methyl ester	79-22-1
Methyl chloroform	Ethane, 1,1,1-trichloro-	71-55-6
3-Methylcholanthrene	Benz[j]aceanthrylene, 1,2-dihydro-3-methyl-	56-49-5
4,4'-Methylenebis (2-chloroaniline)	Benzenamine, 4,4'-methylenebis[2-chloro-	101-14-4
Methylene bromide	Methane, dibromo-	74-95-3
Methylene chloride	Methane, dichloro-	75-09-2
Methyl ethyl ketone (MEK)	2-Butanone	78-93-3
Methyl ethyl ketone peroxide	2-Butanone, peroxide	1338-23-4
Methyl hydrazine	Hydrazine, methyl-	60-34-4
Methyl iodide	Methane, iodo-	74-88-4
Methyl isocyanate	Methane, isocyanato-	624-83-9
2-Methylactonitrile	Propanenitrile, 2-hydroxy-2-methyl-	75-86-5
Methyl methacrylate	2-Propenoic acid, 2-methyl-, methyl ester	80-62-6
Methyl methanesulfonate	Methanesulfonic acid, methyl ester	66-27-3
Methyl parathion	Phosphorothioic acid, O,O-dimethyl O-(4-nitrophenyl) ester	298-00-0
Methylthiouracil	4(1H)-Pyrimidinone, 2,3-dihydro-6-methyl-2-thioxo-	56-04-2
Metolcarb (5/96)	Carbamic acid, methyl-, 3-methylphenyl ester	1129-41-5
Mexacarbate (5/96)	Phenol, 4-(dimethylamino)-3,5-dimethyl-, methylcarbamate (ester)	315-18-4
Mitomycin C	Azirino[2',3':3,4]pyrrolo[1,2-a]indole-4,7-dione, 6-amino-8-[[[(aminocarbonyl)oxy]methyl]-1,1a,2,8,8a,8b-hexahydro-8a-methoxy-5- methyl-, [1aS-(1alpha,8beta,8alpha,8beta)]-.	50-07-7
MNNG	Guanidine, N-methyl-N'-nitro-N-nitroso-	70-25-7
Molinate (5/96)	1H-Azepine-1-carbothioic acid, hexahydro-, S-ethyl ester	2212-67-1
Mustard gas	Ethane, 1,1'-thiobis[2-chloro-	505-60-2
Naphthalene	Same	91-20-3
1,4-Naphthoquinone	1,4-Naphthalenedione	130-15-4
alpha-Naphthylamine	1-Naphthalenamine	134-32-7

Appendix VIII Hazardous Constituents		
Common name	Chemical abstracts name (9/98)	CAS #
beta-Naphthylamine	2-Naphthalenamine	91-59-8
alpha-Naphthylthiourea	Thiourea, 1-naphthalenyl-	86-88-4
Nickel	Same	7440-02-0
Nickel compounds, N.O.S. ¹		
Nickel carbonyl	Nickel carbonyl Ni(CO) ₄ , (T-4)-	13463-39-3
Nickel cyanide	Nickel cyanide Ni(CN) ₂	557-19-7
Nicotine	Pyridine, 3-(1-methyl-2-pyrrolidinyl)-, (S)-	54-11-5
Nicotine salts		
Nitric oxide	Nitrogen oxide NO	10102-43-9
p-Nitroaniline	Benzenamine, 4-nitro-	100-01-6
Nitrobenzene	Benzene, nitro-	98-95-3
Nitrogen dioxide	Nitrogen oxide NO ₂	10102-44-0
Nitrogen mustard	Ethanamine, 2-chloro-N-(2-chloroethyl)-N-methyl-	51-75-2
Nitrogen mustard, hydrochloride salt		
Nitrogen mustard N-oxide	Ethanamine, 2-chloro-N-(2-chloroethyl)-N-methyl-, N-oxide	126-85-2
Nitrogen mustard, N-oxide, hydrochloride salt		
Nitroglycerin	1,2,3-Propanetriol, trinitrate	55-63-0
p-Nitrophenol	Phenol, 4-nitro-	100-02-7
2-Nitropropane	Propane, 2-nitro-	79-46-9
Nitrosamines, N.O.S. ¹		35576-91-1
N-Nitrosodi-n-butylamine	1-Butanamine, N-butyl-N-nitroso-	924-16-3
N-Nitrosodiethanolamine	Ethanol, 2,2'-(nitrosoimino)bis-	1116-54-7
N-Nitrosodiethylamine	Ethanamine, N-ethyl-N-nitroso-	55-18-5
N-Nitrosodimethylamine	Methanamine, N-methyl-N-nitroso-	62-75-9
N-Nitroso-N-ethylurea	Urea, N-ethyl-N-nitroso-	759-73-9
N-Nitrosomethylethylamine	Ethanamine, N-methyl-N-nitroso-	10595-95-6
N-Nitroso-N-methylurea	Urea, N-methyl-N-nitroso-	684-93-5
N-Nitroso-N-methylurethane	Carbamic acid, methylnitroso-, ethyl ester	615-53-2
N-Nitrosomethylvinylamine	Vinylamine, N-methyl-N-nitroso-	4549-40-0
N-Nitrosomorpholine	Morpholine, 4-nitroso-	59-89-2
N-Nitrosornicotine	Pyridine, 3-(1-nitroso-2-pyrrolidinyl)-, (S)-	16543-55-8
N-Nitrosopiperidine	Piperidine, 1-nitroso-	100-75-4
N-Nitrosopyrrolidine	Pyrrolidine, 1-nitroso-	930-55-2
N-Nitrososarcosine	Glycine, N-methyl-N-nitroso-	13256-22-9
5-Nitro-o-toluidine	Benzenamine, 2-methyl-5-nitro-	99-55-8
Octachlorodibenzo-p-dioxin (OCDD)	1,2,3,4,6,7,8,9-Octachlorodibenzo-p-dioxin (7/02)	
Octachlorodibenzofuran(OCDF)	1,2,3,4,6,7,8,9-Octachlorodibenzofuran (7/02)	
Octamethylpyrophosphoramidate	Diphosphoramidate, octamethyl-	152-16-9

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Common name	Chemical abstracts name (9/98)	CAS #
Osmium tetroxide	Osmium oxide OsO ₄ , (T-4)-	20816-12-0
Oxamyl (5/96)	Ethanimidothioc acid, 2-(dimethylamino)-N-[[[(methylamino)carbonyl]oxy]-2-oxo-, methyl ester	23135-22-0
Paraldehyde	1,3,5-Trioxane, 2,4,6-trimethyl-	123-63-7
Parathion	Phosphorothioic acid, O,O-diethyl O-(4-nitrophenyl) ester	56-38-2
Pebulate	Carbamothioic acid, butylethyl-, S-propyl ester	1114-71-2
Pentachlorobenzene	Benzene, pentachloro-	608-93-5
Pentachlorodibenzo-p-dioxins		
Pentachlorodibenzofurans		
Pentachloroethane	Ethane, pentachloro-	76-01-7
Pentachloronitrobenzene (PCNB)	Benzene, pentachloronitro-	82-68-8
Pentachlorophenol	Phenol, pentachloro-	87-86-5
Phenacetin	Acetamide, N-(4-ethoxyphenyl)-	62-44-2
Phenol	Same	108-95-2
1,2-Phenylenediamine	1,2-Benzenediamine	95-54-5
1,3-Phenylenediamine	1,3-Benzenediamine	108-45-2
Phenylenediamine	Benzenediamine	25265-76-3
Phenylmercury acetate	Mercury, (acetato-O)phenyl-	62-38-4
Phenylthiourea	Thiourea, phenyl-	103-85-5
Phosgene	Carbonic dichloride	75-44-5
Phosphine	Same	7803-51-2
Phorate	Phosphorodithioic acid, O,O-diethyl S-[(ethylthio)methyl] ester	298-02-2
Phthalic acid esters, N.O.S. ¹		
Phthalic anhydride	1,3-Isobenzofurandione	85-44-9
Physostigmine (5/96)	Pyrrolo[2,3-b]indol-5-01, 1,2,3,3a,8,8a-hexahydro-1,3a,8-trimethyl-, methylcarbamate (ester), (3aS-cis)-	57-47-6
Physostigmine salicylate (5/96)	Benzoic acid, 2-hydroxy-, compd. with (3aS-cis) -1,2,3,3a,8,8a-hexahydro-1,3a,8-trimethylpyrrolo [2,3-b]indol-5-yl methylcarbamate ester (1:1).	57-64-7
2-Picoline	Pyridine, 2-methyl-	109-06-8
Polychlorinated biphenyls, N.O.S. ¹		
Potassium cyanide	Potassium cyanide K(CN)	151-50-8
Potassium dimethyldithiocarbamate (5/96)	Carbamodithioic acid, dimethyl, potassium salt	128-03-0
Potassium n-hydroxymethyl-n-methyldithiocarbamate	Carbamodithioic acid, (hydroxymethyl)methyl-, monopotassium salt	51026-28-9
Potassium n-methyldithiocarbamate (5/96)	Carbamodithioic acid, methyl-monopotassium salt	137-41-7
Potassium pentachlorophenate	Pentachlorophenol, potassium salt	7778736
Potassium silver cyanide	Argentate(1-), bis(cyano-C)-, potassium	506-61-6
Promecarb (5/96)	Phenol, 3-methyl-5-(1-methylethyl)-, methyl carbamate	2631-37-0
Pronamide	Benzamide, 3,5-dichloro-N-(1,1-dimethyl-2-propynyl)-	23950-58-5
1,3-Propane sultone	1,2-Oxathiolane, 2,2-dioxide	1120-71-4

Appendix VIII Hazardous Constituents		
Common name	Chemical abstracts name (9/98)	CAS #
n-Propylamine	1-Propanamine	107-10-8
Propargyl alcohol	2-Propyn-1-ol	107-19-7
Propham	Carbamic acid, phenyl-, 1-methylethyl ester	122-42-9
Propoxur	Phenol, 2-(1-methylethoxy)-, methylcarbamate	114-26-1
Propylene dichloride	Propane, 1,2-dichloro-	78-87-5
1,2-Propylenimine	Aziridine, 2-methyl-	75-55-8
Propylthiouracil	4(1H)-Pyrimidinone, 2,3-dihydro-6-propyl-2-thioxo-	51-52-5
Prosulfocarb	Carbamothioic acid, dipropyl-, S-(phenylmethyl) ester	52888-80-9
Pyridine	Same	110-86-1
Reserpine	Yohimban-16-carboxylic acid, 11,17-dimethoxy-18-[(3,4,5-trimethoxybenzoyl)oxy]-smethyl (3beta,16beta,17alpha,18beta,20alpha)-ester,	50-55-5
Resorcinol	1,3-Benzenediol	108-46-3
Safrole	1,3-Benzodioxole, 5-(2-propenyl)-	94-59-7
Selenium	Same	7782-49-2
Selenium compounds, N.O.S. ¹		
Selenium dioxide	Selenious acid	7783-00-8
Selenium sulfide	Selenium sulfide SeS ₂	7488-56-4
Selenium, tetrakis (dimethyl-dithiocarbamate.	Carbamodithioic acid, dimethyl-, tetraanhydrosulfide with orthothioselenious acid.	144-34-3
Selenourea	Same	630-10-4
Silver	Same	7440-22-4
Silver compounds, N.O.S. ¹		
Silver cyanide	Silver cyanide Ag(CN)	506-64-9
Silvex (2,4,5-TP)	Propanoic acid, 2-(2,4,5-trichlorophenoxy)-	93-72-1
Sodium cyanide	Sodium cyanide Na(CN)	143-33-9
Sodium dibutylthiocarbamate	Carbamodithioic acid, dibutyl, sodium salt (5/96)	136-30-1
Sodium diethyldithiocarbamate	Carbamodithioic acid, diethyl-, sodium salt (5/96)	148-18-5
Sodium dimethyldithiocarbamate	Carbamodithioic acid, dimethyl-, sodium salt (5/96)	128-04-1
Sodium pentachlorophenate	Pentachlorophenol, sodium salt	131522
Streptozotocin	D-Glucose, 2-deoxy-2-[(methylnitrosoamino)carbonyl]amino]-	18883-66-4
Strychnine	Strychnidin-10-one	57-24-9
Strychnine salts		
Sulfallate (5/96)	Carbamodithioic acid, diethyl-, 2-chloro-2-propenyl ester	95-06-7
TCDD	Dibenzo[b,e][1,4]dioxin, 2,3,7,8-tetrachloro-	1746-01-6
Tetrabutylthiuram disulfide	Thioperoxydicarbonic diamide, tetrabutyl (5/96)	1634-02-2
1,2,4,5-Tetrachlorobenzene	Benzene, 1,2,4,5-tetrachloro-	95-94-3
Tetrachlorodibenzo-p-dioxins		
Tetrachlorodibenzofurans		
Tetrachloroethane, N.O.S. ¹	Ethane, tetrachloro-, N.O.S.	25322-20-7
1,1,1,2-Tetrachloroethane	Ethane, 1,1,1,2-tetrachloro-	630-20-6

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Appendix VIII Hazardous Constituents		
Common name	Chemical abstracts name (9/98)	CAS #
1,1,2,2-Tetrachloroethane	Ethane, 1,1,2,2-tetrachloro-	79-34-5
Tetrachloroethylene	Ethene, tetrachloro-	127-18-4
2,3,4,6-Tetrachlorophenol	Phenol, 2,3,4,6-tetrachloro-	58-90-2
2,3,4,6-tetrachlorophenol, potassium salt	same	53535276
2,3,4,6-tetrachlorophenol, sodium salt	same	25567559
Tetraethylthiopyrophosphate	Thiodiphosphoric acid, tetraethyl ester	3689-24-5
Tetraethyl lead	Plumbane, tetraethyl-	78-00-2
Tetraethyl pyrophosphate	Diphosphoric acid, tetraethyl ester	107-49-3
Tetramethylthiuram monosulfide	Bis(dimethylthiocarbonyl) sulfide	97-74-5
Tetranitromethane	Methane, tetranitro-	509-14-8
Thallium	Same	7440-28-0
Thallium compounds, N.O.S. ¹		
Thallic oxide	Thallium oxide Tl ₂ O ₃	1314-32-5
Thallium(I) acetate	Acetic acid, thallium(1+) salt	563-68-8
Thallium(I) carbonate	Carbonic acid, dithallium(1+) salt	6533-73-9
Thallium(I) chloride	Thallium chloride TlCl	7791-12-0
Thallium(I) nitrate	Nitric acid, thallium(1+) salt	10102-45-1
Thallium selenite	Selenious acid, dithallium(1+) salt	12039-52-0
Thallium(I) sulfate	Sulfuric acid, dithallium(1+) salt	7446-18-6
Thioacetamide	Ethanethioamide	62-55-5
Thiodicarb (5/96)	Ethanimidothioic acid, N,N'-[thiobis [(methylimino) carbonyloxy]] bis-, dimethyl ester.	59669-26-0
Thiofanox	2-Butanone, 3,3-dimethyl-1-(methylthio)-, [(methylamino)carbonyl] oxime	39196-18-4
Thiomethanol	Methanethiol	74-93-1
Thiophanate-methyl	Carbamic acid, [1,2-phenylenebis (iminocarbonothioyl)] bis-, dimethyl ester	23564-05-8
Thiophenol	Benzenethiol	108-98-5
Thiosemicarbazide	Hydrazinecarbothioamide	79-19-6
Thiourea	Same	62-56-6
Thiram	Thioperoxydicarbonic diamide [(H ₂ N)C(S)] ₂ S ₂ , tetramethyl-	137-26-8
Tirpate (5/96)	1,3-Dithiolane-2-carboxaldehyde, 2,4-dimethyl-, [(methylamino) carbonyl] oxime.	26419-73-8
Toluene	Benzene, methyl-	108-88-3
Toluenediamine	Benzenediamine, ar-methyl-	25376-45-8
Toluene-2,4-diamine	1,3-Benzenediamine, 4-methyl-	95-80-7
Toluene-2,6-diamine	1,3-Benzenediamine, 2-methyl-	823-40-5
Toluene-3,4-diamine	1,2-Benzenediamine, 4-methyl-	496-72-0
Toluene diisocyanate	Benzene, 1,3-diisocyanatomethyl-	26471-62-5
o-Toluidine	Benzenamine, 2-methyl-	95-53-4
o-Toluidine hydrochloride	Benzenamine, 2-methyl-, hydrochloride	636-21-5
p-Toluidine	Benzenamine, 4-methyl-	106-49-0
Toxaphene	Same	8001-35-2

Appendix VIII Hazardous Constituents		
Common name	Chemical abstracts name (9/98)	CAS #
Triallate (5/96)	Carbamothioic acid, bis(1-methylethyl)-, S-(2,3,3-trichloro-2-propenyl) ester	2303-17-5
2,4,6-Tribromophenol.	Tribromophenol.,2,4,6-	118-79-6
Tributyltin	Tributylstannane (6/02)	688-73-3
Tributyltin Oxide	Bis(tri-n-butyltin) Oxide (6/02)	56-35-9
Tributyltin Chloride	Tributylchlorostannane (6/02)	1461-22-9
Tributyltin Hydroxide	Tributylhydroxystannane (6/02)	1067-97-6
Tributyltin Bromide	Tributylbromostannane (6/02)	1461-23-0
Tributyltin Acetate	(acetyloxy)tributylstannane (6/02)	56-36-0
Tributyltin Fluoride	Tributylfluorostannane (6/02)	1983-23-0
Triethyltin	Triethylstannane (6/02)	997-50-2
Triethyltin Chloride	Triethyltin Chloride (6/02)	994-31-0
1,2,4-Trichlorobenzene	Benzene, 1,2,4-trichloro-	120-82-1
1,1,2-Trichloroethane	Ethane, 1,1,2-trichloro-	79-00-5
Trichloroethylene	Ethene, trichloro-	79-01-6
Trichloromethanethiol	Methanethiol, trichloro-	75-70-7
Trichloromonofluoromethane	Methane, trichlorofluoro-	75-69-4
2,4,5-Trichlorophenol	Phenol, 2,4,5-trichloro-	95-95-4
2,4,6-Trichlorophenol	Phenol, 2,4,6-trichloro-	88-06-2
2,4,5-T	Acetic acid, (2,4,5-trichlorophenoxy)-	93-76-5
Trichloropropane, N.O.S. ¹		25735-29-9
1,2,3-Trichloropropane	Propane, 1,2,3-trichloro-	96-18-4
Triethylamine (5/96)	Ethanamine, N,N-diethyl-	121-44-8
O,O,O-Triethyl phosphorothioate	Phosphorothioic acid, O,O,O-triethyl ester	126-68-1
1,3,5-Trinitrobenzene	Benzene, 1,3,5-trinitro-	99-35-4
Tris(1-aziridinyl)phosphine sulfide	Aziridine, 1,1',1''-phosphinothioylidynetris-	52-24-4
Tris(2,3-dibromopropyl) phosphate	1-Propanol, 2,3-dibromo-, phosphate (3:1)	126-72-7
Trypan blue	2,7-Naphthalenedisulfonic acid, 3,3'-[(3,3'-dimethyl[1,1'-biphenyl]-4,4'diyl)bis(azo)]-bis[5-amino-4-hydroxy-, tetrasodium salt	72-57-1
Uracil mustard	2,4-(1H,3H)-Pyrimidinedione, 5-[bis(2-chloroethyl)amino]-	66-75-1
Vanadium pentoxide	Vanadium oxide V ₂ O ₅	1314-62-1
Vernolate (5/96)	Carbamothioic acid, dipropyl-, S-propyl ester	1929-77-7
Vinyl chloride	Ethene, chloro-	75-01-4
Warfarin	2H-1-Benzopyran-2-one, 4-hydroxy-3-(3-oxo-1-phenylbutyl)-, when present at concentrations less than 0.3%	81-81-2
Warfarin	2H-1-Benzopyran-2-one, 4-hydroxy-3-(3-oxo-1-phenylbutyl)-, when present at concentrations greater than 0.3%	81-81-2
Warfarin salts, when present at concentrations less than 0.3%		
Warfarin salts, when present at concentrations greater than 0.3%		
Zinc cyanide	Zinc cyanide Zn(CN) ₂	557-21-1
Zinc phosphide	Zinc phosphide Zn ₃ P ₂ , when present at concentrations greater than 10%	1314-84-7

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Appendix VIII Hazardous Constituents		
Common name	Chemical abstracts name (9/98)	CAS #
Zinc phosphide	Zinc phosphide Zn ₃ P ₂ , when present at concentrations of 10% or less	1314-84-7
Ziram	Zinc, bis(dimethylcarbamodithioato-S,S')-, (T-4)-	137-30-4

¹The abbreviation N.O.S. (not otherwise specified) signifies those members of the general class not specifically listed by name in this appendix.

Revise 61-79.262.34(e) to read:

(e) A generator who generates greater than 100 kilograms but less than 1000 kilograms of hazardous waste in a calendar month and who must transport his waste, or offer his waste for transportation, over a distance of 200 miles or more for off-site treatment, storage or disposal may accumulate hazardous waste on-site for 270 days or less without a permit or without having interim status provided that he complies with the requirements of paragraph (d) of this section.

Revise 61-79.262.34(f) to read:

(f) A generator who generates greater than 100 kilograms but less than 1000 kilograms of hazardous waste in a calendar month and who accumulates hazardous waste in quantities exceeding 6000 kilograms or accumulates hazardous waste for more than 180 days (or for more than 270 days if he must transport his waste, or offer his waste for transportation, over a distance of 200 miles or more) is an operator of a storage facility and is subject to the requirements of R.61-79.264 and R.61-79.265, and the permit requirements of R.61-79.270 unless he has been granted an extension to the 180-day (or 270-day if applicable) period. Such extension may be granted by the Department if hazardous wastes must remain on-site for longer than 180 days (or 270 days if applicable) due to unforeseen, temporary, and uncontrollable circumstances. An extension of up to 30 days may be granted at the discretion of the Department on a case-by-case basis.

61-79.262.200. Revise the definition of “Central Accumulation Area” to read:

“Central Accumulation Area” means an on-site hazardous waste accumulation area subject to either 262.34(a)-(b) of this part (large quantity generators) or 262.34(d)-(f) of this part (small quantity generators). A central accumulation area at an eligible academic entity that chooses to be subject to this subpart must also comply with 262.211 when accumulating unwanted material and/or hazardous waste.

Revise 61-79.262.206(b)(3)(i) to read:

(i) When adding, removing or bulking unwanted material, or

Revise 61-79.262.212(e)(1) to read:

(1) Write the words “hazardous waste” on the container label that is affixed or attached to the container within 4 calendar days of arriving at the on-site interim status or permitted treatment, storage or disposal facility and before the hazardous waste may be removed from the on-site interim status or permitted treatment, storage or disposal facility, and

Revise 61-79.262.214(a)(1) introductory; 214(a)(1)(i) and (ii) remain the same, to read:

(1) Describe procedures for container labeling in accordance with 262.206(a), as follows:

Revise 61-79.262.214(b)(1) to read:

(1) Describe its intended best practices for container labeling and management, (see the required standards at 262.206).

Revise 61-79.263.23(a) to read:

(a) If a transporter while in the State removes a hazardous waste from a transport vehicle for the purpose of blending, mixing, treating, disposing, or storing; the blending mixing, treating, disposing or storing shall be performed at a facility in the State having a permit under R.61-79.270.

Revise 61-79.264.340 to add new subitem 264.340(e) to read:

(e) The owner or operator of an incinerator may conduct trial burns subject only to the requirements of Section 270.62 (hazardous waste incinerator permits).

Revise 61-79.266.20(b) to read:

(b) Products produced for the general public's use that are used in a manner that constitutes disposal and that contain recyclable materials are not presently subject to regulation if the recyclable materials have undergone a chemical reaction in the course of producing the products so as to become inseparable by physical means and if such products meet the applicable treatment standards in subpart D of part 268 (or applicable prohibition levels in 268.32 of this chapter or RCRA section 3004(d), where no treatment standards have been established) for each recyclable material (i.e., hazardous waste) that they contain and the recycler complies with 268.7(b)(6) of this chapter.

61-79.268.40 Table of Treatment Standards for Hazardous Wastes. Modify this table for the following entries: K156; K157; K158; K159; K161; P127; P128; P185; P188; P189; P190; P191; P192; P194; P196; P197; P198; P199; P201; P202; P203; P204; P205; U271; U278; U279; U280; U364; U367; U372; U373; U387; U389; U394; U395; U404; U409; U410; U411. Modify this table to remove "U202 Saccharin and salts".

268.40 Table - Treatment Standards For Hazardous Waste					
WASTE CODE	Waste Description And Treatment/Regulatory Subcategory¹ (11/99, 8/00, 6/04, 2/07) NOTE: fb means followed by	Regulated hazardous constituent NOTE: NA means not applicable		Waste waters	Non waste waters
		Common Name	CAS² Number	Concentration³ in mg/l; or Technology Code⁴	Concentration⁵ in mg/kg unless noted as mg/l TCLP or Technology Code⁴
D001 ⁹	Ignitable Characteristic Wastes, except for the 261.21(a)(1) High TOC Subcategory.	NA	NA	DEACT and meet 268.48 standards ⁸ ; or RORGS; or CMBST	DEACT and meet 268.48 standards ⁸ ; or RORGS; or CMBST
	High TOC Ignitable Characteristic Liquids Subcategory based on 261.21(a)(1) - Greater than or equal to 10% total organic carbon. (Note: This subcategory consists of nonwastewaters only.)	NA	NA	NA	RORGS; CMBST; or POLYM
D002 ⁹	Corrosive Characteristic Wastes.	NA	NA	DEACT and meet 268.48 standards ⁸	DEACT and meet 268.48 standards ⁸
D002, D004, D005, D006, D007, D008,	Radioactive high level wastes generated during the reprocessing of fuel rods. (Note: This subcategory consists of nonwastewaters only.)	Corrosivity (pH)	NA	NA	HLVIT
		Arsenic	7440-38-2	NA	HLVIT
		Barium	7440-39-3	NA	HLVIT
		Cadmium	7440-43-9	NA	HLVIT
		Chromium (Total)	7440-47-3	NA	HLVIT
	Lead	7439-92-1	NA	HLVIT	

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268.40 Table - Treatment Standards For Hazardous Waste					
WASTE CODE	Waste Description And Treatment/Regulatory Subcategory ¹ (11/99, 8/00, 6/04, 2/07) NOTE: fb means followed by	Regulated hazardous constituent NOTE: NA means not applicable		Waste waters	Non waste waters
		Common Name	CAS ² Number	Concentration ³ in mg/l; or Technology Code ⁴	Concentration ⁵ in mg/kg unless noted as mg/l TCLP or Technology Code ⁴
D009, D010, D011		Mercury	7439-97-6	NA	HLVIT
		Selenium	7782-49-2	NA	HLVIT
		Silver	7440-22-4	NA	HLVIT
D003 ⁹	Reactive Sulfides Subcategory based on 261.23(a)(5).	NA	NA	DEACT	DEACT
	Explosives Subcategory based on 261.23(a)(6), (7), and (8).	NA	NA	DEACT and meet 268.48 standards ⁸	DEACT and meet 268.48 standards ⁸
	Unexploded ordnance and other explosive devices which have been the subject of an emergency response.	NA	NA	DEACT	DEACT
	Other Reactives Subcategory based on 261.23(a)(1).	NA	NA	DEACT and meet 268.48 standards ⁸	DEACT and meet 268.48 standards ⁸
	Water Reactive Subcategory based on 261.23(a)(2), (3), and (4). (Note: This subcategory consists of nonwastewaters only.)	NA	NA	NA	DEACT and meet 268.48 standards ⁸
	Reactive Cyanides Subcategory based on 261.23(a)(5).	Cyanides (Total) ⁷	57-12-5	Reserved	590
Cyanides (Amenable) ⁷		57-12-5	0.86	30	
D004 ⁹	Wastes that exhibit, or are expected to exhibit, the characteristic of toxicity for arsenic based on the toxicity characteristic leaching procedure (TCLP) in SW846.	Arsenic	7440-38-2	1.4 and meet 268.48 standards ⁸	5.0 mg/l TCLP and meet 268.48 standards ⁸
D005 ⁹	Wastes that exhibit, or are expected to exhibit, the characteristic of toxicity for barium based on the toxicity characteristic leaching procedure (TCLP) in SW846.	Barium	7440-39-3	1.2 and meet 268.48 standards ⁸	21 mg/l TCLP and meet 268.48 standards ⁸
D006 ⁹	Wastes that exhibit, or are expected to exhibit, the characteristic of toxicity for cadmium based on the toxicity characteristic leaching procedure (TCLP) in SW846.	Cadmium	7440-43-9	0.69 and meet 268.48 standards ⁸	0.11 mg/l TCLP and meet 268.48 standards ⁸
	Cadmium Containing Batteries Subcategory. (Note: This subcategory consists of nonwastewaters only.)	Cadmium	7440-43-9	NA	RTHRM
	Radioactively contaminated cadmium containing batteries. (Note: This subcategory consists of nonwastewaters only) (6/04)	Cadmium	7440-43-9	NA	Macroencapsulation in accordance with 268.45
D007 ⁹	Wastes that exhibit, or are expected to exhibit, the characteristic of toxicity for chromium based on the toxicity characteristic leaching procedure (TCLP) in SW846.	Chromium (Total)	7440-47-3	2.77 and meet 268.48 standards ⁸	0.60 mg/l TCLP and meet 268.48 standards ⁸
D008 ⁹	Wastes that exhibit, or are expected to exhibit, the characteristic of toxicity for lead based on the toxicity characteristic leaching procedure (TCLP) in SW846.	Lead	7439-92-1	0.69 and meet 268.48 standards ⁸	0.75 mg/l TCLP and meet 268.48 standards ⁸
	Lead Acid Batteries Subcategory (Note: This standard only applies to lead acid batteries that are identified as RCRA hazardous wastes and that are not excluded elsewhere from regulation under the land disposal restrictions of 268 or exempted under other EPA regulations (see 266.80). This subcategory consists of nonwastewaters only.)	Lead	7439-92-1	NA	RLEAD

268.40 Table - Treatment Standards For Hazardous Waste					
WASTE CODE	Waste Description And Treatment/Regulatory Subcategory¹ (11/99, 8/00, 6/04, 2/07) NOTE: fb means followed by	Regulated hazardous constituent NOTE: NA means not applicable		Waste waters	Non waste waters
		Common Name	CAS² Number	Concentration³ in mg/l; or Technology Code⁴	Concentration⁵ in mg/kg unless noted as mg/l TCLP or Technology Code⁴
	Radioactive Lead Solids Subcategory (Note: these lead solids include, but are not limited to, all forms of lead shielding and other elemental forms of lead. These lead solids do not include treatment residuals such as hydroxide sludges, other wastewater treatment residuals, or incinerator ashes that can undergo conventional pozzolanic stabilization, nor do they include organo-lead materials that can be incinerated and stabilized as ash. This subcategory consists of nonwastewaters only.)	Lead	7439-92-1	NA	MACRO
D009 ⁹	Nonwastewaters that exhibit, or are expected to exhibit, the characteristic of toxicity for mercury based on the toxicity characteristic leaching procedure (TCLP) in SW846; and contain greater than or equal to 260 mg/kg total mercury that also contain organics and are not incinerator residues. (High Mercury-Organic Subcategory)	Mercury	7439-97-6	NA	IMERC; OR RMERC
	Nonwastewaters that exhibit, or are expected to exhibit, the characteristic of toxicity for mercury based on the toxicity characteristic leaching procedure (TCLP) in SW846; and contain greater than or equal to 260 mg/kg total mercury that are inorganic, including incinerator residues and residues from RMERC. (High Mercury-Inorganic Subcategory)	Mercury	7439-97-6	NA	RMERC
	Nonwastewaters that exhibit, or are expected to exhibit, the characteristic of toxicity for mercury based on the toxicity characteristic leaching procedure (TCLP) in SW846; and contain less than 260 mg/kg total mercury and that are residues from RMERC only. (Low Mercury Subcategory)	Mercury	7439-97-6	NA	0.20 mg/l TCLP and meet 268.48 standards ⁸
	All other nonwastewaters that exhibit, or are expected to exhibit, the characteristic of toxicity for mercury based on the toxicity characteristic leaching procedure (TCLP) in SW846; and contain less than 260 mg/kg total mercury and that are not residues from RMERC. (Low Mercury Subcategory)	Mercury	7439-97-6	NA	0.025 mg/l TCLP and meet 268.48 standards ⁸
	All D009 wastewaters.	Mercury	7439-97-6	0.15 and meet 268.48 standards ⁸	NA
	Elemental mercury contaminated with radioactive materials. (Note: This subcategory consists of nonwastewaters only.)	Mercury	7439-97-6	NA	AMLGM
	Hydraulic oil contaminated with Mercury Radioactive Materials Subcategory. (Note: This subcategory consists of nonwastewaters only.)	Mercury	7439-97-6	NA	IMERC
	Radioactively contaminated mercury containing batteries. (Note: This subcategory consists of nonwastewaters only) (6/04)	Mercury	7439-97-6	NA	Macroencapsulation in accordance with 268.45
D010 ⁹	Wastes that exhibit, or are expected to exhibit, the characteristic of toxicity for selenium based on the toxicity characteristic leaching procedure (TCLP) in SW846.	Selenium	7782-49-2	0.82 and meet 268.48 standards ⁸	5.7 mg/l TCLP and meet 268.48 standards ⁸
	Radioactively contaminated silver containing batteries. (Note: This subcategory consists of nonwastewaters only) (6/04)	Silver	7440-22-4	NA	Macroencapsulation in accordance with 268.45
D011 ⁹	Wastes that exhibit, or are expected to exhibit, the characteristic of toxicity for silver based on the	Silver	7440-22-4	0.43 and meet 268.48 standards ⁸	0.14 mg/l TCLP and

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268.40 Table - Treatment Standards For Hazardous Waste					
WASTE CODE	Waste Description And Treatment/Regulatory Subcategory ¹ (11/99, 8/00, 6/04, 2/07) NOTE: fb means followed by	Regulated hazardous constituent NOTE: NA means not applicable		Waste waters	Non waste waters
		Common Name	CAS ² Number	Concentration ³ in mg/l; or Technology Code ⁴	Concentration ⁵ in mg/kg unless noted as mg/l TCLP or Technology Code ⁴
	toxicity characteristic leaching procedure (TCLP) in SW846.				meet 268.48 standards ⁸
D012 ⁹	Wastes that are TC for Endrin based on the TCLP in SW846 Method 1311.	Endrin	72-20-8	BIODG; or CMBST	0.13 and meet 268.48 standards ⁸
		Endrin aldehyde	7421-93-4	BIODG; or CMBST	0.13 and meet 268.48 standards ⁸
D013 ⁹	Wastes that are TC for Lindane based on the TCLP in SW846 Method 1311.	alpha-BHC	319-84-6	CARBN; or CMBST	0.066 and meet 268.48 standards ⁸
		beta-BHC	319-85-7	CARBN; or CMBST	0.066 and meet 268.48 standards ⁸
		delta-BHC	319-86-8	CARBN; or CMBST	0.066 and meet 268.48 standards ⁸
		gamma-BHC (Lindane)	58-89-9	CARBN; or CMBST	0.066 and meet 268.48 standards ⁸
D014 ⁹	Wastes that are TC for Methoxychlor based on the TCLP in SW846 Method 1311.	Methoxychlor	72-43-5	WETOX or CMBST	0.18 and meet 268.48 standards ⁸
D015 ⁹	Wastes that are TC for Toxaphene based on the TCLP in SW846 Method 1311.	Toxaphene	8001-35-2	BIODG or CMBST	2.6 and meet 268.48 standards ⁸
D016 ⁹	Wastes that are TC for 2,4-D (2,4-Dichlorophenoxyacetic acid) based on the TCLP in SW846 Method 1311.	2,4-D (2,4-Dichlorophenoxyacetic acid)	94-75-7	CHOXD, BIODG, or CMBST	10 and meet 268.48 standards ⁸
D017 ⁹	Wastes that are TC for 2,4,5-TP (Silvex) based on the TCLP in SW846 Method 1311.	2,4,5-TP (Silvex)	93-72-1	CHOXD or CMBST	7.9 and meet 268.48 standards ⁸
D018 ⁹	Wastes that are TC for Benzene based on the TCLP in SW846 Method 1311.	Benzene	71-43-2	0.14 and meet 268.48 standards ⁸	10 and meet 268.48 standards ⁸
D019 ⁹	Wastes that are TC for Carbon tetrachloride based on the TCLP in SW846 Method 1311.	Carbon tetrachloride	56-23-5	0.057 and meet 268.48 standards ⁸	6.0 and meet 268.48 standards ⁸
D020 ⁹	Wastes that are TC for Chlordane based on the TCLP in SW846 Method 1311.	Chlordane (alpha and gamma isomers)	57-74-9	0.0033 and meet 268.48 standards ⁸	0.26 and meet 268.48 standards ⁸
D021 ⁹	Wastes that are TC for Chlorobenzene based on the TCLP in SW846 Method 1311.	Chlorobenzene	108-90-7	0.057 and meet 268.48 standards ⁸	6.0 and meet 268.48 standards ⁸
D022 ⁹	Wastes that are TC for Chloroform based on the TCLP in SW846 Method 1311.	Chloroform	67-66-3	0.046 and meet 268.48 standards ⁸	6.0 and meet 268.48 standards ⁸
D023 ⁹	Wastes that are TC for o-Cresol based on the TCLP in SW846 Method 1311.	o-Cresol	95-48-7	0.11 and meet 268.48 standards ⁸	5.6 and meet 268.48 standards ⁸
D024 ⁹	Wastes that are TC for m-Cresol based on the TCLP in SW846 Method 1311.	m-Cresol (difficult to distinguish from p-cresol)	108-39-4	0.77 and meet 268.48 standards ⁸	5.6 and meet 268.48 standards ⁸
D025 ⁹	Wastes that are TC for p-Cresol based on the TCLP in SW846 Method 1311.	p-Cresol (difficult to distinguish from m-cresol)	106-44-5	0.77 and meet 268.48 standards ⁸	5.6 and meet 268.48 standards ⁸
D026 ⁹	Wastes that are TC for Cresols (Total) based on the TCLP in SW846 Method 1311.	Cresol-mixed isomers (Cresylic acid) (sum of o-, m-, and p-cresol concentrations)	1319-77-3	0.88 and meet 268.48 standards ⁸	11.2 and meet 268.48 standards ⁸
D027 ⁹	Wastes that are TC for p-Dichlorobenzene based on the TCLP in SW846 Method 1311.	p-Dichlorobenzene (1,4-Dichlorobenzene)	106-46-7	0.090 and meet 268.48 standards ⁸	6.0 and meet 268.48 standards ⁸

268.40 Table - Treatment Standards For Hazardous Waste					
WASTE CODE	Waste Description And Treatment/Regulatory Subcategory¹ (11/99, 8/00, 6/04, 2/07) NOTE: fb means followed by	Regulated hazardous constituent NOTE: NA means not applicable		Waste waters	Non waste waters
		Common Name	CAS² Number	Concentration³ in mg/l; or Technology Code⁴	Concentration⁵ in mg/kg unless noted as mg/l TCLP or Technology Code⁴
D028 ⁹	Wastes that are TC for 1,2-Dichloroethane based on the TCLP in SW846 Method 1311.	1,2-Dichloroethane	107-06-2	0.21 and meet 268.48 standards ⁸	6.0 and meet 268.48 standards ⁸
D029 ⁹	Wastes that are TC for 1,1-Dichloroethylene based on the TCLP in SW846 Method 1311.	1,1-Dichloroethylene	75-35-4	0.025 and meet 268.48 standards ⁸	6.0 and meet 268.48 standards ⁸
D030 ⁹	Wastes that are TC for 2,4-Dinitrotoluene based on the TCLP in SW846 Method 1311.	2,4-Dinitrotoluene	121-14-2	0.32 and meet 268.48 standards ⁸	140 and meet 268.48 standards ⁸
D031 ⁹	Wastes that are TC for Heptachlor based on the TCLP in SW846 Method 1311.	Heptachlor	76-44-8	0.0012 and meet 268.48 standards ⁸	0.066 and meet 268.48 standards ⁸
		Heptachlor epoxide	1024-57-3	0.016 and meet 268.48 standards ⁸	0.066 and meet 268.48 standards ⁸
D032 ⁹	Wastes that are TC for Hexachlorobenzene based on the TCLP in SW846 Method 1311.	Hexachlorobenzene	118-74-1	0.055 and meet 268.48 standards ⁸	10 and meet 268.48 standards ⁸
D033 ⁹	Wastes that are TC for Hexachlorobutadiene based on the TCLP in SW846 Method 1311.	Hexachlorobutadiene	87-68-3	0.055 and meet 268.48 standards ⁸	5.6 and meet 268.48 standards ⁸
D034 ⁹	Wastes that are TC for Hexachloroethane based on the TCLP in SW846 Method 1311.	Hexachloroethane	67-72-1	0.055 and meet 268.48 standards ⁸	30 and meet 268.48 standards ⁸
D035 ⁹	Wastes that are TC for Methyl ethyl ketone based on the TCLP in SW846 Method 1311.	Methyl ethyl ketone	78-93-3	0.28 and meet 268.48 standards ⁸	36 and meet 268.48 standards ⁸
D036 ⁹	Wastes that are TC for Nitrobenzene based on the TCLP in SW846 Method 1311.	Nitrobenzene	98-95-3	0.068 and meet 268.48 standards ⁸	14 and meet 268.48 standards ⁸
D037 ⁹	Wastes that are TC for Pentachlorophenol based on the TCLP in SW846 Method 1311.	Pentachlorophenol	87-86-5	0.089 and meet 268.48 standards ⁸	7.4 and meet 268.48 standards ⁸
D038 ⁹	Wastes that are TC for Pyridine based on the TCLP in SW846 Method 1311.	Pyridine	110-86-1	0.014 and meet 268.48 standards ⁸	16 and meet 268.48 standards ⁸
D039 ⁹	Wastes that are TC for Tetrachloroethylene based on the TCLP in SW846 Method 1311.	Tetrachloroethylene	127-18-4	0.056 and meet 268.48 standards ⁸	6.0 and meet 268.48 standards ⁸
D040 ⁹	Wastes that are TC for Trichloroethylene based on the TCLP in SW846 Method 1311.	Trichloroethylene	79-01-6	0.054 and meet 268.48 standards ⁸	6.0 and meet 268.48 standards ⁸
D041 ⁹	Wastes that are TC for 2,4,5-Trichlorophenol based on the TCLP in SW846 Method 1311.	2,4,5-Trichlorophenol	95-95-4	0.18 and meet 268.48 standards ⁸	7.4 and meet 268.48 standards ⁸
D042 ⁹	Wastes that are TC for 2,4,6-Trichlorophenol based on the TCLP in SW846 Method 1311.	2,4,6-Trichlorophenol	88-06-2	0.035 and meet 268.48 standards ⁸	7.4 and meet 268.48 standards ⁸
D043 ⁹	Wastes that are TC for Vinyl chloride based on the TCLP in SW846 Method 1311.	Vinyl chloride	75-01-4	0.27 and meet 268.48 standards ⁸	6.0 and meet 268.48 standards ⁸
F001, F002, F003, F004, & F005	F001, F002, F003, F004 and/or F005 solvent wastes that contain any combination of one or more of the following spent solvents: acetone, benzene, n-butyl alcohol, carbon disulfide, carbon tetrachloride, chlorinated fluorocarbons, chlorobenzene, o-cresol, m-cresol, p-cresol, cyclohexanone, o-dichlorobenzene, 2-ethoxyethanol, ethyl acetate, ethyl benzene, ethyl ether, isobutyl alcohol, methanol, methylene chloride, methyl ethyl ketone, methyl isobutyl ketone, nitrobenzene, 2-nitropropane, pyridine,	Acetone	67-64-1	0.28	160
		Benzene	71-43-2	0.14	10
		n-Butyl alcohol	71-36-3	5.6	2.6
		Carbon disulfide	75-15-0	3.8	NA
		Carbon tetrachloride	56-23-5	0.057	6.0
		Chlorobenzene	108-90-7	0.057	6.0
		o-Cresol	95-48-7	0.11	5.6
		m-Cresol(difficult to distinguish from p-cresol)	108-39-4	0.77	5.6
		p-Cresol(difficult to distinguish from m-cresol)	106-44-5	0.77	5.6

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268.40 Table - Treatment Standards For Hazardous Waste						
WASTE CODE	Waste Description And Treatment/Regulatory Subcategory ¹ (11/99, 8/00, 6/04, 2/07) NOTE: fb means followed by	Regulated hazardous constituent NOTE: NA means not applicable		Waste waters	Non waste waters	
		Common Name	CAS ² Number	Concentration ³ in mg/l; or Technology Code ⁴	Concentration ⁵ in mg/kg unless noted as mg/l TCLP or Technology Code ⁴	
	tetrachloroethylene, toluene, 1,1,1-trichloroethane, 1,1,2-trichloroethane, 1,1,2-trichloro-1,2,2-trifluoroethane, trichloroethylene, trichloromonofluoromethane, and/or xylenes [except as specifically noted in other subcategories]. See further details of these listings in 261.31	Cresol-mixed isomers (Cresylic acid)(sum of o-, m-, and p-cresol concentrations)	1319-77-3	0.88	11.2	
		Cyclohexanone	108-94-1	0.36	NA	
		o-Dichlorobenzene	95-50-1	0.088	6.0	
		Ethyl acetate	141-78-6	0.34	33	
		Ethyl benzene	100-41-4	0.057	10	
		Ethyl ether	60-29-7	0.12	160	
		Isobutyl alcohol	78-83-1	5.6	170	
		Methanol	67-56-1	5.6	NA	
		Methylene chloride	75-9-2	0.089	30	
		Methyl ethyl ketone	78-93-3	0.28	36	
		Methyl isobutyl ketone	108-10-1	0.14	33	
		Nitrobenzene	98-95-3	0.068	14	
		Pyridine	110-86-1	0.014	16	
		Tetrachloroethylene	127-18-4	0.056	6.0	
		Toluene	108-88-3	0.080	10	
		1,1,1-Trichloroethane	71-55-6	0.054	6.0	
		1,1,2-Trichloroethane	79-00-5	0.054	6.0	
		1,1,2-Trichloro-1,2,2-trifluoroethane	76-13-1	0.057	30	
		Trichloroethylene	79-01-6	0.054	6.0	
		Trichloromonofluoromethane	75-69-4	0.020	30	
		Xylenes-mixed isomers(sum of o-, m-, and p-xylene concentrations)	1330-20-7	0.32	30	
		F003 and/or F005 solvent wastes that contain any combination of one or more of the following three solvents as the only listed F001-5 solvents: carbon disulfide, cyclohexanone, and/or methanol. (formerly 268.41(c))	Carbon disulfide	75-15-0	3.8	4.8 mg/l TCLP
			Cyclohexanone	108-94-1	0.36	0.75 mg/l TCLP
Methanol	67-56-1		5.6	0.75 mg/l TCLP		
F005 solvent waste containing 2-Nitropropane as the only listed F001-5 solvent.	2-Nitropropane	79-46-9	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST		
F005 solvent waste containing 2-Ethoxyethanol as the only listed F001-5 solvent.	2-Ethoxyethanol	110-80-5	BIODG; or CMBST	CMBST		
F006	Wastewater treatment sludges from electroplating operations except from the following processes: (1) Sulfuric acid anodizing of aluminum; (2) tin plating on carbon steel; (3) zinc plating (segregated basis) on carbon steel; (4) aluminum or zinc-aluminum plating on carbon steel; (5) cleaning/stripping associated with tin, zinc and aluminum plating on carbon steel; and (6) chemical etching and milling of aluminum.	Cadmium	7440-43-9	0.69	0.11 mg/l TCLP	
		Chromium (Total)	7440-47-3	2.77	0.60 mg/l TCLP	
		Cyanides (Total) ⁷	57-12-5	1.2	590	
		Cyanides (Amenable) ⁷	57-12-5	0.86	30	
		Lead	7439-92-1	0.69	0.75 mg/l TCLP	
		Nickel	7440-02-0	3.98	11 mg/l TCLP	
		Silver	7440-22-4	NA	0.14 mg/l TCLP	
F007	Spent cyanide plating bath solutions from electroplating operations.	Cadmium	7440-43-9	NA	0.11 mg/l TCLP	
		Chromium (Total)	7440-47-3	2.77	0.60 mg/l TCLP	
		Cyanides (Total) ⁷	57-12-5	1.2	590	
		Cyanides (Amenable) ⁷	57-12-5	0.86	30	
		Lead	7439-92-1	0.69	0.75 mg/l TCLP	
		Nickel	7440-02-0	3.98	11 mg/l TCLP	
		Silver	7440-22-4	NA	0.14 mg/l TCLP	
F008		Cadmium	7440-43-9	NA	0.11 mg/l TCLP	

268.40 Table - Treatment Standards For Hazardous Waste					
WASTE CODE	Waste Description And Treatment/Regulatory Subcategory ¹ (11/99, 8/00, 6/04, 2/07) NOTE: fb means followed by	Regulated hazardous constituent NOTE: NA means not applicable		Waste waters	Non waste waters
		Common Name	CAS ² Number	Concentration ³ in mg/l; or Technology Code ⁴	Concentration ⁵ in mg/kg unless noted as mg/l TCLP or Technology Code ⁴
	Plating bath residues from the bottom of plating baths from electroplating operations where cyanides are used in the process.	Chromium (Total)	7440-47-3	2.77	0.60 mg/l TCLP
		Cyanides (Total) ⁷	57-12-5	1.2	590
		Cyanides (Amenable) ⁷	57-12-5	0.86	30
		Lead	7439-92-1	0.69	0.75 mg/l TCLP
		Nickel	7440-02-0	3.98	11 mg/l TCLP
		Silver	7440-22-4	NA	0.14 mg/l TCLP
		F009	Spent stripping and cleaning bath solutions from electroplating operations where cyanides are used in the process.	Cadmium	7440-43-9
Chromium (Total)	7440-47-3	2.77		0.60 mg/l TCLP	
Cyanides (Total) ⁷	57-12-5	1.2		590	
Cyanides (Amenable) ⁷	57-12-5	0.86		30	
Lead	7439-92-1	0.69		0.75 mg/l TCLP	
Nickel	7440-02-0	3.98		11 mg/l TCLP	
Silver	7440-22-4	NA		0.14 mg/l TCLP	
F010	Quenching bath residues from oil baths from metal heat treating operations where cyanides are used in the process.	Cyanides (Total) ⁷	57-12-5	1.2	590
Cyanides (Amenable) ⁷		57-12-5	0.86	NA	
F011	Spent cyanide solutions from salt bath pot cleaning from metal heat treating operations.	Cadmium	7440-43-9	NA	0.11 mg/l TCLP
		Chromium (Total)	7440-47-3	2.77	0.60 mg/l TCLP
		Cyanides (Total) ⁷	57-12-5	1.2	590
		Cyanides (Amenable) ⁷	57-12-5	0.86	30
		Lead	7439-92-1	0.69	0.75 mg/l TCLP
		Nickel	7440-02-0	3.98	11 mg/l TCLP
		Silver	7440-22-4	NA	0.14 mg/l TCLP
F012	Quenching wastewater treatment sludges from metal heat treating operations where cyanides are used in the process.	Cadmium	7440-43-9	NA	0.11 mg/l TCLP
		Chromium (Total)	7440-47-3	2.77	0.60 mg/l TCLP
		Cyanides (Total) ⁷	57-12-5	1.2	590
		Cyanides (Amenable) ⁷	57-12-5	0.86	30
		Lead	7439-92-1	0.69	0.75 mg/l TCLP
		Nickel	7440-02-0	3.98	11 mg/l TCLP
		Silver	7440-22-4	NA	0.14 mg/l TCLP
F019	Wastewater treatment sludges from the chemical conversion coating of aluminum except from zirconium phosphating in aluminum can washing when such phosphating is an exclusive conversion coating process.	Chromium (Total)	7440-47-3	2.77	0.60 mg/l TCLP
		Cyanides (Total) ⁷	57-12-5	1.2	590
		Cyanides (Amenable) ⁷	57-12-5	0.86	30
F020, F021, F022, F023, F026	Wastes (except wastewater and spent carbon from hydrogen chloride purification) from the production or manufacturing use (as a reactant, chemical intermediate, or component in a formulating process) of: (1) tri- or tetrachlorophenol, or of intermediates used to produce their pesticide derivatives, excluding wastes from the production of Hexachlorophene from highly purified 2,4,5-trichlorophenol (F020); (2) pentachlorophenol, or of intermediates used to produce its derivatives (i.e., F021); (3) tetra-,	HxCDDs (All Hexachlorodibenzo-p-dioxins)	NA	0.000063	0.001
		HxCDFs (All Hexachlorodibenzofurans)	NA	0.000063	0.001
		PeCDDs (All Pentachlorodibenzo-p-dioxins)	NA	0.000063	0.001
		PeCDFs (All Pentachlorodibenzofurans)	NA	0.000035	0.001
		Pentachlorophenol	87-86-5	0.089	7.4
		TCDDs (All Tetrachlorodibenzo-p-dioxins)	NA	0.000063	0.001

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268.40 Table - Treatment Standards For Hazardous Waste						
WASTE CODE	Waste Description And Treatment/Regulatory Subcategory ¹ (11/99, 8/00, 6/04, 2/07) NOTE: fb means followed by	Regulated hazardous constituent NOTE: NA means not applicable		Waste waters	Non waste waters	
		Common Name	CAS ² Number	Concentration ³ in mg/l; or Technology Code ⁴	Concentration ⁵ in mg/kg unless noted as mg/l TCLP or Technology Code ⁴	
	penta-, or hexachlorobenzenes under alkaline conditions (i.e., F022); and from the production of materials on equipment previously used for the production or manufacturing use (as a reactant, chemical intermediate, or component in a formulating process) of: (1) tri- or tetrachlorophenols, excluding wastes from equipment used only for the production of Hexachlorophene from highly purified 2,4,5-trichlorophenol (F023); (2) tetra-, penta-, or hexachlorobenzenes under alkaline conditions (i.e., F026).	TCDFs (All Tetrachlorodibenzofurans)	NA	0.000063	0.001	
		2,4,5-Trichlorophenol	95-95-4	0.18	7.4	
		2,4,6-Trichlorophenol	88-06-2	0.035	7.4	
		2,3,4,6-Tetrachlorophenol	58-90-2	0.030	7.4	
F024	Process wastes, including but not limited to, distillation residues, heavy ends, tars, and reactor clean-out wastes, from the production of certain chlorinated aliphatic hydrocarbons by free radical catalyzed processes. These chlorinated aliphatic hydrocarbons are those having carbon chain lengths ranging from one to and including five, with varying amounts and positions of chlorine substitution. (This listing does not include wastewaters, wastewater treatment sludges, spent catalysts, and wastes listed in 261.31 or 261.32.).	All F024 wastes	NA	CMBST ¹¹	CMBST ¹¹	
		2-Chloro-1,3-butadiene	126-99-8	0.057	0.28	
		3-Chloropropylene	107-05-1	0.036	30	
		1,1-Dichloroethane	75-34-3	0.059	6.0	
		1,2-Dichloroethane	107-06-2	0.21	6.0	
		1,2-Dichloropropane	78-87-5	0.85	18	
		cis-1,3-Dichloropropylene	10061-01-5	0.036	18	
		trans-1,3-Dichloropropylene	10061-02-6	0.036	18	
		bis(2-Ethylhexyl) phthalate	117-81-7	0.28	28	
		Hexachloroethane	67-72-1	0.055	30	
		Chromium (Total)	7440-47-3	2.77	0.60 mg/l TCLP	
		Nickel	7440-02-0	3.98	11 mg/l TCLP	
F025	Condensed light ends from the production of certain chlorinated aliphatic hydrocarbons, by free radical catalyzed processes. These chlorinated aliphatic hydrocarbons are those having carbon chain lengths ranging from one to and including five, with varying amounts and positions of chlorine substitution.F025 - Light Ends Subcategory	Carbon tetrachloride	56-23-5	0.057	6.0	
		Chloroform	67-66-3	0.046	6.0	
		1,2-Dichloroethane	107-06-2	0.21	6.0	
		1,1-Dichloroethylene	75-35-4	0.025	6.0	
		Methylene chloride	75-9-2	0.089	30	
		1,1,2-Trichloroethane	79-00-5	0.054	6.0	
		Trichloroethylene	79-01-6	0.054	6.0	
		Vinyl chloride	75-01-4	0.27	6.0	
		Spent filters and filter aids, and spent desiccant wastes from the production of certain chlorinated aliphatic hydrocarbons, by free radical catalyzed processes. These chlorinated aliphatic hydrocarbons are those having carbon chain lengths ranging from one to and including five, with varying amounts and positions of chlorine substitution.F025 - Spent Filters/Aids and Desiccants Subcategory	Carbon tetrachloride	56-23-5	0.057	6.0
	Chloroform		67-66-3	0.046	6.0	
	Hexachlorobenzene		118-74-1	0.055	10	
	Hexachlorobutadiene		87-68-3	0.055	5.6	
	Hexachloroethane		67-72-1	0.055	30	
	Methylene chloride		75-9-2	0.089	30	
	1,1,2-Trichloroethane		79-00-5	0.054	6.0	
	Trichloroethylene		79-01-6	0.054	6.0	
	Vinyl chloride		75-01-4	0.27	6.0	
	F027	Discarded unused formulations containing tri-, tetra-, or pentachlorophenol or discarded unused formulations containing compounds derived from these chlorophenols. (This listing does not include formulations containing hexachlorophene synthesized from prepurified 2,4,5-trichlorophenol as the sole component.).	HxCDDs (All Hexachlorodibenzo-p-dioxins)	NA	0.000063	0.001
HxCDFs (All Hexachlorodibenzofurans)			NA	0.000063	0.001	
PeCDDs (All Pentachlorodibenzo-p-dioxins)			NA	0.000063	0.001	
PeCDFs (All Pentachlorodibenzofurans)			NA	0.000035	0.001	
Pentachlorophenol			87-86-5	0.089	7.4	
TCDDs (All Tetrachlorodibenzo-p-dioxins)			NA	0.000063	0.001	
TCDFs (All Tetrachlorodibenzofurans)			NA	0.000063	0.001	
2,4,5-Trichlorophenol			95-95-4	0.18	7.4	
2,4,6-Trichlorophenol			88-06-2	0.035	7.4	
2,3,4,6-Tetrachlorophenol			58-90-2	0.030	7.4	
F028			Residues resulting from the incineration or thermal treatment of soil contaminated with EPA	HxCDDs (All Hexachlorodibenzo-p-dioxins)	NA	0.000063

268.40 Table - Treatment Standards For Hazardous Waste							
WASTE CODE	Waste Description And Treatment/Regulatory Subcategory ¹ (11/99, 8/00, 6/04, 2/07) NOTE: fb means followed by	Regulated hazardous constituent NOTE: NA means not applicable		Waste waters	Non waste waters		
		Common Name	CAS ² Number	Concentration ³ in mg/l; or Technology Code ⁴	Concentration ⁵ in mg/kg unless noted as mg/l TCLP or Technology Code ⁴		
	Hazardous Wastes Nos. F020, F021, F023, F026, and F027.	HxCDFs (All Hexachlorodibenzofurans)	NA	0.000063	0.001		
		PeCDDs (All Pentachlorodibenzo-p-dioxins)	NA	0.000063	0.001		
		PeCDFs (All Pentachlorodibenzofurans)	NA	0.000035	0.001		
		Pentachlorophenol	87-86-5	0.089	7.4		
		TCDDs (All Tetrachlorodibenzo-p-dioxins)	NA	0.000063	0.001		
		TCDFs (All Tetrachlorodibenzofurans)	NA	0.000063	0.001		
		2,4,5-Trichlorophenol	95-95-4	0.18	7.4		
		2,4,6-Trichlorophenol	88-06-2	0.035	7.4		
		2,3,4,6-Tetrachlorophenol	58-90-2	0.030	7.4		
		F032	Wastewaters (except those that have not come into contact with process contaminants), process residuals, preservative drippage, and spent formulations from wood preserving processes generated at plants that currently use or have previously used chlorophenolic formulations (except potentially cross-contaminated wastes that have had the F032 waste code deleted in accordance with 261.35 of this chapter or sediment sludge from the treatment of wastewater from wood preserving processes that use potentially cross-contaminated wastes that are otherwise currently regulated as hazardous wastes (i.e., F034 or F035), and where the generator does not resume or initiate use of chlorophenolic formulations). This listing does not include K001 bottom creosote and/or penta-chlorophenol.	Acenaphthene	83-32-9	0.059	3.4
				Anthracene	120-12-7	0.059	3.4
				Benzo(a)anthracene	56-55-3	0.059	3.4
				Benzo(b)fluoranthene (difficult to distinguish from benzo(k)fluoranthene)	205-99-2	0.11	6.8
Benzo(k)fluoranthene (difficult to distinguish from benzo(b)fluoranthene)	207-08-9			0.11	6.8		
Benzo(a)pyrene	50-32-8			0.061	3.4		
Chrysene	218-01-9			0.059	3.4		
Dibenz(a,h)anthracene	53-70-3			0.055	8.2		
2-4-Dimethyl phenol	105-67-9			0.036	14		
Fluorene	86-73-7			0.059	3.4		
Hexachlorodibenzo-p-dioxins	NA			0.000063, or CMBST ¹¹	0.001, or CMBST ¹¹		
Hexachlorodibenzofurans	NA			0.000063, or CMBST ¹¹	0.001, or CMBST ¹¹		
Indeno (1,2,3-c,d) pyrene	193-39-5			0.0055	3.4		
Naphthalene	91-20-3			0.059	5.6		
Pentachlorodibenzo-p-dioxins	NA			0.000063, or CMBST ¹¹	0.001, or CMBST ¹¹		
Pentachlorodibenzofurans	NA			0.000035, or CMBST ¹¹	0.001, or CMBST ¹¹		
Pentachlorophenol	87-86-5			0.089	7.4		
Phenanthrene	85-01-8			0.059	5.6		
Phenol	108-95-2			0.039	6.2		
Pyrene	129-00-0			0.067	8.2		
Tetrachlorodibenzo-p-dioxins	NA			0.000063, or CMBST ¹¹	0.001, or CMBST ¹¹		
Tetrachlorodibenzofurans	NA			0.000063, or CMBST ¹¹	0.001, or CMBST ¹¹		
2,3,4,6-Tetrachlorophenol	58-90-2			0.030	7.4		
2,4,6-Trichlorophenol	88-06-2	0.035	7.4				
Arsenic	7440-38-2	1.4	5.0 mg/l TCLP				
Chromium (Total)	7440-47-3	2.77	0.60 mg/l TCLP				
F034	Wastewaters (except those that have not come into contact with process contaminants), process residuals, preservative drippage, and spent formulations from wood preserving processes generated at plants that use creosote formulations. This listing does not include K001 bottom sediment sludge from the treatment of wastewater from wood preserving processes that use creosote and/or pentachlorophenol.	Acenaphthene	83-32-9	0.059	3.4		
		Anthracene	120-12-7	0.059	3.4		
		Benzo(a)anthracene	56-55-3	0.059	3.4		
		Benzo(b)fluoranthene (difficult to distinguish from benzo(k)fluoranthene)	205-99-2	0.11	6.8		
		Benzo(k)fluoranthene (difficult to distinguish from benzo(b)fluoranthene)	207-08-9	0.11	6.8		
		Benzo(a)pyrene	50-32-8	0.061	3.4		

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268.40 Table - Treatment Standards For Hazardous Waste					
WASTE CODE	Waste Description And Treatment/Regulatory Subcategory ¹ (11/99, 8/00, 6/04, 2/07) NOTE: fb means followed by	Regulated hazardous constituent NOTE: NA means not applicable		Waste waters	Non waste waters
		Common Name	CAS ² Number	Concentration ³ in mg/l; or Technology Code ⁴	Concentration ⁵ in mg/kg unless noted as mg/l TCLP or Technology Code ⁴
		Chrysene	218-01-9	0.059	3.4
		Dibenz(a,h)anthracene	53-70-3	0.055	8.2
		Fluorene	86-73-7	0.059	3.4
		Indeno (1,2,3-c,d) pyrene	193-39-5	0.0055	3.4
		Naphthalene	91-20-3	0.059	5.6
		Phenanthrene	85-01-8	0.059	5.6
		Pyrene	129-00-0	0.067	8.2
		Arsenic	7440-38-2	1.4	5.0 mg/l TCLP
		Chromium (Total)	7440-47-3	2.77	0.60 mg/l TCLP
F035	Wastewaters (except those that have not come into contact with process contaminants), process residuals, preservative drippage, and spent formulations from wood preserving processes generated at plants that use inorganic preservatives containing arsenic or chromium. This listing does not include K001 bottom sediment sludge from the treatment of wastewater from wood preserving processes that use creosote and/or pentachlorophenol.	Arsenic	7440-38-2	1.4	5.0 mg/l TCLP
		Chromium (Total)	7440-47-3	2.77	0.60 mg/l TCLP
F037	Petroleum refinery primary oil/water/solids separation sludge-Any sludge generated from the gravitational separation of oil/water/solids during the storage or treatment of process wastewaters and oily cooling wastewaters from petroleum refineries. Such sludges include, but are not limited to, those generated in: oil/water/solids separators; tanks and impoundments; ditches and other conveyances; sumps; and stormwater units receiving dry weather flow. Sludge generated in stormwater units that do not receive dry weather flow, sludges generated from non-contact once-through cooling waters segregated for treatment from other process or oily cooling waters, sludges generated in aggressive biological treatment units as defined in 261.31(b)(2) (including sludges generated in one or more additional units after wastewaters have been treated in aggressive biological treatment units) and K051 wastes are not included in this listing.	Acenaphthene	83-32-9	0.059	NA
		Anthracene	120-12-7	0.059	3.4
		Benzene	71-43-2	0.14	10
		Benz(a)anthracene	56-55-3	0.059	3.4
		Benzo(a)pyrene	50-32-8	0.061	3.4
		bis(2-Ethylhexyl) phthalate	117-81-7	0.28	28
		Chrysene	218-01-9	0.059	3.4
		Di-n-butyl phthalate	84-74-2	0.057	28
		Ethylbenzene	100-41-4	0.057	10
		Fluorene	86-73-7	0.059	NA
		Naphthalene	91-20-3	0.059	5.6
		Phenanthrene	85-01-8	0.059	5.6
		Phenol	108-95-2	0.039	6.2
		Pyrene	129-00-0	0.067	8.2
		Toluene	108-88-3	0.080	10
		Xylenes-mixed isomers(sum of o-, m-, and p-xylene concentrations)	1330-20-7	0.32	30
		Chromium (Total)	7440-47-3	2.77	0.60 mg/l TCLP
		Cyanides (Total) ⁷	57-12-5	1.2	590
		Lead	7439-92-1	0.69	NA
		Nickel	7440-02-0	NA	11 mg/l TCLP
F038	Petroleum refinery secondary (emulsified) oil/water/solids separation sludge and/or float generated from the physical and/or chemical separation of oil/water/solids in process wastewaters and oily cooling wastewaters from petroleum refineries. Such wastes include, but are not limited to, all sludges and floats generated in: induced air floatation (IAF) units, tanks and impoundments, and all sludges generated in DAF units. Sludges generated in stormwater units that do not receive dry weather flow, sludges generated from non-contact once-through cooling waters segregated for treatment from other process or oily cooling waters, sludges and floats generated in aggressive biological treatment units as defined in 261.31(b)(2) (including sludges and floats generated in one or more additional units after	Benzene	71-43-2	0.14	10
		Benzo(a)pyrene	50-32-8	0.061	3.4
		bis(2-Ethylhexyl) phthalate	117-81-7	0.28	28
		Chrysene	218-01-9	0.059	3.4
		Di-n-butyl phthalate	84-74-2	0.057	28
		Ethylbenzene	100-41-4	0.057	10
		Fluorene	86-73-7	0.059	NA
		Naphthalene	91-20-3	0.059	5.6
		Phenanthrene	85-01-8	0.059	5.6
		Phenol	108-95-2	0.039	6.2
		Pyrene	129-00-0	0.067	8.2
		Toluene	108-88-3	0.080	10
		Xylenes-mixed isomers(sum of o-, m-, and p-xylene concentrations)	1330-20-7	0.32	30
		Chromium (Total)	7440-47-3	2.77	0.60 mg/l TCLP

268.40 Table - Treatment Standards For Hazardous Waste

WASTE CODE	Waste Description And Treatment/Regulatory Subcategory ¹ (11/99, 8/00, 6/04, 2/07) NOTE: fb means followed by	Regulated hazardous constituent NOTE: NA means not applicable		Waste waters	Non waste waters
		Common Name	CAS ² Number	Concentration ³ in mg/l; or Technology Code ⁴	Concentration ⁵ in mg/kg unless noted as mg/l TCLP or Technology Code ⁴
	wastewaters have been treated in aggressive biological units) and F037, K048, and K051 are not included in this listing.	Cyanides (Total) ⁷	57-12-5	1.2	590
		Lead	7439-92-1	0.69	NA
		Nickel	7440-02-0	NA	11 mg/l TCLP
F039	Leachate (liquids that have percolated through land disposed wastes) resulting from the disposal of more than one restricted waste classified as hazardous under subpart D of this part. (Leachate resulting from the disposal of one or more of the following EPA Hazardous Wastes and no other Hazardous Wastes retains its EPA Hazardous Waste Number(s): F020, F021, F022, F026, F027, and/or F028).(6/02, 2/07)	Acenaphthylene	208-96-8	0.059	3.4
		Acenaphthene	83-32-9	0.059	3.4
		Acetone	67-64-1	0.28	160
		Acetonitrile	75-05-8	5.6	NA
		Acetophenone	96-86-2	0.010	9.7
		2-Acetylaminofluorene	53-96-3	0.059	140
		Acrolein	107-02-8	0.29	NA
		Acrylonitrile	107-13-1	0.24	84
		Aldrin	309-00-2	0.021	0.066
		4-Aminobiphenyl	92-67-1	0.13	NA
		Aniline	62-53-3	0.81	14
		o-Anisidine (2-methoxyaniline)	90-04-0	0.010	0.66
		Anthracene	120-12-7	0.059	3.4
		Aramite	140-57-8	0.36	NA
		alpha-BHC	319-84-6	0.00014	0.066
		beta-BHC	319-85-7	0.00014	0.066
		delta-BHC	319-86-8	0.023	0.066
		gamma-BHC	58-89-9	0.0017	0.066
		Benzene	71-43-2	0.14	10
		Benz(a)anthracene	56-55-3	0.059	3.4
		Benzo(b)fluoranthene (difficult to distinguish from benzo(k)fluoranthene)	205-99-2	0.11	6.8
		Benzo(k)fluoranthene (difficult to distinguish from benzo(b)fluoranthene)	207-08-9	0.11	6.8
		Benzo(g,h,i)perylene	191-24-2	0.0055	1.8
		Benzo(a)pyrene	50-32-8	0.061	3.4
		Bromodichloromethane	75-27-4	0.35	15
		Methyl bromide (Bromomethane)	74-83-9	0.11	15
		4-Bromophenyl phenyl ether	101-55-3	0.055	15
		n-Butyl alcohol	71-36-3	5.6	2.6
		Butyl benzyl phthalate	85-68-7	0.017	28
		2-sec-Butyl-4,6-dinitrophenol (Dinoseb)	88-85-7	0.066	2.5
		Carbon disulfide	75-15-0	3.8	NA
		Carbon tetrachloride	56-23-5	0.057	6.0
		Chlordane (alpha and gamma isomers)	57-74-9	0.0033	0.26
		p-Chloroaniline	106-47-8	0.46	16
		Chlorobenzene	108-90-7	0.057	6.0
		Chlorobenzilate	510-15-6	0.10	NA
		2-Chloro-1,3-butadiene	126-99-8	0.057	NA
		Chlorodibromomethane	124-48-1	0.057	15
		Chloroethane	75-00-3	0.27	6.0
		bis(2-Chloroethoxy)methane	111-91-1	0.036	7.2
		bis(2-Chloroethyl)ether	111-44-4	0.033	6.0
		Chloroform	67-66-3	0.046	6.0
		bis(2-Chloroisopropyl)ether	39638-32-9	0.055	7.2
		p-Chloro-m-cresol	59-50-7	0.018	14
		Chloromethane (Methyl chloride)	74-87-3	0.19	30
		2-Chloronaphthalene	91-58-7	0.055	5.6
2-Chlorophenol	95-57-8	0.044	5.7		
3-Chloropropylene	107-05-1	0.036	30		
Chrysene	218-01-9	0.059	3.4		

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268.40 Table - Treatment Standards For Hazardous Waste					
WASTE CODE	Waste Description And Treatment/Regulatory Subcategory ¹ (11/99, 8/00, 6/04, 2/07) NOTE: fb means followed by	Regulated hazardous constituent NOTE: NA means not applicable		Waste waters	Non waste waters
		Common Name	CAS ² Number	Concentration ³ in mg/l; or Technology Code ⁴	Concentration ⁵ in mg/kg unless noted as mg/l TCLP or Technology Code ⁴
		o-Cresol	95-48-7	0.11	5.6
		p-Cresidine	120-71-8	0.010	0.66
		m-Cresol(difficult to distinguish from p-cresol)	108-39-4	0.77	5.6
		p-Cresol(difficult to distinguish from m-cresol)	106-44-5	0.77	5.6
		Cyclohexanone	108-94-1	0.36	NA
		1,2-Dibromo-3-chloropropane	96-12-8	0.11	15
		Ethylene dibromide (1,2-Dibromoethane)	106-93-4	0.028	15
		Dibromomethane	74-95-3	0.11	15
		2,4-D (2,4-Dichlorophenoxyacetic acid)	94-75-7	0.72	10
		o,p'-DDD	53-19-0	0.023	0.087
		p,p'-DDD	72-54-8	0.023	0.087
		o,p'-DDE	3424-82-6	0.031	0.087
		p,p'-DDE	72-55-9	0.031	0.087
		o,p'-DDT	789-02-6	0.0039	0.087
		p,p'-DDT	50-29-3	0.0039	0.087
		Dibenz(a,h)anthracene	53-70-3	0.055	8.2
		Dibenz(a,e)pyrene	192-65-4	0.061	NA
		m-Dichlorobenzene	541-73-1	0.036	6.0
		o-Dichlorobenzene	95-50-1	0.088	6.0
		p-Dichlorobenzene	106-46-7	0.090	6.0
		Dichlorodifluoromethane	75-71-8	0.23	7.2
		1,1-Dichloroethane	75-34-3	0.059	6.0
		1,2-Dichloroethane	107-06-2	0.21	6.0
		1,1-Dichloroethylene	75-35-4	0.025	6.0
		trans-1,2-Dichloroethylene	156-60-5	0.054	30
		2,4-Dichlorophenol	120-83-2	0.044	14
		2,6-Dichlorophenol	87-65-0	0.044	14
		1,2-Dichloropropane	78-87-5	0.85	18
		cis-1,3-Dichloropropylene	10061-01-5	0.036	18
		trans-1,3-Dichloropropylene	10061-02-6	0.036	18
		Dieldrin	60-57-1	0.017	0.13
		Diethyl phthalate	84-66-2	0.20	28
		2,4-Dimethylaniline (2,4-xylydine)	95-68-1	0.010	0.66
		2-4-Dimethyl phenol	105-67-9	0.036	14
		Dimethyl phthalate	131-11-3	0.047	28
		Di-n-butyl phthalate	84-74-2	0.057	28
		1,4-Dinitrobenzene	100-25-4	0.32	2.3
		4,6-Dinitro-o-cresol	534-52-1	0.28	160
		2,4-Dinitrophenol	51-28-5	0.12	160
		2,4-Dinitrotoluene	121-14-2	0.32	140
		2,6-Dinitrotoluene	606-20-2	0.55	28
		Di-n-octyl phthalate	117-84-0	0.017	28
		Di-n-propylnitrosamine	621-64-7	0.40	14
		1,4-Dioxane	123-91-1	12.0	170
		Diphenylamine (difficult to distinguish from diphenylnitrosamine)	122-39-4	0.92	NA
		Diphenylnitrosamine (difficult to distinguish from diphenylamine)	86-30-6	0.92	NA
		1,2-Diphenylhydrazine	122-66-7	0.087	NA
		Disulfoton	298-04-4	0.017	6.2
		Endosulfan I	939-98-8	0.023	0.066
		Endosulfan II	33213-6-5	0.029	0.13
		Endosulfan sulfate	1031-07-8	0.029	0.13

268.40 Table - Treatment Standards For Hazardous Waste					
WASTE CODE	Waste Description And Treatment/Regulatory Subcategory ¹ (11/99, 8/00, 6/04, 2/07) NOTE: fb means followed by	Regulated hazardous constituent NOTE: NA means not applicable		Waste waters	Non waste waters
		Common Name	CAS ² Number	Concentration ³ in mg/l; or Technology Code ⁴	Concentration ⁵ in mg/kg unless noted as mg/l TCLP or Technology Code ⁴
		Endrin	72-20-8	0.0028	0.13
		Endrin aldehyde	7421-93-4	0.025	0.13
		Ethyl acetate	141-78-6	0.34	33
		Ethyl cyanide (Propanenitrile)	107-12-0	0.24	360
		Ethyl benzene	100-41-4	0.057	10
		Ethyl ether	60-29-7	0.12	160
		bis(2-Ethylhexyl) phthalate	117-81-7	0.28	28
		Ethyl methacrylate	97-63-2	0.14	160
		Ethylene oxide	75-21-8	0.12	NA
		Famphur	52-85-7	0.017	15
		Fluoranthene	206-44-0	0.068	3.4
		Fluorene	86-73-7	0.059	3.4
		Heptachlor	76-44-8	0.0012	0.066
		1, 2, 3, 4, 6, 7, 8-Heptachlorodibenzo-p-dioxin (1, 2, 3, 4, 6, 7, 8 HpCDD) (6/02)	35822-46-9	0.000035	0.0025
		1,2,3,4,6,7,8-Heptachlorodibenzofuran (1,2,3,4,6,7,8-HpCDF) (6/02)	67562-39-4	0.000035	0.0025
		1,2,3,4,7,8,9-Heptachlorodibenzofuran (1,2,3,4,7,8,9-HpCDF) (6/02)	55673-89-7	0.000035	0.0025
		Heptachlor epoxide	1024-57-3	0.016	0.066
		Hexachlorobenzene	118-74-1	0.055	10
		Hexachlorobutadiene	87-68-3	0.055	5.6
		Hexachlorocyclopentadiene	77-47-4	0.057	2.4
		HxCDDs (All Hexachlorodibenzo-p-dioxins)	NA	0.000063	0.001
		HxCDFs (All Hexachlorodibenzofurans)	NA	0.000063	0.001
		Hexachloroethane	67-72-1	0.055	30
		Hexachloropropylene	1888-71-7	0.035	30
		Indeno (1,2,3-c,d) pyrene	193-39-5	0.0055	3.4
		Iodomethane	74-88-4	0.19	65
		Isobutyl alcohol	78-83-1	5.6	170
		Isodrin	465-73-6	0.021	0.066
		Isosafrole	120-58-1	0.081	2.6
		Kepone	143-50-8	0.0011	0.13
		Methacrylonitrile	126-98-7	0.24	84
		Methanol	67-56-1	5.6	NA
		Methapyrilene	91-80-5	0.081	1.5
		Methoxychlor	72-43-5	0.25	0.18
		3-Methylcholanthrene	56-49-5	0.0055	15
		4,4-Methylene bis(2-chloroaniline)	101-14-4	0.50	30
		Methylene chloride	75-09-2	0.089	30
		Methyl ethyl ketone	78-93-3	0.28	36
		Methyl isobutyl ketone	108-10-1	0.14	33
		Methyl methacrylate	80-62-6	0.14	160
		Methyl methansulfonate	66-27-3	0.018	NA
		Methyl parathion	298-00-0	0.014	4.6
		Naphthalene	91-20-3	0.059	5.6
		2-Naphthylamine	91-59-8	0.52	NA
		p-Nitroaniline	100-01-6	0.028	28
		Nitrobenzene	98-95-3	0.068	14
		5-Nitro-o-toluidine	99-55-8	0.32	28
		p-Nitrophenol	100-02-7	0.12	29
		N-Nitrosodiethylamine	55-18-5	0.40	28
		N-Nitrosodimethylamine	62-75-9	0.40	NA

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268.40 Table - Treatment Standards For Hazardous Waste					
WASTE CODE	Waste Description And Treatment/Regulatory Subcategory ¹ (11/99, 8/00, 6/04, 2/07) NOTE: fb means followed by	Regulated hazardous constituent NOTE: NA means not applicable		Waste waters	Non waste waters
		Common Name	CAS ² Number	Concentration ³ in mg/l; or Technology Code ⁴	Concentration ⁵ in mg/kg unless noted as mg/l TCLP or Technology Code ⁴
		N-Nitroso-di-n-butylamine	924-16-3	0.40	17
		N-Nitrosomethylethylamine	10595-95-6	0.40	2.3
		N-Nitrosomorpholine	59-89-2	0.40	2.3
		N-Nitrosopiperidine	100-75-4	0.013	35
		N-Nitrosopyrrolidine	930-55-2	0.013	35
		1,2,3,4,6,7,8,9-Octachlorodibenzo-p-dioxin (OCDD) (6/02)	3268-87-9	0.000063	0.0025
		1,2,3,4,6,7,8,9-Octachlorodibenzofuran (OCDF) (6/02)	39001-02-0	0.000063	0.005
		Parathion	56-38-2	0.014	4.6
		Total PCBs(sum of all PCB isomers, or all Aroclors)	1336-36-3	0.10	10
		Pentachlorobenzene	608-93-5	0.055	10
		PeCDDs (All Pentachlorodibenzo-p-dioxins)	NA	0.000063	0.001
		PeCDFs (All Pentachlorodibenzofurans)	NA	0.000035	0.001
		Pentachloronitrobenzene	82-68-8	0.055	4.8
		Pentachlorophenol	87-86-5	0.089	7.4
		Phenacetin	62-44-2	0.081	16
		Phenanthrene	85-01-8	0.059	5.6
		Phenol	108-95-2	0.039	6.2
		1,3-Phenylenediamine	108-45-2	0.010	0.66
		Phorate	298-02-2	0.021	4.6
		Phthalic anhydride	85-44-9	0.055	NA
		Pronamide	23950-58-5	0.093	1.5
		Pyrene	129-00-0	0.067	8.2
		Pyridine	110-86-1	0.014	16
		Safrole	94-59-7	0.081	22
		Silvex (2,4,5-TP)	93-72-1	0.72	7.9
		2,4,5-T	93-76-5	0.72	7.9
		1,2,4,5-Tetrachlorobenzene	95-94-3	0.055	14
		TCDDs (All Tetrachlorodibenzo-p-dioxins)	NA	0.000063	0.001
		TCDFs (All Tetrachlorodibenzofurans)	NA	0.000063	0.001
		1,1,1,2-Tetrachloroethane	630-20-6	0.057	6.0
		1,1,2,2-Tetrachloroethane	79-34-6	0.057	6.0
		Tetrachloroethylene	127-18-4	0.056	6.0
		2,3,4,6-Tetrachlorophenol	58-90-2	0.030	7.4
		Toluene	108-88-3	0.080	10
		Toxaphene	8001-35-2	0.0095	2.6
		Bromoform (Tribromomethane)	75-25-2	0.63	15
		1,2,4-Trichlorobenzene	120-82-1	0.055	19
		1,1,1-Trichloroethane	71-55-6	0.054	6.0
		1,1,2-Trichloroethane	79-00-5	0.054	6.0
		Trichloroethylene	79-01-6	0.054	6.0
		Trichloromonofluoromethane	75-69-4	0.020	30
		2,4,5-Trichlorophenol	95-95-4	0.18	7.4
		2,4,6-Trichlorophenol	88-06-2	0.035	7.4
		1,2,3-Trichloropropane	96-18-4	0.85	30
		1,1,2-Trichloro-1,2,2-trifluoroethane	76-13-1	0.057	30
		tris(2,3-Dibromopropyl) phosphate	126-72-7	0.11	NA
		Vinyl chloride	75-01-4	0.27	6.0

268.40 Table - Treatment Standards For Hazardous Waste					
WASTE CODE	Waste Description And Treatment/Regulatory Subcategory ¹ (11/99, 8/00, 6/04, 2/07) NOTE: fb means followed by	Regulated hazardous constituent NOTE: NA means not applicable		Waste waters	Non waste waters
		Common Name	CAS ² Number	Concentration ³ in mg/l; or Technology Code ⁴	Concentration ⁵ in mg/kg unless noted as mg/l TCLP or Technology Code ⁴
		Xylenes-mixed isomers(sum of o-, m-, and p-xylene concentrations)	1330-20-7	0.32	30
		Antimony	7440-36-0	1.9	1.15 mg/l TCLP
		Arsenic	7440-38-2	1.4	5.0 mg/l TCLP
		Barium	7440-39-3	1.2	21 mg/l TCLP
		Beryllium	7440-41-7	0.82	NA
		Cadmium	7440-43-9	0.69	0.11 mg/l TCLP
		Chromium (Total)	7440-47-3	2.77	0.60 mg/l TCLP
		Cyanides (Total) ⁷	57-12-5	1.2	590
		Cyanides (Amenable) ⁷	57-12-5	0.86	NA
		Fluoride	16964-48-8	35	NA
		Lead	7439-92-1	0.69	0.75 mg/l TCLP
		Mercury	7439-97-6	0.15	0.025 mg/l TCLP
		Nickel	7440-02-0	3.98	11 mg/l TCLP
		Selenium	7782-49-2	0.82	5.7 mg/l TCLP
		Silver	7440-22-4	0.43	0.14 mg/l TCLP
		Sulfide	8496-25-8	14	NA
		Thallium	7440-28-0	1.4	NA
		Vanadium	7440-62-2	4.3	NA
K001	Bottom sediment sludge from the treatment of wastewaters from wood preserving processes that use creosote and/or pentachlorophenol.	Naphthalene	91-20-3	0.059	5.6
		Pentachlorophenol	87-86-5	0.089	7.4
		Phenanthrene	85-01-8	0.059	5.6
		Pyrene	129-00-0	0.067	8.2
		Toluene	108-88-3	0.080	10
		Xylenes-mixed isomers(sum of o-, m-, and p-xylene concentrations)	1330-20-7	0.32	30
		Lead	7439-92-1	0.69	0.75 mg/l TCLP
K002	Wastewater treatment sludge from the production of chrome yellow and orange pigments.	Chromium (Total)	7440-47-3	2.77	0.60 mg/l TCLP
		Lead	7439-92-1	0.69	0.75 mg/l TCLP
K003	Wastewater treatment sludge from the production of molybdate orange pigments.	Chromium (Total)	7440-47-3	2.77	0.60 mg/l TCLP
		Lead	7439-92-1	0.69	0.75 mg/l TCLP
K004	Wastewater treatment sludge from the production of zinc yellow pigments.	Chromium (Total)	7440-47-3	2.77	0.60 mg/l TCLP
		Lead	7439-92-1	0.69	0.75 mg/l TCLP
K005	Wastewater treatment sludge from the production of chrome green pigments.	Chromium (Total)	7440-47-3	2.77	0.60 mg/l TCLP
		Lead	7439-92-1	0.69	0.75 mg/l TCLP
		Cyanides (Total) ⁷	57-12-5	1.2	590
K006	Wastewater treatment sludge from the production of chrome oxide green pigments (anhydrous).	Chromium (Total)	7440-47-3	2.77	0.60 mg/l TCLP
		Lead	7439-92-1	0.69	0.75 mg/l TCLP
	Wastewater treatment sludge from the production of chrome oxide green pigments (hydrated).	Chromium (Total)	7440-47-3	2.77	0.60 mg/l TCLP
		Lead	7439-92-1	0.69	NA

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		Common Name	CAS ² Number	Concentration ³ in mg/l; or Technology Code ⁴	Concentration ⁵ in mg/kg unless noted as mg/l TCLP or Technology Code ⁴
K007	Wastewater treatment sludge from the production of iron blue pigments.	Chromium (Total)	7440-47-3	2.77	0.60 mg/l TCLP
		Lead	7439-92-1	0.69	0.75 mg/l TCLP
		Cyanides (Total) ⁷	57-12-5	1.2	590
K008	Oven residue from the production of chrome oxide green pigments.	Chromium (Total)	7440-47-3	2.77	0.60 mg/l TCLP
		Lead	7439-92-1	0.69	0.75 mg/l TCLP
K009	Distillation bottoms from the production of acetaldehyde from ethylene.	Chloroform	67-66-3	0.046	6.0
K010	Distillation side cuts from the production of acetaldehyde from ethylene.	Chloroform	67-66-3	0.046	6.0
K011	Bottom stream from the wastewater stripper in the production of acrylonitrile.	Acetonitrile	75-05-8	5.6	38
		Acrylonitrile	107-13-1	0.24	84
		Acrylamide	79-06-1	19	23
		Benzene	71-43-2	0.14	10
		Cyanide (Total)	57-12-5	1.2	590
K013	Bottom stream from the acetonitrile column in the production of acrylonitrile.	Acetonitrile	75-05-8	5.6	38
		Acrylonitrile	107-13-1	0.24	84
		Acrylamide	79-06-1	19	23
		Benzene	71-43-2	0.14	10
		Cyanide (Total)	57-12-5	1.2	590
K014	Bottoms from the acetonitrile purification column in the production of acrylonitrile.	Acetonitrile	75-05-8	5.6	38
		Acrylonitrile	107-13-1	0.24	84
		Acrylamide	79-06-1	19	23
		Benzene	71-43-2	0.14	10
		Cyanide (Total)	57-12-5	1.2	590
K015	Still bottoms from the distillation of benzyl chloride.	Anthracene	120-12-7	0.059	3.4
		Benzal chloride	98-87-3	0.055	6.0
		Benzo(b)fluoranthene (difficult to distinguish from benzo(k)fluoranthene)	205-99-2	0.11	6.8
		Benzo(k)fluoranthene (difficult to distinguish from benzo(b)fluoranthene)	207-08-9	0.11	6.8
		Phenanthrene	85-01-8	0.059	5.6
		Toluene	108-88-3	0.080	10
		Chromium (Total)	7440-47-3	2.77	0.60 mg/l TCLP
		Nickel	7440-02-0	3.98	11 mg/l TCLP
		K016	Heavy ends or distillation residues from the production of carbon tetrachloride.	Hexachlorobenzene	118-74-1
Hexachlorobutadiene	87-68-3			0.055	5.6
Hexachlorocyclopentadiene	77-47-4			0.057	2.4
Hexachloroethane	67-72-1			0.055	30
Tetrachloroethylene	127-18-4			0.056	6.0
K017	Heavy ends (still bottoms) from the purification column in the production of epichlorohydrin.	bis(2-Chloroethyl)ether	111-44-4	0.033	6.0
		1,2-Dichloropropane	78-87-5	0.85	18
		1,2,3-Trichloropropane	96-18-4	0.85	30
K018	Heavy ends from the fractionation column in ethyl chloride production.	Chloroethane	75-00-3	0.27	6.0
		Chloromethane	74-87-3	0.19	NA
		1,1-Dichloroethane	75-34-3	0.059	6.0
		1,2-Dichloroethane	107-06-2	0.21	6.0
		Hexachlorobenzene	118-74-1	0.055	10
		Hexachlorobutadiene	87-68-3	0.055	5.6
		Hexachloroethane	67-72-1	0.055	30
		Pentachloroethane	76-01-7	NA	6.0
		1,1,1-Trichloroethane	71-55-6	0.054	6.0
K019	Heavy ends from the distillation of ethylene dichloride in ethylene dichloride production.	bis(2-Chloroethyl)ether	111-44-4	0.033	6.0
		Chlorobenzene	108-90-7	0.057	6.0

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WASTE CODE	Waste Description And Treatment/Regulatory Subcategory ¹ (11/99, 8/00, 6/04, 2/07) NOTE: fb means followed by	Regulated hazardous constituent NOTE: NA means not applicable		Waste waters	Non waste waters		
		Common Name	CAS ² Number	Concentration ³ in mg/l; or Technology Code ⁴	Concentration ⁵ in mg/kg unless noted as mg/l TCLP or Technology Code ⁴		
		Chloroform	67-66-3	0.046	6.0		
		p-Dichlorobenzene	106-46-7	0.090	NA		
		1,2-Dichloroethane	107-06-2	0.21	6.0		
		Fluorene	86-73-7	0.059	NA		
		Hexachloroethane	67-72-1	0.055	30		
		Naphthalene	91-20-3	0.059	5.6		
		Phenanthrene	85-01-8	0.059	5.6		
		1,2,4,5-Tetrachlorobenzene	95-94-3	0.055	NA		
		Tetrachloroethylene	127-18-4	0.056	6.0		
		1,2,4-Trichlorobenzene	120-82-1	0.055	19		
		1,1,1-Trichloroethane	71-55-6	0.054	6.0		
		K020	Heavy ends from the distillation of vinyl chloride in vinyl chloride monomer production.	1,2-Dichloroethane	107-06-2	0.21	6.0
				1,1,2,2-Tetrachloroethane	79-34-6	0.057	6.0
Tetrachloroethylene	127-18-4			0.056	6.0		
K021	Aqueous spent antimony catalyst waste from fluoromethanes production.	Carbon tetrachloride	56-23-5	0.057	6.0		
		Chloroform	67-66-3	0.046	6.0		
		Antimony	7440-36-0	1.9	1.15 mg/l TCLP		
K022	Distillation bottom tars from the production of phenol/acetone from cumene.	Toluene	108-88-3	0.080	10		
		Acetophenone	96-86-2	0.010	9.7		
		Diphenylamine (difficult to distinguish from diphenylnitrosamine)	122-39-4	0.92	13		
		Diphenylnitrosamine (difficult to distinguish from diphenylamine)	86-30-6	0.92	13		
		Phenol	108-95-2	0.039	6.2		
		Chromium (Total)	7440-47-3	2.77	0.60 mg/l TCLP		
		Nickel	7440-02-0	3.98	11 mg/l TCLP		
K023	Distillation light ends from the production of phthalic anhydride from naphthalene.	Phthalic anhydride (measured as Phthalic acid or Terephthalic acid)	100-21-0	0.055	28		
		Phthalic anhydride (measured as Phthalic acid or Terephthalic acid)	85-44-9	0.055	28		
K024	Distillation bottoms from the production of phthalic anhydride from naphthalene.	Phthalic anhydride (measured as Phthalic acid or Terephthalic acid)	100-21-0	0.055	28		
		Phthalic anhydride (measured as Phthalic acid or Terephthalic acid)	85-44-9	0.055	28		
K025	Distillation bottoms from the production of nitrobenzene by the nitration of benzene.	NA	NA	LLEXT fb SSTRP fb CARBN; or CMBST	CMBST		
K026	Stripping still tails from the production of methyl ethyl pyridines.	NA	NA	CMBST	CMBST		
K027	Centrifuge and distillation residues from toluene diisocyanate production.	NA	NA	CARBN; or CMBST	CMBST		
K028	Spent catalyst from the hydrochlorinator reactor in the production of 1,1,1-trichloroethane.	1,1-Dichloroethane	75-34-3	0.059	6.0		
		trans-1,2-Dichloroethylene	156-60-5	0.054	30		
		Hexachlorobutadiene	87-68-3	0.055	5.6		
		Hexachloroethane	67-72-1	0.055	30		
		Pentachloroethane	76-01-7	NA	6.0		
		1,1,1,2-Tetrachloroethane	630-20-6	0.057	6.0		
		1,1,2,2-Tetrachloroethane	79-34-6	0.057	6.0		
		Tetrachloroethylene	127-18-4	0.056	6.0		
		1,1,1-Trichloroethane	71-55-6	0.054	6.0		
		1,1,2-Trichloroethane	79-00-5	0.054	6.0		
		Cadmium	7440-43-9	0.69	NA		

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WASTE CODE	Waste Description And Treatment/Regulatory Subcategory ¹ (11/99, 8/00, 6/04, 2/07) NOTE: fb means followed by	Regulated hazardous constituent NOTE: NA means not applicable		Waste waters	Non waste waters
		Common Name	CAS ² Number	Concentration ³ in mg/l; or Technology Code ⁴	Concentration ⁵ in mg/kg unless noted as mg/l TCLP or Technology Code ⁴
		Chromium (Total)	7440-47-3	2.77	0.60 mg/l TCLP
		Lead	7439-92-1	0.69	0.75 mg/l TCLP
		Nickel	7440-02-0	3.98	11 mg/l TCLP
K029	Waste from the product steam stripper in the production of 1,1,1-trichloroethane.	Chloroform	67-66-3	0.046	6.0
		1,2-Dichloroethane	107-06-2	0.21	6.0
		1,1-Dichloroethylene	75-35-4	0.025	6.0
		1,1,1-Trichloroethane	71-55-6	0.054	6.0
		Vinyl chloride	75-01-4	0.27	6.0
K030	Column bodies or heavy ends from the combined production of trichloroethylene and perchloroethylene.	o-Dichlorobenzene	95-50-1	0.088	NA
		p-Dichlorobenzene	106-46-7	0.090	NA
		Hexachlorobutadiene	87-68-3	0.055	5.6
		Hexachloroethane	67-72-1	0.055	30
		Hexachloropropylene	1888-71-7	NA	30
		Pentachlorobenzene	608-93-5	NA	10
		Pentachloroethane	76-01-7	NA	6.0
		1,2,4,5-Tetrachlorobenzene	95-94-3	0.055	14
		Tetrachloroethylene	127-18-4	0.056	6.0
		1,2,4-Trichlorobenzene	120-82-1	0.055	19
K031	By-product salts generated in the production of MSMA and cacodylic acid.	Arsenic	7440-38-2	1.4	5.0 mg/l TCLP
K032	Wastewater treatment sludge from the production of chlordane.	Hexachlorocyclopentadiene	77-47-4	0.057	2.4
		Chlordane (alpha and gamma isomers)	57-74-9	0.0033	0.26
		Heptachlor	76-44-8	0.0012	0.066
		Heptachlor epoxide	1024-57-3	0.016	0.066
K033	Wastewater and scrub water from the chlorination of cyclopentadiene in the production of chlordane.	Hexachlorocyclopentadiene	77-47-4	0.057	2.4
K034	Filter solids from the filtration of hexachlorocyclopentadiene in the production of chlordane.	Hexachlorocyclopentadiene	77-47-4	0.057	2.4
K035	Wastewater treatment sludges generated in the production of creosote.	Acenaphthene	83-32-9	NA	3.4
		Anthracene	120-12-7	NA	3.4
		Benz(a)anthracene	56-55-3	0.059	3.4
		Benzo(a)pyrene	50-32-8	0.061	3.4
		Chrysene	218-01-9	0.059	3.4
		o-Cresol	95-48-7	0.11	5.6
		m-Cresol(difficult to distinguish from p-cresol)	108-39-4	0.77	5.6
		p-Cresol(difficult to distinguish from m-cresol)	106-44-5	0.77	5.6
		Dibenz(a,h)anthracene	53-70-3	NA	8.2
		Fluoranthene	206-44-0	0.068	3.4
		Fluorene	86-73-7	NA	3.4
		Indeno(1,2,3-cd)pyrene	193-39-5	NA	3.4
		Naphthalene	91-20-3	0.059	5.6
		Phenanthrene	85-01-8	0.059	5.6
Phenol	108-95-2	0.039	6.2		
Pyrene	129-00-0	0.067	8.2		
K036	Still bottoms from toluene reclamation distillation in the production of disulfoton.	Disulfoton	298-04-4	0.017	6.2
K037	Wastewater treatment sludges from the production of disulfoton.	Disulfoton	298-04-4	0.017	6.2
		Toluene	108-88-3	0.080	10
K038	Wastewater from the washing and stripping of phorate production.	Phorate	298-02-2	0.021	4.6
K039	Filter cake from the filtration of diethylphosphorodithioic acid in the production of phorate.	NA	NA	CARBN; or CMBST	CMBST

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WASTE CODE	Waste Description And Treatment/Regulatory Subcategory ¹ (11/99, 8/00, 6/04, 2/07) NOTE: fb means followed by	Regulated hazardous constituent NOTE: NA means not applicable		Waste waters	Non waste waters
		Common Name	CAS ² Number	Concentration ³ in mg/l; or Technology Code ⁴	Concentration ⁵ in mg/kg unless noted as mg/l TCLP or Technology Code ⁴
K040	Wastewater treatment sludge from the production of phorate.	Phorate	298-02-2	0.021	4.6
K041	Wastewater treatment sludge from the production of toxaphene.	Toxaphene	8001-35-2	0.0095	2.6
K042	Heavy ends or distillation residues from the distillation of tetrachlorobenzene in the production of 2,4,5-T.	o-Dichlorobenzene	95-50-1	0.088	6.0
		p-Dichlorobenzene	106-46-7	0.090	6.0
		Pentachlorobenzene	608-93-5	0.055	10
		1,2,4,5-Tetrachlorobenzene	95-94-3	0.055	14
		1,2,4-Trichlorobenzene	120-82-1	0.055	19
K043	2,6-Dichlorophenol waste from the production of 2,4-D.	2,4-Dichlorophenol	120-83-2	0.044	14
		2,6-Dichlorophenol	187-65-0	0.044	14
		2,4,5-Trichlorophenol	95-95-4	0.18	7.4
		2,4,6-Trichlorophenol	88-06-2	0.035	7.4
		2,3,4,6-Tetrachlorophenol	58-90-2	0.030	7.4
		Pentachlorophenol	87-86-5	0.089	7.4
		Tetrachloroethylene	127-18-4	0.056	6.0
		HxCDDs (All Hexachlorodibenzo-p-dioxins)	NA	0.000063	0.001
		HxCDFs (All Hexachlorodibenzofurans)	NA	0.000063	0.001
		PeCDDs (All Pentachlorodibenzo-p-dioxins)	NA	0.000063	0.001
		PeCDFs (All Pentachlorodibenzofurans)	NA	0.000035	0.001
		TCDDs (All Tetrachlorodibenzo-p-dioxins)	NA	0.000063	0.001
		TCDFs (All Tetrachlorodibenzofurans)	NA	0.000063	0.001
		K044	Wastewater treatment sludges from the manufacturing and processing of explosives.	NA	NA
K045	Spent carbon from the treatment of wastewater containing explosives.	NA	NA	DEACT	DEACT
K046	Wastewater treatment sludges from the manufacturing, formulation and loading of lead-based initiating compounds.	Lead	7439-92-1	0.69	0.75 mg/l TCLP
K047	Pink/red water from TNT operations	NA	NA	DEACT	DEACT
K048	Dissolved air flotation (DAF) float from the petroleum refining industry.	Benzene	71-43-2	0.14	10
		Benzo(a)pyrene	50-32-8	0.061	3.4
		bis(2-Ethylhexyl) phthalate	117-81-7	0.28	28
		Chrysene	218-01-9	0.059	3.4
		Di-n-butyl phthalate	84-74-2	0.057	28
		Ethylbenzene	100-41-4	0.057	10
		Fluorene	86-73-7	0.059	NA
		Naphthalene	91-20-3	0.059	5.6
		Phenanthrene	85-01-8	0.059	5.6
		Phenol	108-95-2	0.039	6.2
		Pyrene	129-00-0	0.067	8.2
		Toluene	108-88-33	0.080	10
		Xylenes-mixed isomers(sum of o-, m-, and p-xylene concentrations)	1330-20-7	0.32	30
		Chromium (Total)	7440-47-3	2.77	0.60 mg/l TCLP
		Cyanides (Total) ⁷	57-12-5	1.2	590
		Lead	7439-92-1	0.69	NA
Nickel	7440-02-0	NA	11 mg/l TCLP		
K049	Slop oil emulsion solids from the petroleum refining industry.	Anthracene	120-12-7	0.059	3.4
		Benzene	71-43-2	0.14	10
		Benzo(a)pyrene	50-32-8	0.061	3.4
		bis(2-Ethylhexyl) phthalate	117-81-7	0.28	28

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WASTE CODE	Waste Description And Treatment/Regulatory Subcategory ¹ (11/99, 8/00, 6/04, 2/07) NOTE: fb means followed by	Regulated hazardous constituent NOTE: NA means not applicable		Waste waters	Non waste waters
		Common Name	CAS ² Number	Concentration ³ in mg/l; or Technology Code ⁴	Concentration ⁵ in mg/kg unless noted as mg/l TCLP or Technology Code ⁴
		Carbon disulfide	75-15-0	3.8	NA
		Chrysene	218-01-9	0.059	3.4
		2,4-Dimethylphenol	105-67-9	0.036	NA
		Ethylbenzene	100-41-4	0.057	10
		Naphthalene	91-20-3	0.059	5.6
		Phenanthrene	85-01-8	0.059	5.6
		Phenol	108-95-2	0.039	6.2
		Pyrene	129-00-0	0.067	8.2
		Toluene	108-88-3	0.080	10
		Xylenes-mixed isomers(sum of o-, m-, and p-xylene concentrations)	1330-20-7	0.32	30
		Cyanides (Total) ⁷	57-12-5	1.2	590
		Chromium (Total)	7440-47-3	2.77	0.60 mg/l TCLP
		Lead	7439-92-1	0.69	NA
		Nickel	7440-02-0	NA	11 mg/l TCLP
		K050	Heat exchanger bundle cleaning sludge from the petroleum refining industry.	Benzo(a)pyrene	50-32-8
Phenol	108-95-2			0.039	6.2
Cyanides (Total) ⁷	57-12-5			1.2	590
Chromium (Total)	7440-47-3			2.77	0.60 mg/l TCLP
Lead	7439-92-1			0.69	NA
Nickel	7440-02-0			NA	11 mg/l TCLP
K051	API separator sludge from the petroleum refining industry.	Acenaphthene	83-32-9	0.059	NA
		Anthracene	120-12-7	0.059	3.4
		Benz(a)anthracene	56-55-3	0.059	3.4
		Benzene	71-43-2	0.14	10
		Benzo(a)pyrene	50-32-8	0.061	3.4
		bis(2-Ethylhexyl) phthalate	117-81-7	0.28	28
		Chrysene	218-01-9	0.059	3.4
		Di-n-butyl phthalate	105-67-9	0.057	28
		Ethylbenzene	100-41-4	0.057	10
		Fluorene	86-73-7	0.059	NA
		Naphthalene	91-20-3	0.059	5.6
		Phenanthrene	85-01-8	0.059	5.6
		Phenol	108-95-2	0.039	6.2
		Pyrene	129-00-0	0.067	8.2
		Toluene	108-88-3	0.08	10
		Xylenes-mixed isomers(sum of o-, m-, and p-xylene concentrations)	1330-20-7	0.32	30
		Cyanides (Total) ⁷	57-12-5	1.2	590
		Chromium (Total)	7440-47-3	2.77	0.60 mg/l TCLP
		Lead	7439-92-1	0.69	NA
		Nickel	7440-02-0	NA	11 mg/l TCLP
K052	Tank bottoms (leaded) from the petroleum refining industry.	Benzene	71-43-2	0.14	10
		Benzo(a)pyrene	50-32-8	0.061	3.4
		o-Cresol	95-48-7	0.11	5.6
		m-Cresol(difficult to distinguish from p-cresol)	108-39-4	0.77	5.6
		p-Cresol(difficult to distinguish from m-cresol)	106-44-5	0.77	5.6
		2,4-Dimethylphenol	105-67-9	0.036	NA
		Ethylbenzene	100-41-4	0.057	10
		Naphthalene	91-20-3	0.059	5.6
		Phenanthrene	85-01-8	0.059	5.6
		Phenol	108-95-2	0.039	6.2
		Toluene	108-88-3	0.08	10

268.40 Table - Treatment Standards For Hazardous Waste							
WASTE CODE	Waste Description And Treatment/Regulatory Subcategory ¹ (11/99, 8/00, 6/04, 2/07) NOTE: fb means followed by	Regulated hazardous constituent NOTE: NA means not applicable		Waste waters	Non waste waters		
		Common Name	CAS ² Number	Concentration ³ in mg/l; or Technology Code ⁴	Concentration ⁵ in mg/kg unless noted as mg/l TCLP or Technology Code ⁴		
		Xylenes-mixed isomers(sum of o-, m-, and p-xylene concentrations)	1330-20-7	0.32	30		
		Chromium (Total)	7440-47-3	2.77	0.60 mg/l TCLP		
		Cyanides (Total) ⁷	57-12-5	1.2	590		
		Lead	7439-92-1	0.69	NA		
		Nickel	7440-02-0	NA	11 mg/l TCLP		
		K060	Ammonia still lime sludge from coking operations.	Benzene	71-43-2	0.14	10
				Benzo(a)pyrene	50-32-8	0.061	3.4
Naphthalene	91-20-3			0.059	5.6		
Phenol	108-95-2			0.039	6.2		
Cyanides (Total) ⁷	57-12-5			1.2	590		
K061	Emission control dust/sludge from the primary production of steel in electric furnaces.			Antimony	7440-36-0	NA	1.15 mg/l TCLP
		Arsenic	7440-38-2	NA	5.0 mg/l TCLP		
		Barium	7440-39-3	NA	21 mg/l TCLP		
		Beryllium	7440-41-7	NA	1.22 mg/l TCLP		
		Cadmium	7440-43-9	0.69	0.11 mg/l TCLP		
		Chromium (Total)	7440-47-3	2.77	0.60 mg/l TCLP		
		Lead	7439-92-1	0.69	0.75 mg/l TCLP		
		Mercury	7439-97-6	NA	0.025 mg/l TCLP		
		Nickel	7440-02-0	3.98	11 mg/l TCLP		
		Selenium	7782-49-2	NA	5.7 mg/l TCLP		
		Silver	7440-22-4	NA	0.14 mg/l TCLP		
		Thallium	7440-28-0	NA	0.20 mg/l TCLP		
		Zinc	7440-66-6	NA	4.3 mg/l TCLP		
K062	Spent pickle liquor generated by steel finishing operations of facilities within the iron and steel industry (SIC Codes 331 and 332).	Chromium (Total)	7440-47-3	2.77	0.60 mg/l TCLP		
		Lead	7439-92-1	0.69	0.75 mg/l TCLP		
		Nickel	7440-02-0	3.98	NA		
K069	Emission control dust/sludge from secondary lead smelting. - Calcium Sulfate (Low Lead) Subcategory	Cadmium	7440-43-9	0.69	0.11 mg/l TCLP		
		Lead	7439-92-1	0.69	0.75 mg/l TCLP		
	Emission control dust/sludge from secondary lead smelting. - Non-Calcium Sulfate (High Lead) Subcategory	NA	NA	NA	RLEAD		
K071	K071 (Brine purification muds from the mercury cell process in chlorine production, where separately prepurified brine is not used) nonwastewaters that are residues from RMERC.	Mercury	7439-97-6	NA	0.20 mg/l TCLP		
	K071 (Brine purification muds from the mercury cell process in chlorine production, where separately prepurified brine is not used.) nonwastewaters that are not residues from RMERC.	Mercury	7439-97-6	NA	0.025 mg/l TCLP		
	All K071 wastewaters.	Mercury	7439-97-6	0.15	NA		
K073	Chlorinated hydrocarbon waste from the purification step of the diaphragm cell process using graphite anodes in chlorine production.	Carbon tetrachloride	56-23-5	0.057	6.0		
		Chloroform	67-66-3	0.046	6.0		
		Hexachloroethane	67-72-1	0.055	30		
		Tetrachloroethylene	127-18-4	0.056	6.0		
		1,1,1-Trichloroethane	71-55-6	0.054	6.0		

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WASTE CODE	Waste Description And Treatment/Regulatory Subcategory ¹ (11/99, 8/00, 6/04, 2/07) NOTE: fb means followed by	Regulated hazardous constituent NOTE: NA means not applicable		Waste waters	Non waste waters
		Common Name	CAS ² Number	Concentration ³ in mg/l; or Technology Code ⁴	Concentration ⁵ in mg/kg unless noted as mg/l TCLP or Technology Code ⁴
K083	Distillation bottoms from aniline production.	Aniline	62-53-3	0.81	14
		Benzene	71-43-2	0.14	10
		Cyclohexanone	108-94-1	0.36	NA
		Diphenylamine (difficult to distinguish from diphenylnitrosamine)	122-39-4	0.92	13
		Diphenylnitrosamine (difficult to distinguish from diphenylamine)	86-30-6	0.92	13
		Nitrobenzene	98-95-3	0.068	14
		Phenol	108-95-2	0.039	6.2
		Nickel	7440-02-0	3.98	11 mg/l TCLP
K084	Wastewater treatment sludges generated during the production of veterinary pharmaceuticals from arsenic or organo-arsenic compounds.	Arsenic	7440-38-2	1.4	5.0 mg/l TCLP
K085	Distillation or fractionation column bottoms from the production of chlorobenzenes.	Benzene	71-43-2	0.14	10
		Chlorobenzene	108-90-7	0.057	6.0
		m-Dichlorobenzene	541-73-1	0.036	6.0
		o-Dichlorobenzene	95-50-1	0.088	6.0
		p-Dichlorobenzene	106-46-7	0.090	6.0
		Hexachlorobenzene	118-74-1	0.055	10
		Total PCBs(sum of all PCB isomers, or all Aroclors)	1336-36-3	0.10	10
		Pentachlorobenzene	608-93-5	0.055	10
		1,2,4,5-Tetrachlorobenzene	95-94-3	0.055	14
		1,2,4-Trichlorobenzene	120-82-1	0.055	19
K086	Solvent wastes and sludges, caustic washes and sludges, or water washes and sludges from cleaning tubs and equipment used in the formulation of ink from pigments, driers, soaps, and stabilizers containing chromium and lead.	Acetone	67-64-1	0.28	160
		Acetophenone	96-86-2	0.010	9.7
		bis(2-Ethylhexyl) phthalate	117-81-7	0.28	28
		n-Butyl alcohol	71-36-3	5.6	2.6
		Butylbenzyl phthalate	85-68-7	0.017	28
		Cyclohexanone	108-94-1	0.36	NA
		o-Dichlorobenzene	95-50-1	0.088	6.0
		Diethyl phthalate	84-66-2	0.20	28
		Dimethyl phthalate	131-11-3	0.047	28
		Di-n-butyl phthalate	84-74-2	0.057	28
		Di-n-octyl phthalate	117-84-0	0.017	28
		Ethyl acetate	141-78-6	0.34	33
		Ethylbenzene	100-41-4	0.057	10
		Methanol	67-56-1	5.6	NA
		Methyl ethyl ketone	78-93-3	0.28	36
		Methyl isobutyl ketone	108-10-1	0.14	33
		Methylene chloride	75-09-2	0.089	30
		Naphthalene	91-20-3	0.059	5.6
		Nitrobenzene	98-95-3	0.068	14
		Toluene	108-88-3	0.080	10
		1,1,1-Trichloroethane	71-55-6	0.054	6.0
		Trichloroethylene	79-01-6	0.054	6.0
		Xylenes-mixed isomers(sum of o-, m-, and p-xylene concentrations)	1330-20-7	0.32	30
		Chromium (Total)	7440-47-3	2.77	0.60 mg/l TCLP
		Cyanides (Total) ⁷	57-12-5	1.2	590
		Lead	7439-92-1	0.69	0.75 mg/l TCLP
K087	Decanter tank tar sludge from coking operations.	Acenaphthylene	208-96-8	0.059	3.4
		Benzene	71-43-2	0.14	10
		Chrysene	218-01-9	0.059	3.4
		Fluoranthene	206-44-0	0.068	3.4

268.40 Table - Treatment Standards For Hazardous Waste					
WASTE CODE	Waste Description And Treatment/Regulatory Subcategory ¹ (11/99, 8/00, 6/04, 2/07) NOTE: fb means followed by	Regulated hazardous constituent NOTE: NA means not applicable		Waste waters	Non waste waters
		Common Name	CAS ² Number	Concentration ³ in mg/l; or Technology Code ⁴	Concentration ⁵ in mg/kg unless noted as mg/l TCLP or Technology Code ⁴
		Indeno(1,2,3-cd)pyrene	193-39-5	0.0055	3.4
		Naphthalene	91-20-3	0.059	5.6
		Phenanthrene	85-01-8	0.059	5.6
		Toluene	108-88-3	0.080	10
		Xylenes-mixed isomers(sum of o-, m-, and p-xylene concentrations)	1330-20-7	0.32	30
		Lead	7439-92-1	0.69	0.75 mg/l TCLP
K088	Spent potliners from primary aluminum reduction.	Acenaphthalene	83-32-9	0.059	3.4
		Anthracene	120-12-7	0.059	3.4
		Benzo(a)anthracene	56-55-3	0.059	3.4
		Benzo(a)pyrene	50-32-8	0.061	3.4
		Benzo(b)fluoranthene	205-99-2	0.11	6.8
		Benzo(k)fluoranthene	207-08-9	0.11	6.8
		Benzo(g,h,i)perylene	191-24-2	0.0055	1.8
		Chrysene	218-01-9	0.059	3.4
		Dibenz(a,h)anthracene	53-70-3	0.055	8.2
		Fluoranthene	206-44-0	0.068	3.4
		Indeno(1,2,3,-cd)pyrene	193-39-5	0.0055	3.4
		Phenanthrene	85-01-8	0.059	5.6
		Pyrene	129-00-0	0.067	8.2
		Antimony	7440-36-0	1.9	1.15 mg/l TCLP
		Arsenic	7440-38-2	1.4	26.1 mg/kg
		Barium	7440-39-3	1.2	21 mg/l TCLP
		Beryllium	7440-41-7	0.82	1.22 mg/l TCLP
		Cadmium	7440-43-9	0.69	0.11 mg/l TCLP
		Chromium (Total)	7440-47-3	2.77	0.60 mg/l TCLP
		Lead	7439-92-1	0.69	0.75 mg/l TCLP
		Mercury	7439-97-6	0.15	0.025 mg/l TCLP
Nickel	7440-02-0	3.98	11 mg/l TCLP		
Selenium	7782-49-2	0.82	5.7 mg/l TCLP		
Silver	7440-22-4	0.43	0.14 mg/l TCLP		
		Cyanide (Total) ⁷	57-12-5	1.2	590
		Cyanide (Amenable) ⁷	57-12-5	0.86	30
		Fluoride	16984-48-8	35	NA
K093	Distillation light ends from the production of phthalic anhydride from ortho-xylene.	Phthalic anhydride (measured as Phthalic acid or Terephthalic acid)	100-21-0	0.055	28
		Phthalic anhydride (measured as Phthalic acid or Terephthalic acid)	85-44-9	0.055	28
K094	Distillation bottoms from the production of phthalic anhydride from ortho-xylene.	Phthalic anhydride (measured as Phthalic acid or Terephthalic acid)	100-21-0	0.055	28
		Phthalic anhydride (measured as Phthalic acid or Terephthalic acid)	85-44-9	0.055	28
K095	Distillation bottoms from the production of 1,1,1-trichloroethane.	Hexachloroethane	67-72-1	0.055	30
		Pentachloroethane	76-01-7	0.055	6.0
		1,1,1,2-Tetrachloroethane	630-20-6	0.057	6.0
		1,1,2,2-Tetrachloroethane	79-34-6	0.057	6.0
		Tetrachloroethylene	127-18-4	0.056	6.0
		1,1,2-Trichloroethane	79-00-5	0.054	6.0

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268.40 Table - Treatment Standards For Hazardous Waste					
WASTE CODE	Waste Description And Treatment/Regulatory Subcategory ¹ (11/99, 8/00, 6/04, 2/07) NOTE: fb means followed by	Regulated hazardous constituent NOTE: NA means not applicable		Waste waters	Non waste waters
		Common Name	CAS ² Number	Concentration ³ in mg/l; or Technology Code ⁴	Concentration ⁵ in mg/kg unless noted as mg/l TCLP or Technology Code ⁴
K096	Heavy ends from the heavy ends column from the production of 1,1,1-trichloroethane.	Trichloroethylene	79-01-6	0.054	6.0
		m-Dichlorobenzene	541-73-1	0.036	6.0
		Pentachloroethane	76-01-7	0.055	6.0
		1,1,1,2-Tetrachloroethane	630-20-6	0.057	6.0
		1,1,2,2-Tetrachloroethane	79-34-6	0.057	6.0
		Tetrachloroethylene	127-18-4	0.056	6.0
		1,2,4-Trichlorobenzene	120-82-1	0.055	19
		1,1,2-Trichloroethane	79-00-5	0.054	6.0
K097	Vacuum stripper discharge from the chlordane chlorinator in the production of chlordane.	Trichloroethylene	79-01-6	0.054	6.0
		Chlordane (alpha and gamma isomers)	57-74-9	0.0033	0.26
		Heptachlor	76-44-8	0.0012	0.066
		Heptachlor epoxide	1024-57-3	0.016	0.066
K098	Untreated process wastewater from the production of toxaphene.	Hexachlorocyclopentadiene	77-47-4	0.057	2.4
		Toxaphene	8001-35-2	0.0095	2.6
K099	Untreated wastewater from the production of 2,4-D.	2,4-Dichlorophenoxyacetic acid	94-75-7	0.72	10
		HxCDDs (All Hexachlorodibenzo-p-dioxins)	NA	0.000063	0.001
		HxCDFs (All Hexachlorodibenzofurans)	NA	0.000063	0.001
		PeCDDs (All Pentachlorodibenzo-p-dioxins)	NA	0.000063	0.001
		PeCDFs (All Pentachlorodibenzofurans)	NA	0.000035	0.001
		TCDDs (All Tetrachlorodibenzo-p-dioxins)	NA	0.000063	0.001
		TCDFs (All Tetrachlorodibenzofurans)	NA	0.000063	0.001
		K100	Waste leaching solution from acid leaching of emission control dust/sludge from secondary lead smelting.	Cadmium	7440-43-9
Chromium (Total)	7440-47-3			2.77	0.60 mg/l TCLP
Lead	7439-92-1			0.69	0.75 mg/l TCLP
K101	Distillation tar residues from the distillation of aniline-based compounds in the production of veterinary pharmaceuticals from arsenic or organo-arsenic compounds.	o-Nitroaniline	88-74-4	0.27	14
		Arsenic	7440-38-2	1.4	5.0 mg/l TCLP
		Cadmium	7440-43-9	0.69	NA
		Lead	7439-92-1	0.69	NA
		Mercury	7439-97-6	0.15	NA
K102	Residue from the use of activated carbon for decolorization in the production of veterinary pharmaceuticals from arsenic or organo-arsenic compounds.	o-Nitrophenol	88-75-5	0.028	13
		Arsenic	7440-38-2	1.4	5.0 mg/l TCLP
		Cadmium	7440-43-9	0.69	NA
		Lead	7439-92-1	0.69	NA
		Mercury	7439-97-6	0.15	NA
K103	Process residues from aniline extraction from the production of aniline.	Aniline	62-53-3	0.81	14
		Benzene	71-43-2	0.14	10
		2,4-Dinitrophenol	51-28-5	0.12	160
		Nitrobenzene	98-95-3	0.068	14
		Phenol	108-95-2	0.039	6.2
K104	Combined wastewater streams generated from nitrobenzene/ aniline production.	Aniline	62-53-3	0.81	14
		Benzene	71-43-2	0.14	10
		2,4-Dinitrophenol	51-28-5	0.12	160
		Nitrobenzene	98-95-3	0.068	14
		Phenol	108-95-2	0.039	6.2
		Cyanides (Total) ⁷	57-12-5	1.2	590
K105	Separated aqueous stream from the reactor product washing step in the production of chlorobenzenes.	Benzene	71-43-2	0.14	10
		Chlorobenzene	108-90-7	0.057	6.0
		2-Chlorophenol	95-57-8	0.044	5.7

268.40 Table - Treatment Standards For Hazardous Waste					
WASTE CODE	Waste Description And Treatment/Regulatory Subcategory ¹ (11/99, 8/00, 6/04, 2/07) NOTE: fb means followed by	Regulated hazardous constituent NOTE: NA means not applicable		Waste waters	Non waste waters
		Common Name	CAS ² Number	Concentration ³ in mg/l; or Technology Code ⁴	Concentration ⁵ in mg/kg unless noted as mg/l TCLP or Technology Code ⁴
		o-Dichlorobenzene	95-50-1	0.088	6.0
		p-Dichlorobenzene	106-46-7	0.090	6.0
		Phenol	108-95-2	0.039	6.2
		2,4,5-Trichlorophenol	95-95-4	0.18	7.4
		2,4,6-Trichlorophenol	88-06-2	0.035	7.4
K106	K106 (wastewater treatment sludge from the mercury cell process in chlorine production) nonwastewaters that contain greater than or equal to 260 mg/kg total mercury.	Mercury	7439-97-6	NA	RMERC
	K106 (wastewater treatment sludge from the mercury cell process in chlorine production) nonwastewaters that contain less than 260 mg/kg total mercury that are residues from RMERC.	Mercury	7439-97-6	NA	0.20 mg/l TCLP
	Other K106 nonwastewaters that contain less than 260 mg/kg total mercury and are not residues from RMERC.	Mercury	7439-97-6	NA	0.025 mg/l TCLP
	All K106 wastewaters.	Mercury	7439-97-6	0.15	NA
K107	Column bottoms from product separation from the production of 1,1-dimethylhydrazine (UDMH) from carboxylic acid hydrazides.	NA	NA	CMBST; or CHOXD fb CARBN; or BIODG fb CARBN	CMBST
K108	Condensed column overheads from product separation and condensed reactor vent gases from the production of 1,1-dimethylhydrazine (UDMH) from carboxylic acid hydrazides.	NA	NA	CMBST; or CHOXD fb CARBN; or BIODG fb CARBN	CMBST
K109	Spent filter cartridges from product purification from the production of 1,1-dimethylhydrazine (UDMH) from carboxylic acid hydrazides.	NA	NA	CMBST; or CHOXD fb CARBN; or BIODG fb CARBN	CMBST
K110	Condensed column overheads from intermediate separation from the production of 1,1-dimethylhydrazine (UDMH) from carboxylic acid hydrazides.	NA	NA	CMBST; or CHOXD fb CARBN; or BIODG fb CARBN	CMBST
K111	Product washwaters from the production of dinitrotoluene via nitration of toluene	2,4-Dinitrotoluene	121-14-2	0.32	140
		2,6-Dinitrotoluene	606-20-2	0.55	28
K112	Reaction by-product water from the drying column in the production of toluenediamine via hydrogenation of dinitrotoluene.	NA	NA	CMBST; or CHOXD fb CARBN; or BIODG fb CARBN	CMBST
K113	Condensed liquid light ends from the purification of toluenediamine in the production of toluenediamine via hydrogenation of dinitrotoluene.	NA	NA	CARBAN; OR CMBST	CMBST
K114	Vicinals from the purification of toluenediamine in the production of toluenediamine via hydrogenation of dinitrotoluene.	NA	NA	CARBAN; or CMBST	CMBST
K115	Heavy ends from the purification of toluenediamine in the production of toluenediamine via hydrogenation of dinitrotoluene.	Nickel	7440-02-0	3.98	11 mg/l TCLP
		NA	NA	CARBAN; or CMBST	CMBST
K116	Organic condensate from the solvent recovery column in the production of toluene diisocyanate via phosgenation of toluenediamine.	NA	NA	CARBAN; or CMBST	CMBST
K117	Wastewater from the reactor vent gas scrubber in the production of ethylene dibromide via bromination of ethene.	Methyl bromide (Bromomethane)	74-83-9	0.11	15
		Chloroform	67-66-3	0.046	6.0

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WASTE CODE	Waste Description And Treatment/Regulatory Subcategory ¹ (11/99, 8/00, 6/04, 2/07) NOTE: fb means followed by	Regulated hazardous constituent NOTE: NA means not applicable		Waste waters	Non waste waters
		Common Name	CAS ² Number	Concentration ³ in mg/l; or Technology Code ⁴	Concentration ⁵ in mg/kg unless noted as mg/l TCLP or Technology Code ⁴
		Ethylene dibromide (1,2-Dibromoethane)	106-93-4	0.028	15
K118	Spent absorbent solids from purification of ethylene dibromide in the production of ethylene dibromide via bromination of ethene.	Methyl bromide (Bromomethane)	74-83-9	0.11	15
		Chloroform	67-66-3	0.046	6.0
		Ethylene dibromide (1,2-Dibromoethane)	106-93-4	0.028	15
K123	Process wastewater (including supernates, filtrates, and washwaters) from the production of ethylenebisdithiocarbamic acid and its salts.	NA	NA	CMBST; or CHOXD fb (BIODG or CARBN)	CMBST
K124	Reactor vent scrubber water from the production of ethylenebisdithiocarbamic acid and its salts.	NA	NA	CMBST; or CHOXD fb (BIODG or CARBN)	CMBST
K125	Filtration, evaporation, and centrifugation solids from the production of ethylenebisdithiocarbamic acid and its salts.	NA	NA	CMBST; or CHOXD fb (BIODG or CARBN)	CMBST
K126	Baghouse dust and floor sweepings in milling and packaging operations from the production or formulation of ethylenebisdithiocarbamic acid and its salts.	NA	NA	CMBST; or CHOXD fb (BIODG or CARBN)	CMBST
K131	Wastewater from the reactor and spent sulfuric acid from the acid dryer from the production of methyl bromide.	Methyl bromide (Bromomethane)	74-83-9	0.11	15
K132	Spent absorbent and wastewater separator solids from the production of methyl bromide.	Methyl bromide (Bromomethane)	74-83-9	0.11	15
K136	Still bottoms from the purification of ethylene dibromide in the production of ethylene dibromide via bromination of ethene.	Methyl bromide (Bromomethane)	74-83-9	0.11	15
		Chloroform	67-66-3	0.046	6.0
		Ethylene dibromide (1,2-Dibromoethane)	106-93-4	0.028	15
K141	Process residues from the recovery of coal tar, including, but not limited to, collecting sump residues from the production of coke or the recovery of coke by-products produced from coal. This listing does not include K087 (decanter tank tar sludge from coking operations).	Benzene	71-43-2	0.14	10
		Benz(a)anthracene	56-55-3	0.059	3.4
		Benzo(a)pyrene	50-2-8	0.061	3.4
		Benzo(b)fluoranthene (difficult to distinguish from benzo(k)fluoranthene)	205-99-2	0.11	6.8
		Benzo(k)fluoranthene (difficult to distinguish from benzo(b)fluoranthene)	207-08-9	0.11	6.8
		Chrysene	218-01-9	0.059	3.4
		Dibenz(a,h)anthracene	53-70-3	0.055	8.2
		Indeno(1,2,3-cd)pyrene	193-39-5	0.0055	3.4
K142	Tar storage tank residues from the production of coke from coal or from the recovery of coke by-products produced from coal.	Benzene	71-43-2	0.14	10
		Benz(a)anthracene	56-55-3	0.059	3.4
		Benzo(a)pyrene	50-32-8	0.061	3.4
		Benzo(b)fluoranthene (difficult to distinguish from benzo(k))	205-99-2	0.11	6.8
		Benzo(k)fluoranthene (difficult to distinguish from benzo(b)fluoranthene)	207-08-9	0.11	6.8
		Chrysene	218-01-9	0.059	3.4
		Dibenz(a,h)anthracene	53-70-3	0.055	8.2
		Indeno(1,2,3-cd)pyrene	193-39-5	0.0055	3.4
K143	Process residues from the recovery of light oil, including, but not limited to, those generated in stills, decanters, and wash oil recovery units from	Benzene	71-43-2	0.14	10
		Benz(a)anthracene	56-55-3	0.059	3.4
		Benzo(a)pyrene	50-32-8	0.061	3.4

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WASTE CODE	Waste Description And Treatment/Regulatory Subcategory ¹ (11/99, 8/00, 6/04, 2/07) NOTE: fb means followed by	Regulated hazardous constituent NOTE: NA means not applicable		Waste waters	Non waste waters
		Common Name	CAS ² Number	Concentration ³ in mg/l; or Technology Code ⁴	Concentration ⁵ in mg/kg unless noted as mg/l TCLP or Technology Code ⁴
	the recovery of coke by-products produced from coal.	Benzo(b)fluoranthene (difficult to distinguish from benzo(k)fluoranthene)	205-99-2	0.11	6.8
		Benzo(k)fluoranthene (difficult to distinguish from benzo(b)fluoranthene)	207-08-9	0.11	6.8
		Chrysene	218-01-9	0.059	3.4
K144	Wastewater sump residues from light oil refining, including, but not limited to, intercepting or contamination sump sludges from the recovery of coke by-products produced from coal.	Benzene	71-43-2	0.14	10
		Benz(a)anthracene	56-55-3	0.059	3.4
		Benzo(a)pyrene	50-32-8	0.061	3.4
		Benzo(b)fluoranthene (difficult to distinguish from benzo(k)fluoranthene)	205-99-2	0.11	6.8
		Benzo(k)fluoranthene (difficult to distinguish from benzo(b)fluoranthene)	207-08-9	0.11	6.8
		Chrysene	218-01-9	0.059	3.4
		Dibenz(a,h)anthracene	53-70-3	0.055	8.2
K145	Residues from naphthalene collection and recovery operations from the recovery of coke by-products produced from coal.	Benzene	71-43-2	0.14	10
		Benz(a)anthracene	56-55-3	0.059	3.4
		Benzo(a)pyrene	50-32-8	0.061	3.4
		Chrysene	218-01-9	0.059	3.4
		Dibenz(a,h)anthracene	53-70-3	0.055	8.2
		Naphthalene	91-20-3	0.059	5.6
K147	Tar storage tank residues from coal tar refining.	Benzene	71-43-2	0.14	10
		Benz(a)anthracene	56-55-3	0.059	3.4
		Benzo(a)pyrene	50-32-8	0.061	3.4
		Benzo(b)fluoranthene (difficult to distinguish from benzo(k)fluoranthene)	205-99-2	0.11	6.8
		Benzo(k)fluoranthene (difficult to distinguish from benzo(b)fluoranthene)	207-08-9	0.11	6.8
		Chrysene	218-01-9	0.059	3.4
		Dibenz(a,h)anthracene	53-70-3	0.055	8.2
		Indeno(1,2,3-cd)pyrene	193-39-5	0.0055	3.4
K148	Residues from coal tar distillation, including, but not limited to, still bottoms.	Benz(a)anthracene	56-55-3	0.059	3.4
		Benzo(a)pyrene	50-32-8	0.061	3.4
		Benzo(b)fluoranthene (difficult to distinguish from benzo(k)fluoranthene)	205-99-2	0.11	6.8
		Benzo(k)fluoranthene (difficult to distinguish from benzo(b)fluoranthene)	207-08-9	0.11	6.8
		Chrysene	218-01-9	0.059	3.4
		Dibenz(a,h)anthracene	53-70-3	0.055	8.2
		Indeno(1,2,3-cd)pyrene	193-39-5	0.0055	3.4
K149	Distillation bottoms from the production of alpha- (or methyl-) chlorinated toluenes, ring-chlorinated toluenes, benzoyl chlorides, and compounds with mixtures of these functional groups. (This waste does not include still bottoms from the distillations of benzyl chloride.)	Chlorobenzene	108-90-7	0.057	6.0
		Chloroform	67-66-3	0.046	6.0
		Chloromethane	74-87-3	0.19	30
		p-Dichlorobenzene	106-46-7	0.090	6.0
		Hexachlorobenzene	118-74-1	0.055	10
		Pentachlorobenzene	608-93-5	0.055	10
		1,2,4,5-Tetrachlorobenzene	95-94-3	0.055	14
		Toluene	108-88-3	0.080	10
K150	Organic residuals, excluding spent carbon adsorbent, from the spent chlorine gas and hydrochloric acid recovery processes associated with the production of alpha- (or methyl-) chlorinated toluenes, ring-chlorinated toluenes,	Carbon tetrachloride	56-23-5	0.057	6.0
		Chloroform	67-66-3	0.046	6.0
		Chloromethane	74-87-3	0.19	30
		p-Dichlorobenzene	106-46-7	0.090	6.0
		Hexachlorobenzene	118-74-1	0.055	10

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WASTE CODE	Waste Description And Treatment/Regulatory Subcategory ¹ (11/99, 8/00, 6/04, 2/07) NOTE: fb means followed by	Regulated hazardous constituent NOTE: NA means not applicable		Waste waters	Non waste waters
		Common Name	CAS ² Number	Concentration ³ in mg/l; or Technology Code ⁴	Concentration ⁵ in mg/kg unless noted as mg/l TCLP or Technology Code ⁴
	benzoyl chlorides, and compounds with mixtures of these functional groups.	Pentachlorobenzene	608-93-5	0.055	10
		1,2,4,5-Tetrachlorobenzene	95-94-3	0.055	14
		1,1,2,2-Tetrachloroethane	79-34-5	0.057	6.0
		Tetrachloroethylene	127-18-4	0.056	6.0
		1,2,4-Trichlorobenzene	120-82-1	0.055	19
K151	Wastewater treatment sludges, excluding neutralization and biological sludges, generated during the treatment of wastewaters from the production of alpha- (or methyl-) chlorinated toluenes, ring-chlorinated toluenes, benzoyl chlorides, and compounds with mixtures of these functional groups.	Benzene	71-43-2	0.14	10
		Carbon tetrachloride	56-23-5	0.057	6.0
		Chloroform	67-66-3	0.046	6.0
		Hexachlorobenzene	118-74-1	0.055	10
		Pentachlorobenzene	608-93-5	0.055	10
		1,2,4,5-Tetrachlorobenzene	95-94-3	0.055	14
		Tetrachloroethylene	127-18-4	0.056	6.0
		Toluene	108-88-3	0.080	10
K156	Organic waste (including heavy ends, still bottoms, light ends, spent solvents, filtrates, and decantates) from the production of carbamates and carbamoyl oximes.	Acetonitrile	75-05-8	5.6	1.8
		Acetophenone	98-86-2	0.010	9.7
		Aniline	62-53-3	0.81	14
		Benomyl ¹⁰	17804-35-2	0.056; or CMBST, CHOXD, BIODG or CARBN	1.4; or CMBST
		Benzene	71-43-2	0.14	10
		Carbaryl ¹⁰	63-25-2	0.006; or CMBST, CHOXD, BIODG or CARBN	0.14; or CMBST
		Carbenzadim ¹⁰	10605-21-7	0.056; or CMBST, CHOXD, BIODG or CARBN	1.4; or CMBST
		Carbofuran ¹⁰	1563-66-2	0.006; or CMBST, CHOXD, BIODG or CARBN	0.14; or CMBST
		Carbosulfan ¹⁰	55285-14-8	0.028; or CMBST, CHOXD, BIODG or CARBN	1.4; or CMBST
		Chlorobenzene	108-90-7	0.057	6.0
		Chloroform	67-66-3	0.046	6.0
		o-Dichlorobenzene	95-50-1	0.088	6.0
		Methomyl ¹⁰	16752-77-5	0.028; or CMBST, CHOXD, BIODG or CARBN	0.14; or CMBST
		Methylene chloride	75-09-2	0.089	30
		Methyl ethyl ketone	78-93-3	0.28	36
		Naphthalene	91-20-3	0.059	5.6
		Phenol	108-95-2	0.039	6.2
Pyridine	110-86-1	0.014	16		
Toluene	108-88-3	0.080	10		
Triethylamine	121-44-8	0.081; or CMBST, CHOXD, BIODG or CARBN	1.5; or CMBST		

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WASTE CODE	Waste Description And Treatment/Regulatory Subcategory ¹ (11/99, 8/00, 6/04, 2/07) NOTE: fb means followed by	Regulated hazardous constituent NOTE: NA means not applicable		Waste waters	Non waste waters
		Common Name	CAS ² Number	Concentration ³ in mg/l; or Technology Code ⁴	Concentration ⁵ in mg/kg unless noted as mg/l TCLP or Technology Code ⁴
K157	Wastewaters (including scrubber waters, condenser waters, washwaters, and separation waters) from the production of carbamates and carbamoyl oximes.	Carbon tetrachloride	56-23-5	0.057	6.0
		Chloroform	67-66-3	0.046	6.0
		Chloromethane	74-87-3	0.19	30
		Methomyl ¹⁰	16752-77-5	0.028; or CMBST, CHOXD, BIODG or CARBN	0.14; or CMBST
		Methylene chloride	75-09-2	0.089	30
		Methyl ethyl ketone	78-93-3	0.28	36
		Pyridine	110-86-1	0.014	16
K158	Bag house dusts and filter/separation solids from the production of carbamates and carbamoyl oximes.	Triethylamine	121-44-8	0.081; or CMBST, CHOXD, BIODG or CARBN	1.5; or CMBST
		Benzene	71-43-2	0.14	10
		Carbenzadim ¹⁰	10605-21-7	0.056; or CMBST, CHOXD, BIODG or CARBN	1.4; or CMBST
		Carbofuran ¹⁰	1563-66-2	0.006; or CMBST, CHOXD, BIODG or CARBN	0.14; or CMBST
		Carbosulfan ¹⁰	55285-14-8	0.028; or CMBST, CHOXD, BIODG or CARBN	1.4; or CMBST
		Chloroform	67-66-3	0.046	6.0
		Methylene chloride	75-09-2	0.089	30
K159	Organics from the treatment of thiocarbamate wastes.	Phenol	108-95-2	0.039	6.2
		Benzene	71-43-2	0.14	10
		Butylate ¹⁰	2008-41-5	0.042; or CMBST, CHOXD, BIODG or CARBN	1.4; or CMBST
		EPTC (Eptam) ¹⁰	759-94-4	0.042; or CMBST, CHOXD, BIODG or CARBN	1.4; or CMBST
		Molinate ¹⁰	2212-67-1	0.042; or CMBST, CHOXD, BIODG or CARBN	1.4; or CMBST
		Pebulate ¹⁰	1114-71-2	0.042; or CMBST, CHOXD, BIODG or CARBN	1.4; or CMBST
		Vernolate ¹⁰	1929-77-7	0.042; or CMBST, CHOXD, BIODG or CARBN	1.4; or CMBST

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WASTE CODE	Waste Description And Treatment/Regulatory Subcategory ¹ (11/99, 8/00, 6/04, 2/07) NOTE: fb means followed by	Regulated hazardous constituent NOTE: NA means not applicable		Waste waters	Non waste waters
		Common Name	CAS ² Number	Concentration ³ in mg/l; or Technology Code ⁴	Concentration ⁵ in mg/kg unless noted as mg/l TCLP or Technology Code ⁴
K161	Purification solids (including filtration, evaporation, and centrifugation solids), baghouse dust and floor sweepings from the production of dithiocarbamate acids and their salts.	Antimony	7440-36-0	1.9	1.15 mg/l TCLP
		Arsenic	7440-38-2	1.4	5.0 mg/l TCLP
		Carbon disulfide	75-15-0	3.8	4.8 mg/l TCLP
		Dithiocarbamates (total) ¹⁰	NA	0.028; or CMBST, CHOXD, BIODG or CARBN	28; or CMBST
		Lead	7439-92-1	0.69	0.75 mg/l TCLP
		Nickel	7440-02-0	3.98	11.0 mg/l TCLP
K169	Crude oil tank sediment from petroleum refining operations. (8/00)	Selenium	7782-49-2	0.82	5.7 mg/l TCLP
		Benz(a)anthracene	56-55-3	0.059	3.4
		Benzene	71-43-2	0.14	10.
		Benzo(g,h,i)perylene	191-24-2	0.0055	1.8
		Chrysene	218-01-9	0.059	3.4
		Ethyl benzene	100-41-4	0.057	10.
		Fluorene	86-73-7	0.059	3.4
		Naphthalene	91-20-3	0.059	5.6
		Phenanthrene	81-05-8	0.059	5.6
		Pyrene	129-00-0	0.067	8.2
		Toluene (Methyl Benzene)	108-88-3	0.080	10.
K170	Clarified slurry oil sediment from petroleum refining operations. (8/00)	Xylene(s) (Total)	1330-20-7	0.32	30.
		Benz(a)anthracene	56-55-3	0.059	3.4
		Benzene	71-43-2	0.14	10.
		Benzo(g,h,i)perylene	191-24-2	0.0055	1.8
		Chrysene	218-01-9	0.059	3.4
		Dibenz(a,h)anthracene	53-70-3	0.055	8.2
		Ethyl benzene	100-41-4	0.057	10.
		Fluorene	86-73-7	0.059	3.4
		Indeno(1,2,3,-cd)pyrene	193-39-5	0.0055	3.4
		Naphthalene	91-20-3	0.059	5.6
		Phenanthrene	81-05-8	0.059	5.6
K171	Spent hydrotreating catalyst from petroleum refining operations, including guard beds used to desulfurize feeds to other catalytic reactors (this listing does not include inert support media.) (8/00)	Pyrene	129-00-0	0.067	8.2
		Toluene (Methyl Benzene)	108-88-3	0.080	10.
		Xylene(s) (Total)	1330-20-7	0.32	30.
		Arsenic	7740-38-2	1.4	5. mg/L TCLP
		Nickel	7440-02-0	3.98	11.0 mg/L TCLP
		Vanadium	7440-62-2	4.3	1.6 mg/L TCLP
		Reactive sulfides	NA	DEACT	DEACT
		Pyrene	129-00-0	0.067	8.2
		Phenanthrene	81-05-8	0.059	5.6
		Naphthalene	91-20-3	0.059	5.6
		Ethyl benzene	100-41-4	0.057	10.
		Chrysene	218-01-9	0.059	3.4
		Benzene	71-43-2	0.14	10.
		Benz(a)anthracene	56-55-3	0.059	3.4
K172	Spent hydrorefining catalyst from petroleum refining operations, including guard beds used to desulfurize feeds to other catalytic reactors (this listing does not include inert support media.)	Arsenic	7740-38-2	1.4	5. mg/L TCLP
		Antimony	7740-36-0	1.9	1.15 mg/L TCLP
		Xylene(s) (Total)	1330-20-7	0.32	30.
		Toluene (Methyl Benzene)	108-88-3	0.080	10.
		Ethyl benzene	100-41-4	0.057	10.
		Benzene	71-43-2	0.14	10.

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WASTE CODE	Waste Description And Treatment/Regulatory Subcategory ¹ (11/99, 8/00, 6/04, 2/07) NOTE: fb means followed by	Regulated hazardous constituent NOTE: NA means not applicable		Waste waters	Non waste waters
		Common Name	CAS ² Number	Concentration ³ in mg/l; or Technology Code ⁴	Concentration ⁵ in mg/kg unless noted as mg/l TCLP or Technology Code ⁴
		Nickel	7440-02-0	3.98	11.0 mg/L TCLP
		Vanadium	7440-62-2	4.3	1.6 mg/L TCLP
		Reactive Sulfides	NA	DEACT	DEACT
K174	Wastewater treatment sludges from the production of ethylene dichloride or vinyl chloride monomer (6/02)	1, 2, 3, 4, 6, 7, 8-Heptachlorodibenzo-p-dioxin (1, 2, 3, 4, 6, 7, 8 HpCDD)	35822-46-9	0.000035 or CMBST ¹¹	0.0025 or CMBST ¹¹
		1,2,3,4,6,7,8-Heptachlorodibenzofuran (1,2,3,4,6,7,8-HpCDF)	67562-39-4	0.000035 or CMBST ¹¹	0.0025 or CMBST ¹¹
		1,2,3,4,7,8,9-Heptachlorodibenzofuran (1,2,3,4,7,8,9-HpCDF)	55673-89-7	0.000035 or CMBST ¹¹	0.0025 or CMBST ¹¹
		HxCDDs (All Hexachlorodibenzo-p-dioxins)	34465-46-8	0.000063 or CMBST ¹¹	0.001 or CMBST ¹¹
		HxCDFs (All Hexachlorodibenzofurans)	55684-94-1	0.000063 or CMBST ¹¹	0.001 or CMBST ¹¹
		1,2,3,4,6,7,8,9-Octachlorodibenzo-p-dioxin (OCDD)	3268-87-9	0.000063 or CMBST ¹¹	0.005 or CMBST ¹¹
		1,2,3,4,6,7,8,9-Octachlorodibenzofuran (OCDF)	39001-02-0	0.000063 or CMBST ¹¹	0.005 or CMBST ¹¹
		PeCDDs (All Pentachlorodibenzo-p-dioxins)	36088-22-9	0.000063 or CMBST ¹¹	0.001 or CMBST ¹¹
		PeCDFs (All Pentachlorodibenzofurans)	30402-15-4	0.000035 or CMBST ¹¹	0.001 or CMBST ¹¹
		TCDDs (All tetrachlorodibenzo-p-dioxins)	41903-57-5	0.000063 or CMBST ¹¹	0.001 or CMBST ¹¹
		TCDFs (All tetrachlorodibenzofurans)	7440-36-0	1.4	5.0mg/L TCLP
K175	Wastewater treatment sludge from the production of vinyl chloride monomer using mercuric chloride catalyst in an acetylene-based process.(6/02)	Mercury ¹²	7438-97-6	NA	0.025 mg/L TCLP
		pH ¹²		NA pH<6.0	
	All K175 wastewaters	Mercury	7438-97-6	0.15	NA
K176	Baghouse filters from the production of antimony oxide, including filters from the production of intermediates (e.g., antimony metal or crude antimony oxide). (6/03)	Antimony	7440-36-0	1.9	1.15 mg/L TCLP
		Arsenic	7440-38-2	1.4	5.0 mg/L TCLP
		Cadmium	7440-43-9	0.69	0.11 mg/L TCLP
		Lead	7439-92-1	0.69	0.75 mg/L TCLP
		Mercury	7439-97-6	0.15	0.025 mg/L TCLP
K177	Slag from the production of antimony oxide that is speculatively accumulated or disposed, including slag from the production of intermediates (e.g., antimony metal or crude antimony oxide). (6/03)	Antimony	7440-36-0	1.9	1.15 mg/L TCLP
		Arsenic	7440-38-2	1.4	5.0 mg/L TCLP
		Lead	7439-92-1	0.69	0.75 mg/L TCLP

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		Common Name	CAS ² Number	Concentration ³ in mg/l; or Technology Code ⁴	Concentration ⁵ in mg/kg unless noted as mg/l TCLP or Technology Code ⁴
K178	Residues from manufacturing and manufacturing-site storage of ferric chloride from acids formed during the production of titanium dioxide using the chloride-ilmenite process. (6/03)	1,2,3,4,6,7,8-Heptachlorodibenzo- <i>p</i> -dioxin (1,2,3,4,6,7,8-HpCDD)	35822-39-4	0.000035 or CMBST ¹¹	0.0025 or CMBST ¹¹
		1,2,3,4,6,7,8-Heptachlorodibenzofuran (1,2,3,4,6,7,8-HpCDF)	67562-39-4	0.000035 or CMBST ¹¹	0.0025 or CMBST ¹¹
		1,2,3,4,7,8,9-Heptachlorodibenzofuran (1,2,3,4,7,8,9-HpCDF)	55673-89-7	0.000035 or CMBST ¹¹	0.0025 or CMBST ¹¹
		HxCDDs (All Hexachlorodibenzo- <i>p</i> -dioxins)	34465-46-8	0.000063 or CMBST ¹¹	0.001 or CMBST ¹¹
		HxCDFs (All Hexachlorodibenzofurans)	55684-94-1	0.000063 or CMBST ¹¹	0.001 or CMBST ¹¹
		1,2,3,4,6,7,8,9-Octachlorodibenzo- <i>p</i> -dioxin (OCDD)	3268-87-9	0.000063 or CMBST ¹¹	0.005 or CMBST ¹¹
		1,2,3,4,6,7,8,9-Octachlorodibenzofuran (OCDF)	39001-02-0	0.000063 or CMBST ¹¹	0.005 or CMBST ¹¹
		PeCDDs (All Pentachlorodibenzo- <i>p</i> -dioxins)	36088-22-9	0.000063 or CMBST ¹¹	0.001 or CMBST ¹¹
		PeCDFs (All Pentachlorodibenzofurans)	30402-15-4	0.000035 or CMBST ¹¹	0.001 or CMBST ¹¹
		TCDDs (All tetrachlorodibenzo- <i>p</i> -dioxins)	41903-57-5	0.000063 or CMBST ¹¹	0.001 or CMBST ¹¹
		TCDFs (All tetrachlorodibenzofurans)	55722-27-5	0.000063 or CMBST ¹¹	0.001 or CMBST ¹¹
			Thallium	7440-28-0	1.4
K181	Nonwastewaters from the production of dyes and/or pigments (including nonwastewaters commingled at the point of generation with nonwastewaters from other processes) that, at the point of generation, contain mass loadings of any of the constituents identified in paragraph (c) of section 261.32 that are equal to or greater than the corresponding paragraph (c) levels, as determined on a calendar year basis.	Aniline	62-53-3	0.81	14
		o-Anisidine (2-methoxyaniline)	90-04-0	0.010	0.66
		4-Chloroaniline	106-47-8	0.46	16
		p-Cresidine	120-71-8	0.010	0.66
		2,4-Dimethylaniline (2,4-xylydine)	95-68-1	0.010	0.66
		1,2-Phenylenediamine	95-54-5	CMBST; or CHOXD fb (BIODG or CARBN); or BIODG fb CARBN	CMBST; or CHOXD fb (BIODG or CARBN); or BIODG fb CARBN
		1,3-Phenylenediamine	108-45-2	0.010	0.66
P001	Warfarin, & salts, when present at concentrations greater than 0.3%	Warfarin	81-81-2	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
P002	1-Acetyl-2-thiourea	1-Acetyl-2-thiourea	591-08-2	(WETOX or CHOXD) fb	CMBST

268.40 Table - Treatment Standards For Hazardous Waste					
WASTE CODE	Waste Description And Treatment/Regulatory Subcategory¹ (11/99, 8/00, 6/04, 2/07) NOTE: fb means followed by	Regulated hazardous constituent NOTE: NA means not applicable		Waste waters	Non waste waters
		Common Name	CAS² Number	Concentration³ in mg/l; or Technology Code⁴	Concentration⁵ in mg/kg unless noted as mg/l TCLP or Technology Code⁴
				CARBN; or CMBST	
P003	Acrolein	Acrolein	107-02-8	0.29	CMBST
P004	Aldrin	Aldrin	309-00-2	0.021	0.066
P005	Allyl alcohol	Allyl alcohol	107-18-6	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
P006	Aluminum phosphide	Aluminum phosphide	20859-73-8	CHOXD; CHRED; or CMBST	CHOXD; CHRED; or CMBST
P007	5-Aminomethyl 3-isoxazolol	5-Aminomethyl 3-isoxazolol	2763-96-4	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
P008	4-Aminopyridine	4-Aminopyridine	504-24-5	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
P009	Ammonium picrate	Ammonium picrate	131-74-8	CHOXD; CHRED; CARBN; BIODG; or CMBST	CHOXD; CHRED; or CMBST
P010	Arsenic acid	Arsenic	7440-38-2	1.4	5.0 mg/l TCLP
P011	Arsenic pentoxide	Arsenic	7440-38-2	1.4	5.0 mg/l TCLP
P012	Arsenic trioxide	Arsenic	7440-38-2	1.4	5.0 mg/l TCLP
P013	Barium cyanide	Barium	7440-39-3	NA	21 mg/l TCLP
		Cyanides (Total) ⁷	57-12-5	1.2	590
		Cyanides (Amenable) ⁷	57-12-5	0.86	30
P014	Thiophenol (Benzene thiol)	Thiophenol (Benzene thiol)	108-98-5	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
P015	Beryllium dust	Beryllium	7440-41-7	RMETL; or RTHRM	RMETL; or RTHRM
P016	Dichloromethyl ether (Bis(chloromethyl)ether)	Dichloromethyl ether	542-88-1	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
P017	Bromoacetone	Bromoacetone	598-31-2	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
P018	Brucine	Brucine	357-57-3	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
P020	2-sec-Butyl-4,6-dinitrophenol (Dinoseb)	2-sec-Butyl-4,6-dinitrophenol (Dinoseb)	88-85-7	0.066	2.5
P021	Calcium cyanide	Cyanides (Total) ⁷	57-12-5	1.2	590
		Cyanides (Amenable) ⁷	57-12-5	0.86	30
P022	Carbon disulfide	Carbon disulfide	75-15-0	3.8	CMBST
		Carbon disulfide; alternate ⁶ standard for nonwastewaters only	75-15-0	NA	4.8 mg/l TCLP
P023	Chloroacetaldehyde	Chloroacetaldehyde	107-20-0	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
P024	p-Chloroaniline	p-Chloroaniline	106-47-8	0.46	16

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268.40 Table - Treatment Standards For Hazardous Waste					
WASTE CODE	Waste Description And Treatment/Regulatory Subcategory ¹ (11/99, 8/00, 6/04, 2/07) NOTE: fb means followed by	Regulated hazardous constituent NOTE: NA means not applicable		Waste waters	Non waste waters
		Common Name	CAS ² Number	Concentration ³ in mg/l; or Technology Code ⁴	Concentration ⁵ in mg/kg unless noted as mg/l TCLP or Technology Code ⁴
P026	1-(o-Chlorophenyl)thiourea	1-(o-Chlorophenyl)thiourea	5344-82-1	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
P027	3-Chloropropionitrile	3-Chloropropionitrile	542-76-7	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
P028	Benzyl chloride	Benzyl chloride	100-44-7	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
P029	Copper cyanide	Cyanides (Total) ⁷	57-12-5	1.2	590
		Cyanides (Amenable) ⁷	57-12-5	0.86	30
P030	Cyanides (soluble salts and complexes)	Cyanides (Total) ⁷	57-12-5	1.2	590
		Cyanides (Amenable) ⁷	57-12-5	0.86	30
P031	Cyanogen	Cyanogen	460-19-5	CHOXD; WETOX; or CMBST	CHOXD; WETOX; or CMBST
P033	Cyanogen chloride	Cyanogen chloride	506-77-4	CHOXD; WETOX; or CMBST	CHOXD; WETOX; or CMBST
P034	2-Cyclohexyl-4,6-dinitrophenol	2-Cyclohexyl-4,6-dinitrophenol	131-89-5	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
P036	Dichlorophenylarsine	Arsenic	7440-38-2	1.4	5.0 mg/l TCLP
P037	Dieldrin	Dieldrin	60-57-1	0.017	0.13
P038	Diethylarsine	Arsenic	7440-38-2	1.4	5.0 mg/l TCLP
P039	Disulfoton	Disulfoton	298-04-4	0.017	6.2
P040	0,0-Diethyl O-pyrazinyl phosphorothioate	0,0-Diethyl O-pyrazinyl phosphorothioate	297-97-2	CARBN; or CMBST	CMBST
P041	Diethyl-p-nitrophenyl phosphate	Diethyl-p-nitrophenyl phosphate	311-45-5	CARBN; or CMBST	CMBST
P042	Epinephrine	Epinephrine	51-43-4	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
P043	Diisopropylfluorophosphate (DFP)	Diisopropylfluorophosphate (DFP)	55-91-4	CARBN; or CMBST	CMBST
P044	Dimethoate	Dimethoate	60-51-5	CARBN; or CMBST	CMBST
P045	Thiofanox	Thiofanox	39196-18-4	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
P046	alpha, alpha-Dimethylphenethylamine	alpha, alpha-Dimethylphenethylamine	122-09-8	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
P047	4,6-Dinitro-o-cresol	4,6-Dinitro-o-cresol	543-52-1	0.28	160
	4,6-Dinitro-o-cresol salts	NA	NA	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
P048	2,4-Dinitrophenol	2,4-Dinitrophenol	51-28-5	0.12	160
P049	Dithiobiuret	Dithiobiuret	541-53-7	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
P050	Endosulfan	Endosulfan I	939-98-8	0.023	0.066

268.40 Table - Treatment Standards For Hazardous Waste					
WASTE CODE	Waste Description And Treatment/Regulatory Subcategory¹ (11/99, 8/00, 6/04, 2/07) NOTE: fb means followed by	Regulated hazardous constituent NOTE: NA means not applicable		Waste waters	Non waste waters
		Common Name	CAS² Number	Concentration³ in mg/l; or Technology Code⁴	Concentration⁵ in mg/kg unless noted as mg/l TCLP or Technology Code⁴
		Endosulfan II	33213-6-5	0.029	0.13
		Endosulfan sulfate	1031-07-8	0.029	0.13
P051	Endrin	Endrin	72-20-8	0.0028	0.13
		Endrin aldehyde	7421-93-4	0.025	0.13
P054	Aziridine	Aziridine	151-56-4	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
P056	Fluorine	Fluoride (measured in wastewaters only)	16964-48-8	35	ADGAS fb NEUTR
P057	Fluoroacetamide	Fluoroacetamide	640-19-7	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
P058	Fluoroacetic acid, sodium salt	Fluoroacetic acid, sodium salt	62-74-8	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
P059	Heptachlor	Heptachlor	76-44-8	0.0012	0.066
		Heptachlor epoxide	1024-57-3	0.016	0.066
P060	Isodrin	Isodrin	465-73-6	0.021	0.066
P062	Hexaethyl tetraphosphate	Hexaethyl tetraphosphate	757-58-4	CARBN; or CMBST	CMBST
P063	Hydrogen cyanide	Cyanides (Total) ⁷	57-12-5	1.2	590
		Cyanides (Amenable) ⁷	57-12-5	0.86	30
P064	Isocyanic acid, ethyl ester	Isocyanic acid, ethyl ester	624-83-9	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
P065	Mercury fulminate nonwastewaters, regardless of their total mercury content, that are not incinerator residues or are not residues from RMERC.	Mercury	7439-97-6	NA	IMERC
	Mercury fulminate nonwastewaters that are either incinerator residues or are residues from RMERC; and contain greater than or equal to 260 mg/kg total mercury.	Mercury	7439-97-6	NA	RMERC
	Mercury fulminate nonwastewaters that are residues from RMERC and contain less than 260 mg/kg total mercury.	Mercury	7439-97-6	NA	0.20 mg/l TCLP
	Mercury fulminate nonwastewaters that are incinerator residues and contain less than 260 mg/kg total mercury.	Mercury	7439-97-6	NA	0.025 mg/l TCLP
	All mercury fulminate wastewaters.	Mercury	7439-97-6	0.15	NA
P066	Methomyl	Methomyl	16752-77-5	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
P067	2-Methyl-aziridine	2-Methyl-aziridine	75-55-8	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
P068	Methyl hydrazine	Methyl hydrazine	60-34-4	CHOXD; CHRED; CARBN; BIODG; or CMBST	CHOXD; CHRED; or CMBST
P069	2-Methylactonitrile	2-Methylactonitrile	75-86-5	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
P070	Aldicarb	Aldicarb	116-06-3	(WETOX or CHOXD) fb	CMBST

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268.40 Table - Treatment Standards For Hazardous Waste					
WASTE CODE	Waste Description And Treatment/Regulatory Subcategory ¹ (11/99, 8/00, 6/04, 2/07) NOTE: fb means followed by	Regulated hazardous constituent NOTE: NA means not applicable		Waste waters	Non waste waters
		Common Name	CAS ² Number	Concentration ³ in mg/l; or Technology Code ⁴	Concentration ⁵ in mg/kg unless noted as mg/l TCLP or Technology Code ⁴
				CARBN; or CMBST	
P071	Methyl parathion	Methyl parathion	298-00-0	0.014	4.6
P072	1-Naphthyl-2-thiourea	1-Naphthyl-2-thiourea	86-88-4	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
P073	Nickel carbonyl	Nickel	7440-02-0	3.98	11 mg/l TCLP
P074	Nickel cyanide	Cyanides (Total) ⁷	57-12-5	1.2	590
		Cyanides (Amenable) ⁷	57-12-5	0.86	30
		Nickel	7440-02-0	3.98	11 mg/l TCLP
P075	Nicotine and salts	Nicotine and salts	54-11-5	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
P076	Nitric oxide	Nitric oxide	10102-43-9	ADGAS	ADGAS
P077	p-Nitroaniline	p-Nitroaniline	100-01-6	0.028	28
P078	Nitrogen dioxide	Nitrogen dioxide	10102-44-0	ADGAS	ADGAS
P081	Nitroglycerin	Nitroglycerin	55-63-0	CHOXD; CHRED; CARBN; BIODG; or CMBST	CHOXD; CHRED; or CMBST
P082	N-Nitrosodimethylamine	N-Nitrosodimethylamine	62-75-9	0.40	2.3
P084	N-Nitrosomethylvinylamine	N-Nitrosomethylvinylamine	4549-40-0	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
P085	Octamethylpyrophosphoramide	Octamethylpyrophosphoramide	152-16-9	CARBN; or CMBST	CMBST
P087	Osmium tetroxide	Osmium tetroxide	20816-12-0	RMETL; or RTHRM	RMETL; or RTHRM
P088	Endothall	Endothall	145-73-3	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
P089	Parathion	Parathion	56-38-2	0.014	4.6
P092	Phenyl mercuric acetate nonwastewaters, regardless of their total mercury content, that are not incinerator residues or are not residues from RMERC.	Mercury	7439-97-6	NA	IMERC; or RMERC
	Phenyl mercuric acetate nonwastewaters that are either incinerator residues or are residues from RMERC; and still contain greater than or equal to 260 mg/kg total mercury.	Mercury	7439-97-6	NA	RMERC
	Phenyl mercuric acetate nonwastewaters that are residues from RMERC and contain less than 260 mg/kg total mercury.	Mercury	7439-97-6	NA	0.20 mg/l TCLP
	Phenyl mercuric acetate nonwastewaters that are incinerator residues and contain less than 260 mg/kg total mercury.	Mercury	7439-97-6	NA	0.025 mg/l TCLP
	All phenyl mercuric acetate wastewaters.	Mercury	7439-97-6	0.15	NA
P093	Phenylthiourea	Phenylthiourea	103-85-5	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
P094	Phorate	Phorate	298-02-2	0.021	4.6
P095	Phosgene	Phosgene	75-44-5	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST

268.40 Table - Treatment Standards For Hazardous Waste					
WASTE CODE	Waste Description And Treatment/Regulatory Subcategory¹ (11/99, 8/00, 6/04, 2/07) NOTE: fb means followed by	Regulated hazardous constituent NOTE: NA means not applicable		Waste waters	Non waste waters
		Common Name	CAS² Number	Concentration³ in mg/l; or Technology Code⁴	Concentration⁵ in mg/kg unless noted as mg/l TCLP or Technology Code⁴
P096	Phosphine	Phosphine	7803-51-2	CHOXD; CHRED; or CMBST	CHOXD; CHRED; or CMBST
P097	Famphur	Famphur	52-85-7	0.017	15
P098	Potassium cyanide.	Cyanides (Total) ⁷	57-12-5	1.2	590
		Cyanides (Amenable) ⁷	57-12-5	0.86	30
P099	Potassium silver cyanide	Cyanides (Total) ⁷	57-12-5	1.2	590
		Cyanides (Amenable) ⁷	57-12-5	0.86	30
		Silver	7440-22-4	0.43	0.14 mg/l TCLP
P101	Ethyl cyanide (Propanenitrile)	Ethyl cyanide (Propanenitrile)	107-12-0	0.24	360
P102	Propargyl alcohol	Propargyl alcohol	107-19-7	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
P103	Selenourea	Selenium	7782-49-2	0.82	5.7 mg/l TCLP
P104	Silver cyanide	Cyanides (Total) ⁷	57-12-5	1.2	590
		Cyanides (Amenable) ⁷	57-12-5	0.86	30
		Silver	7440-22-4	0.43	0.14 mg/l TCLP
P105	Sodium azide	Sodium azide	26628-22-8	CHOXD; CHRED; CARBN; BIODG; or CMBST	CHOXD; CHRED; or CMBST
P106	Sodium cyanide	Cyanides (Total) ⁷	57-12-5	1.2	590
		Cyanides (Amenable) ⁷	57-12-5	0.86	30
P108	Strychnine and salts	Strychnine and salts	57-24-9	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
P109	Tetraethyldithiopyrophosphate	Tetraethyldithiopyrophosphate	3689-24-5	CARBAN; or CMBST	CMBST
P110	Tetraethyl lead	Lead	7439-92-1	0.69	0.75 mg/l TCLP
P111	Tetraethylpyrophosphate	Tetraethylpyrophosphate	107-49-3	CARBAN; or CMBST	CMBST
P112	Tetranitromethane	Tetranitromethane	509-14-8	CHOXD; CHRED; CARBN; BIODG; or CMBST	CHOXD; CHRED; or CMBST
P113	Thallic oxide	Thallium (measured in wastewaters only)	7440-28-0	1.4	RTHRM; or STABL
P114	Thallium selenite	Selenium	7782-49-2	0.82	5.7 mg/l TCLP
P115	Thallium (I) sulfate	Thallium (measured in wastewaters only)	7440-28-0	1.4	RTHRM; or STABL
P116	Thiosemicarbazide	Thiosemicarbazide	79-19-6	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
P118	Trichloromethanethiol	Trichloromethanethiol	75-70-7	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
P119	Ammonium vanadate	Vanadium (measured in wastewaters only)	7440-62-2	4.3	STABL
P120	Vanadium pentoxide	Vanadium (measured in wastewaters only)	7440-62-2	4.3	STABL
P121	Zinc cyanide	Cyanides (Total) ⁷	57-12-5	1.2	590
		Cyanides (Amenable) ⁷	57-12-5	0.86	30

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268.40 Table - Treatment Standards For Hazardous Waste					
WASTE CODE	Waste Description And Treatment/Regulatory Subcategory ¹ (11/99, 8/00, 6/04, 2/07) NOTE: fb means followed by	Regulated hazardous constituent NOTE: NA means not applicable		Waste waters	Non waste waters
		Common Name	CAS ² Number	Concentration ³ in mg/l; or Technology Code ⁴	Concentration ⁵ in mg/kg unless noted as mg/l TCLP or Technology Code ⁴
P122	Zinc phosphide Zn ₃ P ₂ , when present at concentrations greater than 10%	Zinc Phosphide	1314-84-7	CHOXD; CHRED; or CMBST	CHOXD; CHRED; or CMBST
P123	Toxaphene	Toxaphene	8001-35-2	0.0095	2.6
P127	Carbofuran ¹⁰	Carbofuran	1563-66-2	0.006; or CMBST, CHOXD, BIODG or CARBN	0.14; or CMBST
P128	Mexacarbate ¹⁰	Mexacarbate	315-18-4	0.056; or CMBST, CHOXD, BIODG or CARBN	1.4; or CMBST
P185	Tirpate ¹⁰	Tirpate	26419-73-8	0.056; or CMBST, CHOXD, BIODG or CARBN	0.28; or CMBST
P188	Physostigmine salicylate ¹⁰	Physostigmine salicylate	57-64-7	0.056; or CMBST, CHOXD, BIODG or CARBN	1.4; or CMBST
P189	Carbosulfan ¹⁰	Carbosulfan	55285-14-8	0.028; or CMBST, CHOXD, BIODG or CARBN	1.4; or CMBST
P190	Metolcarb ¹⁰	Metolcarb	1129-41-5	0.056; or CMBST, CHOXD, BIODG or CARBN	1.4; or CMBST
P191	Dimetilan ¹⁰	Dimetilan	644-64-4	0.056; or CMBST, CHOXD, BIODG or CARBN	1.4; or CMBST
P192	Isolan ¹⁰	Isolan	119-38-0	0.056; or CMBST, CHOXD, BIODG or CARBN	1.4; or CMBST
P194	Oxamyl	Oxamyl	23135-22-0	0.056; or CMBST, CHOXD, BIODG or CARBN	0.28; or CMBST
P196	Manganese dimethyldithiocarbamate ¹⁰	Dithiocarbamates (total)	NA	0.028; or CMBST, CHOXD, BIODG or CARBN	28; or CMBST
P197	Formparanate ¹⁰	Formparanate	17702-57-7	0.056; or CMBST, CHOXD, BIODG or CARBN	1.4; or CMBST
P198	Formetanate hydrochloride ¹⁰	Formetanate hydrochloride	23422-53-9	0.056; or CMBST, CHOXD,	1.4; or CMBST

268.40 Table - Treatment Standards For Hazardous Waste					
WASTE CODE	Waste Description And Treatment/Regulatory Subcategory¹ (11/99, 8/00, 6/04, 2/07) NOTE: fb means followed by	Regulated hazardous constituent NOTE: NA means not applicable		Waste waters	Non waste waters
		Common Name	CAS² Number	Concentration³ in mg/l; or Technology Code⁴	Concentration⁵ in mg/kg unless noted as mg/l TCLP or Technology Code⁴
				BIODG or CARBN	
P199	Methiocarb ¹⁰	Methiocarb	2032-65-7	0.056; or CMBST, CHOXD, BIODG or CARBN	1.4; or CMBST
P201	Promecarb ¹⁰	Promecarb	2631-37-0	0.056; or CMBST, CHOXD, BIODG or CARBN	1.4; or CMBST
P202	m-Cumenyl methylcarbamate ¹⁰	m-Cumenyl methylcarbamate	64-00-6	0.056; or CMBST, CHOXD, BIODG or CARBN	1.4; or CMBST
P203	Aldicarb sulfone ¹⁰	Aldicarb sulfone	1646-88-4	0.056; or CMBST, CHOXD, BIODG or CARBN	0.28; or CMBST
P204	Physostigmine ¹⁰	Physostigmine	57-47-6	0.056; or CMBST, CHOXD, BIODG or CARBN	1.4; or CMBST
P205	Ziram ¹⁰	Dithiocarbamates (total)	NA	0.028; or CMBST, CHOXD, BIODG or CARBN	28; or CMBST
U001	Acetaldehyde	Acetaldehyde	75-07-0	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U002	Acetone	Acetone	67-64-1	0.28	160
U003	Acetonitrile	Acetonitrile	75-05-8	5.6	CMBST
		Acetonitrile; alternate ⁶ standard for nonwastewaters only	75-05-8	NA	38
U004	Acetophenone	Acetophenone	98-86-2	0.010	9.7
U005	2-Acetylaminofluorene	2-Acetylaminofluorene	53-96-3	0.059	140
U006	Acetyl chloride	Acetyl Chloride	75-36-5	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U007	Acrylamide	Acrylamide	79-06-1	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U008	Acrylic acid	Acrylic acid	79-10-7	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U009	Acrylonitrile	Acrylonitrile	107-13-1	0.24	84
U010	Mitomycin C	Mitomycin C	50-07-7	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U011	Amitrole	Amitrole	61-82-5	(WETOX or CHOXD) fb	CMBST

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268.40 Table - Treatment Standards For Hazardous Waste					
WASTE CODE	Waste Description And Treatment/Regulatory Subcategory ¹ (11/99, 8/00, 6/04, 2/07) NOTE: fb means followed by	Regulated hazardous constituent NOTE: NA means not applicable		Waste waters	Non waste waters
		Common Name	CAS ² Number	Concentration ³ in mg/l; or Technology Code ⁴	Concentration ⁵ in mg/kg unless noted as mg/l TCLP or Technology Code ⁴
				CARBN; or CMBST	
U012	Aniline	Aniline	62-53-3	0.81	14
U014	Auramine	Auramine	492-80-8	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U015	Azaserine	Azaserine	115-02-6	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U016	Benz(c)acridine	Benz(c)acridine	225-51-4	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U017	Benzal chloride	Benzal chloride	98-87-3	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U018	Benz(a)anthracene	Benz(a)anthracene	56-55-3	0.059	3.4
U019	Benzene	Benzene	71-43-2	0.14	10
U020	Benzenesulfonyl chloride	Benzenesulfonyl chloride	98-09-9	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U021	Benzidine	Benzidine	92-87-5	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U022	Benzo(a)pyrene	Benzo(a)pyrene	50-32-8	0.061	3.4
U023	Benzotrichloride	Benzotrichloride	98-07-7	CHOXD; CHRED; CARBN; BIODG; or CMBST	CHOXD; CHRED; or CMBST
U024	bis(2-Chloroethoxy)methane	bis(2-Chloroethoxy)methane	111-91-1	0.036	7.2
U025	bis(2-Chloroethyl)ether	bis(2-Chloroethyl)ether	111-44-4	0.033	6.0
U026	Chlornaphazine	Chlornaphazine	494-03-1	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U027	bis(2-Chloroisopropyl)ether	bis(2-Chloroisopropyl)ether	39638-32-9	0.055	7.2
U028	bis(2-Ethylhexyl) phthalate	bis(2-Ethylhexyl) phthalate	117-81-7	0.28	28
U029	Methyl bromide (Bromomethane)	Methyl bromide (Bromomethane)	74-83-9	0.11	15
U030	4-Bromophenyl phenyl ether	4-Bromophenyl phenyl ether	101-55-3	0.055	15
U031	n-Butyl alcohol	n-Butyl alcohol	71-36-3	5.6	2.6
U032	Calcium chromate	Chromium (Total)	7440-47-3	2.77	0.60 mg/l TCLP
U033	Carbon oxyfluoride	Carbon oxyfluoride	353-50-4	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U034	Trichloroacetaldehyde (Chloral)	Trichloroacetaldehyde (Chloral)	75-87-6	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U035	Chlorambucil	Chlorambucil	305-03-3	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST

268.40 Table - Treatment Standards For Hazardous Waste					
WASTE CODE	Waste Description And Treatment/Regulatory Subcategory¹ (11/99, 8/00, 6/04, 2/07) NOTE: fb means followed by	Regulated hazardous constituent NOTE: NA means not applicable		Waste waters	Non waste waters
		Common Name	CAS² Number	Concentration³ in mg/l; or Technology Code ⁴	Concentration⁵ in mg/kg unless noted as mg/l TCLP or Technology Code ⁴
U036	Chlordane	Chlordane (alpha and gamma isomers)	57-74-9	0.0033	0.26
U037	Chlorobenzene	Chlorobenzene	108-90-7	0.057	6.0
U038	Chlorobenzilate	Chlorobenzilate	510-15-6	0.10	CMBST
U039	p-Chloro-m-cresol	p-Chloro-m-cresol	59-50-7	0.018	14
U041	Epichlorohydrin (1-Chloro-2,3-epoxypropane)	Epichlorohydrin (1-Chloro-2,3-epoxypropane)	106-89-8	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U042	2-Chloroethyl vinyl ether	2-Chloroethyl vinyl ether	110-75-8	0.062	CMBST
U043	Vinyl chloride	Vinyl chloride	75-01-4	0.27	6.0
U044	Chloroform	Chloroform	67-66-3	0.046	6.0
U045	Chloromethane (Methyl chloride)	Chloromethane (Methyl chloride)	74-87-3	0.19	30
U046	Chloromethyl methyl ether	Chloromethyl methyl ether	107-30-2	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U047	2-Chloronaphthalene	2-Chloronaphthalene	91-58-7	0.055	5.6
U048	2-Chlorophenol	2-Chlorophenol	95-57-8	0.044	5.7
U049	4-Chloro-o-toluidine hydrochloride	4-Chloro-o-toluidine hydrochloride	3165-93-3	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U050	Chrysene	Chrysene	218-01-9	0.059	3.4
U051	Creosote	Naphthalene	91-20-3	0.059	5.6
		Pentachlorophenol	87-86-5	0.089	7.4
		Phenanthrene	85-01-8	0.059	5.6
		Pyrene	129-00-0	0.067	8.2
		Toluene	108-88-3	0.080	10
		Xylenes-mixed isomers(sum of o-, m-, and p-xylene concentrations)	1330-20-7	0.32	30
		Lead	7439-92-1	0.69	0.75 mg/l TCLP
U052	Cresols (Cresylic acid)	o-Cresol	95-48-7	0.11	5.6
		m-Cresol(difficult to distinguish from p-cresol)	108-39-4	0.77	5.6
		p-Cresol(difficult to distinguish from m-cresol)	106-44-5	0.77	5.6
		Cresol-mixed isomers (Cresylic acid)(sum of o-, m-, and p-cresol concentrations)	1319-77-3	0.88	11.2
U053	Crotonaldehyde	Crotonaldehyde	4170-30-3	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U055	Cumene	Cumene	98-82-8	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U056	Cyclohexane	Cyclohexane	110-82-7	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U057	Cyclohexanone	Cyclohexanone	108-94-1	0.36	CMBST
		Cyclohexanone; alternate ⁶ standard for nonwastewaters only	108-94-1	NA	0.75 mg/l TCLP
U058	Cyclophosphamide	Cyclophosphamide	50-18-0	CARBN; or CMBST	CMBST

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268.40 Table - Treatment Standards For Hazardous Waste					
WASTE CODE	Waste Description And Treatment/Regulatory Subcategory ¹ (11/99, 8/00, 6/04, 2/07) NOTE: fb means followed by	Regulated hazardous constituent NOTE: NA means not applicable		Waste waters	Non waste waters
		Common Name	CAS ² Number	Concentration ³ in mg/l; or Technology Code ⁴	Concentration ⁵ in mg/kg unless noted as mg/l TCLP or Technology Code ⁴
U059	Daunomycin	Daunomycin	20830-81-3	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U060	DDD	o,p'-DDD	53-19-0	0.023	0.087
		p,p'-DDD	72-54-8	0.023	0.087
U061	DDT	o,p'-DDT	789-02-6	0.0039	0.087
		p,p'-DDT	50-29-3	0.0039	0.087
		o,p'-DDD	53-19-0	0.023	0.087
		p,p'-DDD	72-54-8	0.023	0.087
		o,p'-DDE	3424-82-6	0.031	0.087
		p,p'-DDE	72-55-9	0.031	0.087
U062	Diallate	Diallate	2303-16-4	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U063	Dibenz(a,h)anthracene	Dibenz(a,h)anthracene	53-70-3	0.055	8.2
U064	Dibenz(a,i)pyrene	Dibenz(a,i)pyrene	189-55-9	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U066	1,2-Dibromo-3-chloropropane	1,2-Dibromo-3-chloropropane	96-12-8	0.11	15
U067	Ethylene dibromide (1,2-Dibromoethane)	Ethylene dibromide (1,2-Dibromoethane)	106-93-4	0.028	15
U068	Dibromomethane	Dibromomethane	74-95-3	0.11	15
U069	Di-n-butyl phthalate	Di-n-butyl phthalate	84-74-2	0.057	28
U070	o-Dichlorobenzene	o-Dichlorobenzene	95-50-1	0.088	6.0
U071	m-Dichlorobenzene	m-Dichlorobenzene	541-73-1	0.036	6.0
U072	p-Dichlorobenzene	p-Dichlorobenzene	106-46-7	0.090	6.0
U073	3,3'-Dichlorobenzidine	3,3'-Dichlorobenzidine	91-94-1	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U074	1,4-Dichloro-2-butene	cis-1,4-Dichloro-2-butene	1476-11-5	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
		trans-1,4-Dichloro-2-butene	764-41-0	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U075	Dichlorodifluoromethane	Dichlorodifluoromethane	75-71-8	0.23	7.2
U076	1,1-Dichloroethane	1,1-Dichloroethane	75-34-3	0.059	6.0
U077	1,2-Dichloroethane	1,2-Dichloroethane	107-06-2	0.21	6.0
U078	1,1-Dichloroethylene	1,1-Dichloroethylene	75-35-4	0.025	6.0
U079	1,2-Dichloroethylene	trans-1,2-Dichloroethylene	156-60-5	0.054	30
U080	Methylene chloride	Methylene chloride	75-09-2	0.089	30
U081	2,4-Dichlorophenol	2,4-Dichlorophenol	120-83-2	0.044	14
U082	2,6-Dichlorophenol	2,6-Dichlorophenol	87-65-0	0.044	14
U083	1,2-Dichloropropane	1,2-Dichloropropane	78-87-5	0.85	18
U084	1,3-Dichloropropylene	cis-1,3-Dichloropropylene	10061-01-5	0.036	18
		trans-1,3-Dichloropropylene	10061-02-6	0.036	18
U085	1,2:3,4-Diepoxybutane	1,2:3,4-Diepoxybutane	1464-53-5	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U086	N,N'-Diethylhydrazine	N,N'-Diethylhydrazine	1615-80-1	CHOXD; CHRED; CARBN; BIODG; or CMBST	CHOXD; CHRED; or CMBST

268.40 Table - Treatment Standards For Hazardous Waste					
WASTE CODE	Waste Description And Treatment/Regulatory Subcategory ¹ (11/99, 8/00, 6/04, 2/07) NOTE: fb means followed by	Regulated hazardous constituent NOTE: NA means not applicable		Waste waters	Non waste waters
		Common Name	CAS ² Number	Concentration ³ in mg/l; or Technology Code ⁴	Concentration ⁵ in mg/kg unless noted as mg/l TCLP or Technology Code ⁴
U087	O,O-Diethyl S-methyldithiophosphate	O,O-Diethyl S-methyldithiophosphate	3288-58-2	CARBN; or CMBST	CMBST
U088	Diethyl phthalate	Diethyl phthalate	84-66-2	0.20	28
U089	Diethyl stilbestrol	Diethyl stilbestrol	56-53-1	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U090	Dihydrosafrole	Dihydrosafrole	94-58-6	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U091	3,3'-Dimethoxybenzidine	3,3'-Dimethoxybenzidine	119-90-4	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U092	Dimethylamine	Dimethylamine	124-40-3	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U093	p-Dimethylaminoazobenzene	p-Dimethylaminoazobenzene	60-11-7	0.13	CMBST
U094	7,12-Dimethylbenz(a)anthracene	7,12-Dimethylbenz(a)anthracene	57-97-6	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U095	3,3'-Dimethylbenzidine	3,3'-Dimethylbenzidine	119-93-7	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U096	alpha, alpha-Dimethyl benzyl hydroperoxide	alpha, alpha-Dimethyl benzyl hydroperoxide	80-15-9	CHOXD; CHRED; CARBN; BIODG; or CMBST	CHOXD; CHRED; or CMBST
U097	Dimethylcarbamoyl chloride	Dimethylcarbamoyl chloride	79-44-7	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U098	1,1-Dimethylhydrazine	1,1-Dimethylhydrazine	57-14-7	CHOXD; CHRED; CARBN; BIODG; or CMBST	CHOXD; CHRED; or CMBST
U099	1,2-Dimethylhydrazine	1,2-Dimethylhydrazine	540-73-8	CHOXD; CHRED; CARBN; BIODG; or CMBST	CHOXD; CHRED; or CMBST
U101	2,4-Dimethylphenol	2,4-Dimethylphenol	105-67-9	0.036	14
U102	Dimethyl phthalate	Dimethyl phthalate	131-11-3	0.047	28
U103	Dimethyl sulfate	Dimethyl sulfate	77-78-1	CHOXD; CHRED; CARBN; BIODG; or CMBST	CHOXD; CHRED; or CMBST
U105	2,4-Dinitrotoluene	2,4-Dinitrotoluene	121-14-2	0.32	140
U106	2,6-Dinitrotoluene	2,6-Dinitrotoluene	606-20-2	0.55	28
U107	Di-n-octyl phthalate	Di-n-octyl phthalate	117-84-0	0.017	28
U108	1,4-Dioxane	1,4-Dioxane	123-91-1	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
		1,4-Dioxane; alternate ⁶	123-91-1	12.0	170

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268.40 Table - Treatment Standards For Hazardous Waste					
WASTE CODE	Waste Description And Treatment/Regulatory Subcategory ¹ (11/99, 8/00, 6/04, 2/07) NOTE: fb means followed by	Regulated hazardous constituent NOTE: NA means not applicable		Waste waters	Non waste waters
		Common Name	CAS ² Number	Concentration ³ in mg/l; or Technology Code ⁴	Concentration ⁵ in mg/kg unless noted as mg/l TCLP or Technology Code ⁴
U109	1,2-Diphenylhydrazine	1,2-Diphenylhydrazine	122-66-7	CHOXD; CHRED; CARBN; BIODG; or CMBST	CHOXD; CHRED; or CMBST
		1,2-Diphenylhydrazine; alternate ⁶ standard for wastewaters only	122-66-7	0.087	NA
U110	Dipropylamine	Dipropylamine	142-84-7	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U111	Di-n-propylnitrosamine	Di-n-propylnitrosamine	621-64-7	0.40	14
U112	Ethyl acetate	Ethyl acetate	141-78-6	0.34	33
U113	Ethyl acrylate	Ethyl acrylate	140-88-5	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U114	Ethylenebisdithiocarbamic acid salts and esters	Ethylenebisdithiocarbamic acid	111-54-6	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U115	Ethylene oxide	Ethylene oxide	75-21-8	(WETOX or CHOXD) fb CARBN; or CMBST	CHOXD; or CMBST
		Ethylene oxide; alternate ⁶ standard for wastewaters only	75-21-8	0.12	NA
U116	Ethylene thiourea	Ethylene thiourea	96-45-7	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U117	Ethyl ether	Ethyl ether	60-29-7	0.12	160
U118	Ethyl methacrylate	Ethyl methacrylate	97-63-2	0.14	160
U119	Ethyl methane sulfonate	Ethyl methane sulfonate	62-50-0	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U120	Fluoranthene	Fluoranthene	206-44-0	0.068	3.4
U121	Trichloromonofluoromethane	Trichloromonofluoromethane	75-69-4	0.020	30
U122	Formaldehyde	Formaldehyde	50-00-0	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U123	Formic acid	Formic acid	64-18-6	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U124	Furan	Furan	110-00-9	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U125	Furfural	Furfural	98-01-1	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U126	Glycidylaldehyde	Glycidylaldehyde	765-34-4	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U127	Hexachlorobenzene	Hexachlorobenzene	118-74-1	0.055	10
U128	Hexachlorobutadiene	Hexachlorobutadiene	87-68-3	0.055	5.6

268.40 Table - Treatment Standards For Hazardous Waste					
WASTE CODE	Waste Description And Treatment/Regulatory Subcategory¹ (11/99, 8/00, 6/04, 2/07) NOTE: fb means followed by	Regulated hazardous constituent NOTE: NA means not applicable		Waste waters	Non waste waters
		Common Name	CAS² Number	Concentration³ in mg/l; or Technology Code⁴	Concentration⁵ in mg/kg unless noted as mg/l TCLP or Technology Code⁴
U129	Lindane	alpha-BHC	319-84-6	0.00014	0.066
		beta-BHC	319-85-7	0.00014	0.066
		delta-BHC	319-86-8	0.023	0.066
		gamma-BHC (Lindane)	58-89-9	0.0017	0.066
U130	Hexachlorocyclopentadiene	Hexachlorocyclopentadiene	77-47-4	0.057	2.4
U131	Hexachloroethane	Hexachloroethane	67-72-1	0.055	30
U132	Hexachlorophene	Hexachlorophene	70-30-4	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U133	Hydrazine	Hydrazine	302-01-2	CHOXD; CHRED; CARBN; BIODG; or CMBST	CHOXD; CHRED; or CMBST
U134	Hydrogen fluoride	Fluoride (measured in wastewaters only)	7664-39-3	35	ADGAS fb NEUTR; or NEUTR
U135	Hydrogen Sulfide	Hydrogen Sulfide	7783-06-4	CHOXD; CHRED, or CMBST	CHOXD; CHRED; or CMBST.
U136	Cacodylic acid	Arsenic	7440-38-2	1.4	5.0 mg/l TCLP
U137	Indeno(1,2,3-cd)pyrene	Indeno(1,2,3-cd)pyrene	193-39-5	0.0055	3.4
U138	Iodomethane	Iodomethane	74-88-4	0.19	65
U140	Isobutyl alcohol	Isobutyl alcohol	78-83-1	5.6	170
U141	Isosafrole	Isosafrole	120-58-1	0.081	2.6
U142	Kepone	Kepone	143-50-8	0.0011	0.13
U143	Lasiocarpine	Lasiocarpine	303-34-4	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U144	Lead acetate	Lead	7439-92-1	0.69	0.75 mg/l TCLP
U145	Lead phosphate	Lead	7439-92-1	0.69	0.75 mg/l TCLP
U146	Lead subacetate	Lead	7439-92-1	0.69	0.75 mg/l TCLP
U147	Maleic anhydride	Maleic anhydride	108-31-6	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U148	Maleic hydrazide	Maleic hydrazide	123-33-1	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U149	Malononitrile	Malononitrile	109-77-3	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U150	Melphalan	Melphalan	148-82-3	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U151	U151 (mercury) nonwastewaters that contain greater than or equal to 260 mg/kg total mercury.	Mercury	7439-97-6	NA	RMERC
	U151 (mercury) nonwastewaters that contain less than 260 mg/kg total mercury and that are residues from RMERC only.	Mercury	7439-97-6	NA	0.20 mg/l TCLP
	U151 (mercury) nonwastewaters that contain less than 260 mg/kg total mercury and that are not residues from RMERC.	Mercury	7439-97-6	NA	0.025 mg/l TCLP

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268.40 Table - Treatment Standards For Hazardous Waste					
WASTE CODE	Waste Description And Treatment/Regulatory Subcategory ¹ (11/99, 8/00, 6/04, 2/07) NOTE: fb means followed by	Regulated hazardous constituent NOTE: NA means not applicable		Waste waters	Non waste waters
		Common Name	CAS ² Number	Concentration ³ in mg/l; or Technology Code ⁴	Concentration ⁵ in mg/kg unless noted as mg/l TCLP or Technology Code ⁴
	All U151 (mercury) wastewaters.	Mercury	7439-97-6	0.15	NA
	Elemental Mercury Contaminated with Radioactive Materials	Mercury	7439-97-6	NA	AMLGM
U152	Methacrylonitrile	Methacrylonitrile	126-98-7	0.24	84
U153	Methanethiol	Methanethiol	74-93-1	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U154	Methanol	Methanol	67-56-1	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
		Methanol; alternate ⁶ set of standards for both wastewaters and nonwastewaters	67-56-1	5.6	0.75 mg/l TCLP
U155	Methapyrilene	Methapyrilene	91-80-5	0.081	1.5
U156	Methyl chlorocarbonate	Methyl chlorocarbonate	79-22-1	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U157	3-Methylcholanthrene	3-Methylcholanthrene	56-49-5	0.0055	15
U158	4,4'-Methylene bis(2-chloroaniline)	4,4'-Methylene bis(2-chloroaniline)	101-14-4	0.50	30
U159	Methyl ethyl ketone	Methyl ethyl ketone	78-93-3	0.28	36
U160	Methyl ethyl ketone peroxide	Methyl ethyl ketone peroxide	1338-23-4	CHOXD; CHRED; CARBN; BIODG; or CMBST	CHOXD; CHRED; or CMBST
U161	Methyl isobutyl ketone	Methyl isobutyl ketone	108-10-1	0.14	33
U162	Methyl methacrylate	Methyl methacrylate	80-62-6	0.14	160
U163	N-Methyl N'-nitro N-nitrosoguanidine	N-Methyl N'-nitro N-nitrosoguanidine	70-25-7	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U164	Methylthiouracil	Methylthiouracil	56-04-2	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U165	Naphthalene	Naphthalene	91-20-3	0.059	5.6
U166	1,4-Naphthoquinone	1,4-Naphthoquinone	130-15-4	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U167	1-Naphthylamine	1-Naphthylamine	134-32-7	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U168	2-Naphthylamine	2-Naphthylamine	91-59-8	0.52	CMBST
U169	Nitrobenzene	Nitrobenzene	98-95-3	0.068	14
U170	p-Nitrophenol	p-Nitrophenol	100-02-7	0.12	29
U171	2-Nitropropane	2-Nitropropane	79-46-9	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U172	N-Nitrosodi-n-butylamine	N-Nitrosodi-n-butylamine	924-16-3	0.40	17
U173	N-Nitrosodiethanolamine	N-Nitrosodiethanolamine	1116-54-7	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U174	N-Nitrosodiethylamine	N-Nitrosodiethylamine	55-18-5	0.40	28

268.40 Table - Treatment Standards For Hazardous Waste					
WASTE CODE	Waste Description And Treatment/Regulatory Subcategory¹ (11/99, 8/00, 6/04, 2/07) NOTE: fb means followed by	Regulated hazardous constituent NOTE: NA means not applicable		Waste waters	Non waste waters
		Common Name	CAS² Number	Concentration³ in mg/l; or Technology Code ⁴	Concentration⁵ in mg/kg unless noted as mg/l TCLP or Technology Code ⁴
U176	N-Nitroso-N-ethylurea	N-Nitroso-N-ethylurea	759-73-9	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U177	N-Nitroso-N-methylurea	N-Nitroso-N-methylurea	684-93-5	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U178	N-Nitroso-N-methylurethane	N-Nitroso-N-methylurethane	615-53-2	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U179	N-Nitrosopiperidine	N-Nitrosopiperidine	100-75-4	0.013	35
U180	N-Nitrosopyrrolidine	N-Nitrosopyrrolidine	930-55-2	0.013	35
U181	5-Nitro-o-toluidine	5-Nitro-o-toluidine	99-55-8	0.32	28
U182	Paraldehyde	Paraldehyde	123-63-7	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U183	Pentachlorobenzene	Pentachlorobenzene	608-93-5	0.055	10
U184	Pentachloroethane	Pentachloroethane	76-01-7	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
		Pentachloroethane; alternate ⁶ standards for both wastewaters and nonwastewaters	76-01-7	0.055	6.0
U185	Pentachloronitrobenzene	Pentachloronitrobenzene	82-68-8	0.055	4.8
U186	1,3-Pentadiene	1,3-Pentadiene	504-60-9	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U187	Phenacetin	Phenacetin	62-44-2	0.081	16
U188	Phenol	Phenol	108-95-2	0.039	6.2
U189	Phosphorus sulfide	Phosphorus sulfide	1314-80-3	CHOXD; CHRED; or CMBST	CHOXD; CHRED; or CMBST
U190	Phthalic anhydride (measured as Phthalic acid or Terephthalic acid)	Phthalic anhydride (measured as Phthalic acid or Terephthalic acid)	100-21-0	0.055	28
		Phthalic anhydride (measured as Phthalic acid or Terephthalic acid)	85-44-9	0.055	28
U191	2-Picoline	2-Picoline	109-06-8	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U192	Pronamide	Pronamide	23950-58-5	0.093	1.5
U193	1,3-Propane sultone	1,3-Propane sultone	1120-71-4	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U194	n-Propylamine	n-Propylamine	107-10-8	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U196	Pyridine	Pyridine	110-86-1	0.014	16
U197	p-Benzoquinone	p-Benzoquinone	106-51-4	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST

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268.40 Table - Treatment Standards For Hazardous Waste					
WASTE CODE	Waste Description And Treatment/Regulatory Subcategory¹ (11/99, 8/00, 6/04, 2/07) NOTE: fb means followed by	Regulated hazardous constituent NOTE: NA means not applicable		Waste waters	Non waste waters
		Common Name	CAS² Number	Concentration³ in mg/l; or Technology Code⁴	Concentration⁵ in mg/kg unless noted as mg/l TCLP or Technology Code⁴
U200	Reserpine	Reserpine	50-55-5	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U201	Resorcinol	Resorcinol	108-46-3	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U203	Safrole	Safrole	94-59-7	0.081	22
U204	Selenium dioxide	Selenium	7782-49-2	0.82	5.7 mg/l TCLP
U205	Selenium sulfide	Selenium	7782-49-2	0.82	5.7 mg/l TCLP
U206	Streptozotocin	Streptozotocin	18883-66-4	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U207	1,2,4,5-Tetrachlorobenzene	1,2,4,5-Tetrachlorobenzene	95-94-3	0.055	14
U208	1,1,1,2-Tetrachloroethane	1,1,1,2-Tetrachloroethane	630-20-6	0.057	6.0
U209	1,1,2,2-Tetrachloroethane	1,1,2,2-Tetrachloroethane	79-34-5	0.057	6.0
U210	Tetrachloroethylene	Tetrachloroethylene	127-18-4	0.056	6.0
U211	Carbon tetrachloride	Carbon tetrachloride	56-23-5	0.057	6.0
U213	Tetrahydrofuran	Tetrahydrofuran	109-99-9	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U214	Thallium (I) acetate	Thallium (measured in wastewaters only)	7440-28-0	1.4	RTHRM; or STABL
U215	Thallium (I) carbonate	Thallium (measured in wastewaters only)	7440-28-0	1.4	RTHRM; or STABL
U216	Thallium (I) chloride	Thallium (measured in wastewaters only)	7440-28-0	1.4	RTHRM; or STABL
U217	Thallium (I) nitrate	Thallium (measured in wastewaters only)	7440-28-0	1.4	RTHRM; or STABL
U218	Thioacetamide	Thioacetamide	62-55-5	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U219	Thiourea	Thiourea	62-56-6	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U220	Toluene	Toluene	108-88-3	0.080	10
U221	Toluenediamine	Toluenediamine	25376-45-8	CARBN; or CMBST	CMBST
U222	o-Toluidine hydrochloride	o-Toluidine hydrochloride	636-21-5	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U223	Toluene diisocyanate	Toluene diisocyanate	26471-62-5	CARBN; or CMBST	CMBST
U225	Bromoform (Tribromomethane)	Bromoform (Tribromomethane)	75-25-2	0.63	15
U226	1,1,1-Trichloroethane	1,1,1-Trichloroethane	71-55-6	0.054	6.0
U227	1,1,2-Trichloroethane	1,1,2-Trichloroethane	79-00-5	0.054	6.0
U228	Trichloroethylene	Trichloroethylene	79-01-6	0.054	6.0
U234	1,3,5-Trinitrobenzene	1,3,5-Trinitrobenzene	99-35-4	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U235	tris-(2,3-Dibromopropyl)-phosphate	tris-(2,3-Dibromopropyl)-phosphate	126-72-7	0.11	0.10

268.40 Table - Treatment Standards For Hazardous Waste					
WASTE CODE	Waste Description And Treatment/Regulatory Subcategory¹ (11/99, 8/00, 6/04, 2/07) NOTE: fb means followed by	Regulated hazardous constituent NOTE: NA means not applicable		Waste waters	Non waste waters
		Common Name	CAS² Number	Concentration³ in mg/l; or Technology Code ⁴	Concentration⁵ in mg/kg unless noted as mg/l TCLP or Technology Code ⁴
U236	Trypan Blue	Trypan Blue	72-57-1	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U237	Uracil mustard	Uracil mustard	66-75-1	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U238	Urethane (Ethyl carbamate)	Urethane (Ethyl carbamate)	51-79-6	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U239	Xylenes	Xylenes-mixed isomers(sum of o-, m-, and p-xylene concentrations)	1330-20-7	0.32	30
U240	2,4-D (2,4-Dichlorophenoxyacetic acid)	2,4-D (2,4-Dichlorophenoxyacetic acid)	94-75-7	0.72	10
	2,4-D (2,4-Dichlorophenoxyacetic acid) salts and esters		NA	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U243	Hexachloropropylene	Hexachloropropylene	1888-71-7	0.035	30
U244	Thiram	Thiram	137-26-8	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U246	Cyanogen bromide	Cyanogen bromide	506-68-3	CHOXD; WETOX; or CMBST	CHOXD; WETOX; or CMBST
U247	Methoxychlor	Methoxychlor	72-43-5	0.25	0.18
U248	Warfarin, & salts, when present at concentrations of 0.3% or less	Warfarin	81-81-2	(WETOX or CHOXD) fb CARBN; or CMBST	CMBST
U249	Zinc phosphide, Zn ₃ P ₂ , when present at concentrations of 10% or less	Zinc Phosphide	1314-84-7	CHOXD; CHRED; or CMBST	CHOXD; CHRED; or CMBST
U271	Benomyl ¹⁰	Benomyl	17804-35-2	0.056; or CMBST, CHOXD, BIODG or CARBN	1.4; or CMBST
U278	Bendiocarb ¹⁰	Bendiocarb	22781-23-3	0.056; or CMBST, CHOXD, BIODG or CARBN	1.4; or CMBST
U279	Carbaryl ¹⁰	Carbaryl	63-25-2	0.006; or CMBST, CHOXD, BIODG or CARBN	0.14; or CMBST
U280	Barban ¹⁰	Barban	101-27-9	0.056; or CMBST, CHOXD, BIODG or CARBN	1.4; or CMBST
U328	o-Toluidine	o-Toluidine	95-53-4	CMBST; or CHOXD fb (BIODG or CARBN); or	CMBST

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268.40 Table - Treatment Standards For Hazardous Waste					
WASTE CODE	Waste Description And Treatment/Regulatory Subcategory ¹ (11/99, 8/00, 6/04, 2/07) NOTE: fb means followed by	Regulated hazardous constituent NOTE: NA means not applicable		Waste waters	Non waste waters
		Common Name	CAS ² Number	Concentration ³ in mg/l; or Technology Code ⁴	Concentration ⁵ in mg/kg unless noted as mg/l TCLP or Technology Code ⁴
				BIODG fb CARBN.	
U353	p-Toluidine	p-Toluidine	106-49-0	CMBST; or CHOXD fb (BIODG or CARBN); or BIODG fb CARBN	CMBST
U359	2-Ethoxyethanol	2-Ethoxyethanol	110-80-5	CMBST; or CHOXD fb (BIODG or CARBN); or BIODG fb CARBN	CMBST
U364	Bendiocarb phenol ¹⁰	Bendiocarb phenol	22961-82-6	0.056; or CMBST, CHOXD, BIODG or CARBN	1.4; or CMBST
U367	Carbofuran phenol ¹⁰	Carbofuran phenol	1563-38-8	0.056; or CMBST, CHOXD, BIODG or CARBN	1.4; or CMBST
U372	Carbendazim ¹⁰	Carbendazim	10605-21-7	0.056; or CMBST, CHOXD, BIODG or CARBN	1.4; or CMBST
U373	Propham ¹⁰	Propham	122-42-9	0.056; or CMBST, CHOXD, BIODG or CARBN	1.4; or CMBST
U387	Prosulfocarb ¹⁰	Prosulfocarb	52888-80-9	0.042; or CMBST, CHOXD, BIODG or CARBN	1.4; or CMBST
U389	Triallate ¹⁰	Triallate	2303-17-5	0.042; or CMBST, CHOXD, BIODG or CARBN	1.4; or CMBST
U394	A2213 ¹⁰	A2213	30558-43-1	0.042; or CMBST, CHOXD, BIODG or CARBN	1.4; or CMBST
U395	Diethylene glycol, dicarbamate ¹⁰	Diethylene glycol, dicarbamate	5952-26-1	0.056; or CMBST, CHOXD, BIODG or CARBN	1.4; or CMBST
U404	Triethylamine ¹⁰	Triethylamine	101-44-8	0.081; or CMBST, CHOXD, BIODG or CARBN	1.5; or CMBST
U409	Thiophanate-methyl ¹⁰	Thiophanate-methyl	23564-05-8	0.056; or CMBST, CHOXD,	1.4; or CMBST

268.40 Table - Treatment Standards For Hazardous Waste					
WASTE CODE	Waste Description And Treatment/Regulatory Subcategory ¹ (11/99, 8/00, 6/04, 2/07) NOTE: fb means followed by	Regulated hazardous constituent NOTE: NA means not applicable		Waste waters	Non waste waters
		Common Name	CAS ² Number	Concentration ³ in mg/l; or Technology Code ⁴	Concentration ⁵ in mg/kg unless noted as mg/l TCLP or Technology Code ⁴
				BIODG or CARBN	
U410	Thiodicarb ¹⁰	Thiodicarb	59669-26-0	0.019; or CMBST, CHOXD, BIODG or CARBN	1.4; or CMBST
U411	Propoxur ¹⁰	Propoxur	114-26-1	0.056; or CMBST, CHOXD, BIODG or CARBN	1.4; or CMBST

Footnotes To Treatment Standard Table 268.40

- 1 The waste descriptions provided in this table do not replace waste descriptions in 261. Descriptions of Treatment/Regulatory Subcategories are provided, as needed, to distinguish between applicability of different standards.
 - 2 CAS means Chemical Abstract Services. When the waste code and/or regulated constituents are described as a combination of a chemical with its salts and/or esters, the CAS number is given for the parent compound only.
 - 3 Concentration standards for wastewaters are expressed in mg/l and are based on analysis of composite samples.
 - 4 All treatment standards expressed as a Technology Code or combination of Technology Codes are explained in detail in 268.42 Table 1 - Technology Codes and Descriptions of Technology-Based Standards.
 - 5 Except for Metals (EP or TCLP) and Cyanides (Total and Amenable) the nonwastewater treatment standards expressed as a concentration were established, in part, based upon incineration in units operated in accordance with the technical requirements of Part 264 Subpart O or Part 265 Subpart O, or based upon combustion in fuel substitution units operating in accordance with applicable technical requirements. A facility may comply with these treatment standards according to provisions in 268.40(d). All concentration standards for nonwastewaters are based on analysis of grab samples.
 - 6 Where an alternate treatment standard or set of alternate standards has been indicated, a facility may comply with this alternate standard, but only for the Treatment/Regulatory Subcategory or physical form (i.e., wastewater and/or nonwastewater) specified for that alternate standard.
 - 7 Both Cyanides (Total) and Cyanides (Amenable) for nonwastewaters are to be analyzed using Method 9010C or 9012B, found in "Test Methods for Evaluating Solid Waste, Physical/Chemical Methods, EPA Publication SW-846, as incorporated by reference in 260.11, with a sample size of 10 grams and a distillation time of one hour and 15 minutes.(2/07)
 - 8 These wastes, when rendered nonhazardous and then subsequently managed in CWA, or CWA-equivalent systems, are not subject to treatment standards. (See 268.1(c)(3)and (4)), (See R.61-87.11.D.2).
 - 9 [Reserved 8/00]
 - 10 The treatment standard for this waste may be satisfied by either meeting the constituent concentrations in this table or by treating the waste by the specified technologies: combustion, as defined by the technology code CMBST at 268.42 Table 1 of this Part, for nonwastewaters; and, biodegradation as defined by the technology code BIODG, carbon adsorption as defined by the technology code CARBN, chemical oxidation as defined by the technology code CHOXD, or combustion as defined as technology code CMBST at 268.42 Table 1 of this Part, for wastewaters. (8/00)
 - 11 For these wastes, the definition of CMBST is limited to: (1) combustion units operating under 266, (2) combustion units permitted under Part 264, Subpart O, or (3) combustion units operating under 265, Subpart O, which have obtained a determination of equivalent treatment under 268.42 (b).[Note: NA means not applicable]
- Note: The treatment standards that heretofore appeared in tables in 268.41, 268.42, and 268.43 of this part have been consolidated into the table "Treatment Standards for Hazardous Wastes." (9/01)
- 12 Disposal of K175 wastes that have complied with all applicable 268.40 treatment standards must also be macroencapsulated in accordance with 268.45 Table 1 unless the waste is placed in:
 - (1) A Subtitle C monofill containing only K175 wastes that meet all applicable 268.40 treatment standards; or
 - (2) A dedicated Subtitle C landfill cell in which all other wastes being co-disposed are at pH 6.0.

61-79.268.48. Table of Universal Treatment Standards.

Delete the following constituents from this table: Aldicarb sulfone; Barban; Bendiocarb; Benomyl; Butylate; Carbaryl; Carbenzadim; Carbofuran; Carbofuran phenol; Carbosulfan; m-Cumenyl methylcarbamate; Dithiocarbamates (total); EPTC; Formetanate hydrochloride; Methiocarb; Methomyl; Metolcarb; Mexacarbate; Molinate; Oxyamyl; Pebulate; Physostigmine; Physotigmine solicylate; Promecarb; Propham; Popoxur; Prosulfocarb; Thiodicarb; Thiophanate-methyl; Triallate; Triethylamin; Vernolate.

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268.48 - UNIVERSAL TREATMENT STANDARDS			
NOTE: NA means not applicable (8/00, 2/07)			
REGULATED CONSTITUENT Common Name	CAS ¹ Number	Wastewater Standard	Nonwastewater Standard
		Concentration ² in mg/l	Concentration ³ in mg/kg unless noted as "mg/l TCLP"
Organic Constituents			
Acenaphthylene	208-96-8	0.059	3.4
Acenaphthene	83-32-9	0.059	3.4
Acetone	67-64-1	0.28	160
Acetonitrile	75-05-8	5.6	38
Acetophenone	96-86-2	0.010	9.7
2-Acetylaminofluorene	53-96-3	0.059	140
Acrolein	107-02-8	0.29	NA
Acrylamide	79-06-1	19	23
Acrylonitrile	107-13-1	0.24	84
Aldrin	309-00-2	0.021	0.066
4-Aminobiphenyl	92-67-1	0.13	NA
Aniline	62-53-3	0.81	14
o-Anisidine (2-methoxyaniline)	90-04-0	0.010	0.66
Anthracene	120-12-7	0.059	3.4
Aramite	140-57-8	0.36	NA
alpha-BHC	319-84-6	0.00014	0.066
beta-BHC	319-85-7	0.00014	0.066
delta-BHC	319-86-8	0.023	0.066
gamma-BHC	58-89-9	0.0017	0.066
Benzene	71-43-2	0.14	10
Benz(a)anthracene	56-55-3	0.059	3.4
Benzal chloride	98-87-3	0.055	6.0
Benzo(b)fluoranthene (difficult to distinguish from benzo(k)fluoranthene)	205-99-2	0.11	6.8
Benzo(k)fluoranthene (difficult to distinguish from benzo(b)fluoranthene)	207-08-9	0.11	6.8
Benzo(g,h,i)perylene	191-24-2	0.0055	1.8
Benzo(a)pyrene	50-32-8	0.061	3.4
Bromodichloromethane	75-27-4	0.35	15
Bromomethane/Methyl bromide	74-83-9	0.11	15
4-Bromophenyl phenyl ether	101-55-3	0.055	15
n-Butyl alcohol	71-36-3	5.6	2.6
Butyl benzyl phthalate	85-68-7	0.017	28
2-sec-Butyl-4,6-dinitrophenol/Dinoseb	88-85-7	0.066	2.5
Carbon disulfide	75-15-0	3.8	4.8 mg/l TCLP
Carbon tetrachloride	56-23-5	0.057	6.0
Chlordane (alpha and gamma isomers)	57-74-9	0.0033	0.26
p-Chloroaniline	106-47-8	0.46	16
Chlorobenzene	108-90-7	0.057	6.0
Chlorobenzilate	510-15-6	0.10	NA
2-Chloro-1,3-butadiene	126-99-8	0.057	0.28
Chlorodibromomethane	124-48-1	0.057	15
Chloroethane	75-00-3	0.27	6.0
bis(2-Chloroethoxy)methane	111-91-1	0.036	7.2
bis(2-Chloroethyl)ether	111-44-4	0.033	6.0
Chloroform	67-66-3	0.046	6.0
bis(2-Chloroisopropyl)ether	39638-32-9	0.055	7.2
p-Chloro-m-cresol	59-50-7	0.018	14
2-Chloroethyl vinyl ether	110-75-8	0.062	NA
Chloromethane/Methyl chloride	74-87-3	0.19	30
2-Chloronaphthalene	91-58-7	0.055	5.6
2-Chlorophenol	95-57-8	0.044	5.7
3-Chloropropylene	107-05-1	0.036	30
Chrysene	218-01-9	0.059	3.4
p-Cresidine	120-71-8	0.010	0.66
o-Cresol	95-48-7	0.11	5.6
m-Cresol (difficult to distinguish from p-cresol)	108-39-4	0.77	5.6
p-Cresol (difficult to distinguish from m-cresol)	106-44-5	0.77	5.6
Cyclohexanone	108-94-1	0.36	0.75 mg/l TCLP
o,p'-DDD	53-19-0	0.023	0.087
p,p'-DDD	72-54-8	0.023	0.087
o,p'-DDE	3424-82-6	0.031	0.087
p,p'-DDE	72-55-9	0.031	0.087
o,p'-DDT	789-02-6	0.0039	0.087

268.48 - UNIVERSAL TREATMENT STANDARDS NOTE: NA means not applicable (8/00, 2/07)			
REGULATED CONSTITUENT Common Name	CAS ¹ Number	Wastewater Standard	Nonwastewater Standard
p,p'-DDT	50-29-3	0.0039	0.087
Dibenz(a,h)anthracene	53-70-3	0.055	8.2
Dibenz(a,e)pyrene	192-65-4	0.061	NA
1,2-Dibromo-3-chloropropane	96-12-8	0.11	15
1,2-Dibromoethane/Ethylene dibromide	106-93-4	0.028	15
Dibromomethane	74-95-3	0.11	15
m-Dichlorobenzene	541-73-1	0.036	6.0
o-Dichlorobenzene	95-50-1	0.088	6.0
p-Dichlorobenzene	106-46-7	0.090	6.0
Dichlorodifluoromethane	75-71-8	0.23	7.2
1,1-Dichloroethane	75-34-3	0.059	6.0
1,2-Dichloroethane	107-06-2	0.21	6.0
1,1-Dichloroethylene	75-35-4	0.025	6.0
trans-1,2-Dichloroethylene	156-60-5	0.054	30
2,4-Dichlorophenol	120-83-2	0.044	14
2,6-Dichlorophenol	87-65-0	0.044	14
2,4-Dichlorophenoxyacetic acid/2,4-D	94-75-7	0.72	10
1,2-Dichloropropane	78-87-5	0.85	18
cis-1,3-Dichloropropylene	10061-01-5	0.036	18
trans-1,3-Dichloropropylene	10061-02-6	0.036	18
Dieldrin	60-57-1	0.017	0.13
Diethyl phthalate	84-66-2	0.20	28
p-Dimethylaminoazobenzene	60-11-7	0.13	NA
2,4-Dimethylaniline (2,4-xylydine)	95-68-1	0.010	0.66
2,4-Dimethyl phenol	105-67-9	0.036	14
Dimethyl phthalate	131-11-3	0.047	28
Dimetilan	644-64-4	0.056	1.4
Di-n-butyl phthalate	84-74-2	0.057	28
1,4-Dinitrobenzene	100-25-4	0.32	2.3
4,6-Dinitro-o-cresol	534-52-1	0.28	160
2,4-Dinitrophenol	51-28-5	0.12	160
2,4-Dinitrotoluene	121-14-2	0.32	140
2,6-Dinitrotoluene	606-20-2	0.55	28
Di-n-octyl phthalate	117-84-0	0.017	28
Di-n-propylnitrosamine	621-64-7	0.40	14
1,4-Dioxane	123-91-1	12.0	170
Diphenylamine (difficult to distinguish from diphenylnitrosamine)	122-39-4	0.92	13
Diphenylnitrosamine (difficult to distinguish from diphenylamine)	86-30-6	0.92	13
1,2-Diphenylhydrazine	122-66-7	0.087	NA
Disulfoton	298-04-4	0.017	6.2
Endosulfan I	959-98-8	0.023	0.066
Endosulfan II	33213-65-9	0.029	0.13
Endosulfan sulfate	1031-07-8	0.029	0.13
Endrin	72-20-8	0.0028	0.13
Endrin aldehyde	7421-93-4	0.025	0.13
Ethyl acetate	141-78-6	0.34	33
Ethyl benzene	100-41-4	0.057	10
Ethyl cyanide/Propanenitrile	107-12-0	0.24	360
Ethyl ether	60-29-7	0.12	160
bis(2-Ethylhexyl) phthalate	117-81-7	0.28	28
Ethyl methacrylate	97-63-2	0.14	160
Ethylene oxide	75-21-8	0.12	NA
Famphur	52-85-7	0.017	15
Fluoranthene	206-44-0	0.068	3.4
Fluorene	86-73-7	0.059	3.4
Heptachlor	76-44-8	0.0012	0.066
Heptachlor epoxide	1024-57-3	0.016	0.066
1,2,3,4,6,7,8-Heptachlorodibenzo-p-dioxin(1,2,3,4,6,7,8-HpCDD) (6/02)	35822-46-9	0.000035	0.0025
1,2,3,4,6,7,8-Heptachlorodibenzofuran (1,2,3,4,6,7,8-HpCDF) (6/02)	67562-39-4	0.000035	0.0025
1,2,3,4,7,8,9-Heptachlorodibenzofuran (1,2,3,4,7,8,9-HpCDF) (6/02)	55673-89-7	0.000035	0.0025
Hexachlorobenzene	118-74-1	0.055	10
Hexachlorobutadiene	87-68-3	0.055	5.6
Hexachlorocyclopentadiene	77-47-4	0.057	2.4
HxCDDs (All Hexachlorodibenzo-p-dioxins)	NA	0.000063	0.001
HxCDFs (All Hexachlorodibenzofurans)	NA	0.000063	0.001
Hexachloroethane	67-72-1	0.055	30

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268.48 - UNIVERSAL TREATMENT STANDARDS NOTE: NA means not applicable (8/00, 2/07)			
REGULATED CONSTITUENT Common Name	CAS ¹ Number	Wastewater Standard	Nonwastewater Standard
Hexachloropropylene	1888-71-7	0.035	30
Indeno (1,2,3-c,d) pyrene	193-39-5	0.0055	3.4
Iodomethane	74-88-4	0.19	65
Isobutyl alcohol	78-83-1	5.6	170
Isodrin	465-73-6	0.021	0.066
Isosafrole	120-58-1	0.081	2.6
Kepone	143-50-0	0.0011	0.13
Methacrylonitrile	126-98-7	0.24	84
Methanol	67-56-1	5.6	0.75 mg/l TCLP
Methapyrilene	91-80-5	0.081	1.5
Methoxychlor	72-43-5	0.25	0.18
3-Methylcholanthrene	56-49-5	0.0055	15
4,4-Methylene bis(2-chloroaniline)	101-14-4	0.50	30
Methylene chloride	75-09-2	0.089	30
Methyl ethyl ketone	78-93-3	0.28	36
Methyl isobutyl ketone	108-10-1	0.14	33
Methyl methacrylate	80-62-6	0.14	160
Methyl methanesulfonate	66-27-3	0.018	NA
Methyl parathion	298-00-0	0.014	4.6
Naphthalene	91-20-3	0.059	5.6
2-Naphthylamine	91-59-8	0.52	NA
o-Nitroaniline	88-74-4	0.27	14
p-Nitroaniline	100-01-6	0.028	28
Nitrobenzene	98-95-3	0.068	14
5-Nitro-o-toluidine	99-55-8	0.32	28
o-Nitrophenol	88-75-5	0.028	13
p-Nitrophenol	100-02-7	0.12	29
N-Nitrosodiethylamine	55-18-5	0.40	28
N-Nitrosodimethylamine	62-75-9	0.40	2.3
N-Nitroso-di-n-butylamine	924-16-3	0.40	17
N-Nitrosomethylethylamine	10595-95-6	0.40	2.3
N-Nitrosomorpholine	59-89-2	0.40	2.3
N-Nitrosopiperidine	100-75-4	0.013	35
N-Nitrosopyrrolidine	930-55-2	0.013	35
1,2,3,4,6,7,8,9-Octachlorodibenzo-p-dioxin (OCDD) (6/02)	3268-87-9	0.000063	0.005
1,2,3,4,6,7,8,9-Octachlorodibenzofuran (OCDF) (6/02)	39001-02-0	0.000063	0.005
Parathion	56-38-2	0.014	4.6
Total PCBs (sum of all PCB isomers, or all Aroclors) ⁸	1336-36-3	0.10	10
Pentachlorobenzene	608-93-5	0.055	10
PeCDDs (All Pentachlorodibenzo-p-dioxins)	NA	0.000063	0.001
PeCDFs (All Pentachlorodibenzofurans)	NA	0.000035	0.001
Pentachloroethane	76-01-7	0.055	6.0
Pentachloronitrobenzene	82-68-8	0.055	4.8
Pentachlorophenol	87-86-5	0.089	7.4
Phenacetin	62-44-2	0.081	16
Phenanthrene	85-01-8	0.059	5.6
Phenol	108-95-2	0.039	6.2
1,3-Phenylenediamine	108-45-2	0.010	0.66
o-Phenylenediamine	95-54-5	0.056	5.6
Phorate	298-02-2	0.021	4.6
Phthalic acid	100-21-0	0.055	28
Phthalic anhydride	85-44-9	0.055	28
Pronamide	23950-58-5	0.093	1.5
Pyrene	129-00-0	0.067	8.2
Pyridine	110-86-1	0.014	16
Safrole	94-59-7	0.081	22
Silvex/2,4,5-TP	93-72-1	0.72	7.9
1,2,4,5-Tetrachlorobenzene	95-94-3	0.055	14
TCDDs (All Tetrachlorodibenzo-p-dioxins)	NA	0.000063	0.001
TCDFs (All Tetrachlorodibenzofurans)	NA	0.000063	0.001
1,1,1,2-Tetrachloroethane	630-20-6	0.057	6.0
1,1,2,2-Tetrachloroethane	79-34-5	0.057	6.0
Tetrachloroethylene	127-18-4	0.056	6.0
2,3,4,6-Tetrachlorophenol	58-90-2	0.030	7.4
Toluene	108-88-3	0.080	10
Toxaphene	8001-35-2	0.0095	2.6

268.48 - UNIVERSAL TREATMENT STANDARDS		NOTE: NA means not applicable (8/00, 2/07)	
REGULATED CONSTITUENT Common Name	CAS ¹ Number	Wastewater Standard	Nonwastewater Standard
Tribromomethane/Bromoform	75-25-2	0.63	15
1,2,4-Trichlorobenzene	120-82-1	0.055	19
1,1,1-Trichloroethane	71-55-6	0.054	6.0
1,1,2-Trichloroethane	79-00-5	0.054	6.0
Trichloroethylene	79-01-6	0.054	6.0
Trichloromonofluoromethane	75-69-4	0.020	30
2,4,5-Trichlorophenol	95-95-4	0.18	7.4
2,4,6-Trichlorophenol	88-06-2	0.035	7.4
2,4,5-Trichlorophenoxyacetic acid/2,4,5-T	93-76-5	0.72	7.9
1,2,3-Trichloropropane	96-18-4	0.85	30
1,1,2-Trichloro-1,2,2-trifluoroethane	76-13-1	0.057	30
tris-(2,3-Dibromopropyl) phosphate	126-72-7	0.11	0.10
Vinyl chloride	75-01-4	0.27	6.0
Xylenes-mixed isomers (sum of o-, m-, and p-xylene concentrations)	1330-20-7	0.32	30
Inorganic Constituents			
Antimony	7440-36-0	1.9	1.15 mg/l TCLP
Arsenic	7440-38-2	1.4	5.0 mg/l TCLP
Barium	7440-39-3	1.2	21 mg/l TCLP
Beryllium	7440-41-7	0.82	1.22 mg/l TCLP
Cadmium	7440-43-9	0.69	0.11 mg/l TCLP
Chromium (Total)	7440-47-3	2.77	0.60 mg/l TCLP
Cyanides (Total) ⁴	57-12-5	1.2	590
Cyanides (Amenable) ⁴	57-12-5	0.86	30
Fluoride ⁵	16984-48-8	35	NA
Lead	7439-92-1	0.69	0.75 mg/l TCLP
Mercury - Nonwastewater from Retort	7439-97-6	NA	0.20 mg/l TCLP
Mercury - All Others	7439-97-6	0.15	0.025 mg/l TCLP
Nickel	7440-02-0	3.98	11. mg/l TCLP
Selenium ⁷	7782-49-2	0.82	5.7 mg/l TCLP
Silver	7440-22-4	0.43	0.14 mg/l TCLP
Sulfide ⁵	18496-25-8	14	NA
Thallium	7440-28-0	1.4	0.20 mg/l TCLP
Vanadium ⁵	7440-62-2	4.3	1.6 mg/l TCLP
Zinc ⁵	7440-66-6	2.61	4.3 mg/l TCLP

FOOTNOTES TO TABLE UTS - * Note: N/A means "not applicable."

- 1 CAS means Chemical Abstract Services. When the waste code and/or regulated constituents are described as a combination of a chemical with its salts and/or esters, the CAS number is given for the parent compound only.
- 2 Concentration standards for wastewaters are expressed in mg/l and are based on analysis of composite samples.
- 3 Except for Metals (EP or TCLP) and Cyanides (Total and Amenable) the nonwastewater treatment standards expressed as a concentration were established, in part, based upon incineration in units operated in accordance with the technical requirements of part 264, subpart O or part 265, subpart O, or based upon combustion in fuel substitution units operating in accordance with applicable technical requirements. A facility may comply with these treatment standards according to provisions in 268.40(d). All concentration standards for nonwastewaters are based on analysis of grab samples.
- 4 Both Cyanides (Total) and Cyanides (Amenable) for nonwastewaters are to be analyzed using Method 9010 or 9012, found in "Test Methods for Evaluating Solid Waste, Physical/Chemical Methods," EPA Publication SW-846, as incorporated by reference in 260.11, with a sample size of 10 grams and a distillation time of one hour and 15 minutes.
- 5 These constituents are not "underlying hazardous constituents" in characteristic wastes, according to the definition at 268.2(i).
- 6 [Reserved 8/00]
- 7 This constituent is not an underlying hazardous constituent as defined at 268.2(i) of this part because its UTS level is greater than its TC level, thus a treated selenium waste would always be characteristically hazardous, unless it is treated to below its characteristic level.
- 8 This standard is temporarily deferred for soil exhibiting a hazardous characteristic due to D004-D011 only.

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Fiscal Impact Statement:

The regulations will have no substantial fiscal or economic impact on the State or its political subdivisions. Implementation of this regulation will not require additional resources beyond those allowed. There is no anticipated additional cost by the Department or State Government due to any inherent requirements of this regulation.

Statement of Need and Reasonableness:

This Statement of Need and Reasonableness was determined by staff analysis pursuant to S.C. Code Section 1-23-115(C)(1)-(3) and (9)-(11).

DESCRIPTION OF REGULATION:

Purpose: The amendments of R.61-79 will support the Department's goal of promoting and protecting the health of the public and the environment in a more efficient and effective manner. These amendments make technical corrections and correct typographical errors, provide opportunities for the regulated community to use best demonstrated available technologies for treatment of a specific type of waste, reduce overall compliance costs for industry and revise the definition of solid waste.

Legal Authority: The legal authority for R.61-79 is S.C. Code Section 44-56-30.

Plan for Implementation: Upon approval by the S.C. General Assembly and publication in the *State Register* as a final regulation, an electronic copy of R.61-79, that includes these latest amendments, will be published on the Department's Regulation Development website at: <http://www.scdhec.gov/Agency/RegulationsAndUpdates/LawsAndRegulations/>. At this site, click on the Land and Waste Management category and scan down to R.61-79. Subsequently, this regulation will be published on the S.C. Legislature website in the S.C. Code of Regulations. Printed copies will be made available at cost by request through the DHEC Freedom of Information Office. The Department will also send an email to stakeholders and affected facilities and to other interested parties.

DETERMINATION OF NEED AND REASONABLENESS OF THE REGULATION BASED ON ALL FACTORS HEREIN AND EXPECTED BENEFITS:

1. The Department has amended R.61-79 to adopt the "Removal of Saccharin and Its Salts from the Lists of Hazardous Constituents," published on January 18, 2011 at 75 FR 78918-78926. The rule removes saccharin and its salts from the lists of hazardous constituents and commercial chemical products which are hazardous wastes when discarded or intended to be discarded.

2. The Department has amended R.61-79 to adopt the "Academic Laboratories Generator Standards Technical Corrections," published in the Federal Register on December 20, 2010 at 75 FR 79304-79308. The rule makes technical corrections to Subpart K, 40 CFR part 262, which established an alternative set of generator requirements applicable to laboratories owned by eligible academic entities that are flexible and protective, and address the specific nature of hazardous waste generation and accumulation in these laboratories.

3. The Department has amended R.61-79 to adopt the "Revision of the Land Disposal Treatment Standards for Carbamate Wastes," published in the Federal Register on August 11, 2011 at 76 FR 34147-34157. The rule provides as an alternative standard the use of the best demonstrated available technologies (BDAT) for treating hazardous wastes from the production of carbamates and carbamate commercial chemical products, off-specification or manufacturing chemical intermediates and container residues that become hazardous wastes when they are discarded or intended to be discarded. In addition, this action removes carbamate Regulated Constituents from the table of Universal Treatment Standards.

4. The Department has amended R.61-79 to adopt the “Hazardous Waste Technical Corrections and Clarifications,” published in the Federal Register on May 14, 2012 at 77 FR 22229-22232. The rule corrects a typographical error in the entry “K107” in the table listing hazardous wastes from specific sources at 40 CFR 261.32; and makes a conforming change at 40 CFR 266.20(b) to clarify that a recycling facility must keep a one-time certification and notification related to recyclable materials being used in a manner constituting disposal.

5. The Department has amended R.61-79 to adopt the “Conditional Exclusions for Solvent Contaminated Wipes,” published in the Federal Register on January 31, 2014 at 78 FR 46448-46485. The rule revises the definition of solid waste to conditionally exclude solvent contaminated wipes that are cleaned and reused. It also revises the definition of hazardous waste to conditionally exclude solvent-contaminated wipes that are disposed of. The purpose of this final rule is to provide a consistent regulatory framework that is appropriate to the level of risk posed by solvent-contaminated wipes in a way that maintains protection of human health and the environment, while reducing overall compliance costs for industry, many of which are small businesses. This rule is considered to be less stringent than the existing federal rules. Authorized states whose programs include less stringent requirements than today’s final rule are required to modify their programs to maintain consistency with the federal program per the revisions of 40 CFR 271.21(e). In addition, any states that delineate their program for reusable wipes in guidance documents or interpretive letters will need to promulgate enforceable regulations, as required by 40 CFR 271.21(a). Authorized states may specify a different standard or test method for determining that solvent contaminated wipes contain no free liquid (in lieu of the Paint Filter Liquids test).

6. The Department has amended R.61-79 to incorporate three recommended changes identified in its internal 2013 review for the South Carolina Governor’s Regulatory Review Task Force (Executive Order #2013-02) in order to provide consistency with existing federal regulations.

The intent of these amendments is to simplify and correct certain issues in our regulations to support the Department’s goal of promoting and protecting the health of the public and the environment in a more efficient and effective manner. There would be no detrimental effect on the environment and public health if the amendments to R. 61-79 are adopted.

DETERMINATION OF COSTS AND BENEFITS:

There is no anticipated increase in cost to the State or its political subdivisions resulting from this revision. Amendments to R.61-79 will benefit the regulated community by correcting typographical errors, making technical corrections, making them consistent with existing federal regulations and clarifying the regulations, removing Saccharin and its salts from the list of hazardous constituents and revising the definition of hazardous waste to conditionally exclude solvent-contaminated wipes that are disposed of maintains protection of human health and the environment, while creating flexibility and reducing compliance costs for generators. Providing as an alternative standard the use of best demonstrated available technologies for treating carbamate wastes will help prevent facilities that treat them from potentially having to face curtailment of operations.

UNCERTAINTIES OF ESTIMATES:

There are no uncertainties of estimates relative to the costs to the State or its political subdivisions.

EFFECT ON ENVIRONMENT AND PUBLIC HEALTH:

The revisions to R.61-79 will provide continued protection of the environment and public health.

DETRIMENTAL EFFECT ON THE ENVIRONMENT AND PUBLIC HEALTH IF THE REGULATION IS NOT IMPLEMENTED:

There is no anticipated detrimental effect on the environment and/or public health associated with these revisions. Rather, the State’s authority to implement programs for which the State has been delegated authority,

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which are beneficial to public health and the environment, would be compromised if these amendments were not adopted in South Carolina. Permit streamlining and regulatory text clarification will have a positive effect on both the environment and public health.

Statement of Rationale:

R.61-79 contains requirements for hazardous waste management, including identification of waste, standards for generators, transporters, and owners/operators of treatment, storage, and disposal (TSD) facilities, procedures for permits for TSD facilities, investigation and cleanup of hazardous waste, and closure/post-closure requirements. The regulation is promulgated pursuant to the S.C. Hazardous Waste Management Act, Section 44-56-30. As an authorized state program, the regulation must be equivalent to and consistent with the U.S. EPA's regulations under the federal Resource Conservation and Recovery Act (RCRA), 42 U.S.C. Section 6901 *et. seq.* EPA periodically promulgates regulations that are either mandatory for authorized state programs to adopt or maintain program equivalency or are optional for states because the changes are less stringent than the current federal regulation. R. 61-79 has been amended numerous times since it was first promulgated in 1984 to adopt federal regulations and to establish state-only requirements.

Document No. 4468

DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL

CHAPTER 61

Statutory Authority: 1976 Code Sections 44-56-10 *et seq.*

61-11. Hypodermic Devices

61-18. Drugs and Devices

Synopsis:

In the interest of good government and efficiency, the Department is repealing R.61-11, *Hypodermic Devices*, and R.61-18, *Drugs and Devices*. These regulations have become obsolete and are no longer needed or enforceable. See Statement of Need and Reasonableness and Rationale herein.

A Notice of Drafting for the proposed repeals was published in the *State Register* on May 23, 2014.

Instructions: Repeal R.61-11 and R. 61-18 in the S.C. Code of Regulations.

Text:

61-11. [Repealed]

61-18. [Repealed]

Fiscal Impact Statement:

The repeal of R.61-11 and R.61-18 will have no substantial fiscal or economic impact on the State and its political subdivisions.

Statement of Need and Reasonableness:

This Statement of Need and Reasonableness complies with Section 1-23-115(c)(1)-(3) and (9)-(11), S.C. Code of Laws, 1976, as amended.

DESCRIPTION OF REGULATION: R.61-11, *Hypodermic Devices*, and R.61-18, *Drugs and Devices*.

Purpose: The purpose is to repeal Regulations 61-11 and 61-18 because they have become obsolete and are no longer needed. See Determination of Need and Reasonableness below.

Legal Authority: Code Sections 44-1-140 and 39-23-10 et seq., S.C. Code of Laws, 1976, as amended; 2002 Act No. 365, Section 5.

Plan for Implementation: Upon final approval of the S.C. General Assembly and publication in the State Register as final, these regulations will be repealed.

DETERMINATION OF NEED AND REASONABLENESS OF THE REGULATION BASED ON ALL FACTORS HEREIN AND EXPECTED BENEFITS:

Regulation 61-11 was promulgated pursuant to Article 7, Title 44, Chapter 53, "Hypodermic Needles and Syringes." The Article was repealed by 2002 Act No. 365, Section 5, effective September 26, 2002, with the exception of Section 44-53-930 addressing retail sales by pharmacists, Section 44-53-950 excepting veterinarians and licensed durable medical equipment providers, and Section 44-53-960 outlining penalties. R.61-18 was promulgated pursuant to Title 39, Chapter 23, "Adulterated, Misbranded or New Drugs and Devices." Regulation 61-18 is not necessary because the items it regulates are currently addressed in state statute and federal law. Therefore, in the interest of good government and efficiency, the Department proposes to repeal these regulations because they are no longer needed.

DETERMINATION OF COSTS AND BENEFITS:

The repeal of R.61-11 and R.61-18 will have no substantial fiscal or economic impact on the State and its political subdivisions or the regulated community.

UNCERTAINTIES OF ESTIMATES:

No known uncertainties.

EFFECT ON ENVIRONMENT AND PUBLIC HEALTH:

There will be no environmental or public health effect.

DETRIMENTAL EFFECT ON THE ENVIRONMENT AND PUBLIC HEALTH IF THE REGULATION IS NOT IMPLEMENTED:

There will not be a detrimental effect on the environment or public health. However, repeal of these regulations is necessary to clarify they are no longer valid or enforceable.

Statement of Rationale:

Upon Review of Department regulations, state and federal laws, and the status of R.61-11 pursuant to 2002 Act No. 365, Section 5, it was determined that Regulations 61-11 and 61-18 should be repealed because they are obsolete and no longer necessary.

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Document No. 4461

DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL CHAPTER 61

Statutory Authority: 1976 Code Sections 44-7-110 through 44-7-394, 44-37-40, 44-37-50, and 63-7-40

61-16. Minimum Standards for Licensing Hospitals and Institutional General Infirmaries

Synopsis:

Regulation 61-16, *Minimum Standards for Licensing Hospitals and Institutional General Infirmaries*, has sections pertaining to Perinatal Care Services. This revision is limited to provisions in the regulation relating to perinatal care. The Department amended the Perinatal Care Services Sections to account for evolving practices and to improve overall quality and effectiveness.

This amendment revises Section 1300, Perinatal Services, of *State Register* Document 4430 at <http://www.scstatehouse.gov/regs/4430.docx> that completed legislative review May 17, 2014, and took effect as law by publication in the *State Register* on June 27, 2014.

A Notice of Drafting was published in the *State Register* on March 28, 2014.

Section-by-Section Discussion of Revisions

Statutory authority for the regulation was added under the title of the regulation and before the table of contents for consistency with other regulations.

61-16.1301 Newborn Hearing Screening

This section was revised to clarify sections 61-16.1301.A, B and C to replace references of “must” and insert “shall.”

61-16.1302 Shaking infant video & infant CPR information for parents and caregivers of newborn infants and adoptive parents

This section was revised to clarify sections 61-16.1302.A and B to replace references of “must” and insert “shall.” In addition, section 61-16.1302.C was revised to conform to the statutory authority of Shaking Infant Video & Infant CPR, Section 44-37-50.

61-16-1303 Providing a Safe Haven for Abandoned Babies

This section was revised to clarify sections 61-16.1303 to replace reference of “must” and insert “shall.”

61-16.1305 Perinatal Organization

This section was revised to delete the Level II Enhanced (IIE) level of care designation and add Level IV designation in sections 61-16.1305.A and 61-16.1305.B. This section is revised to clarify a review of neonate mortality.

61-16.1306 Designation of Inpatient Perinatal Care Services

This section was revised to clarify a Basic Perinatal Care Center with Well Newborn Nursery (Level I), a Specialty Perinatal Center with Special Care Nursery (Level II) and Subspecialty Perinatal Center with Neonatal Intensive Care Unit (Level III). This section was revised to delete Enhanced Perinatal Center (Level IIE) requirements. This section adds language to clarify a Complex Neonatal Intensive Care Unit (Level IV).

61-16.1306.A

This section revises the licensing requirements for a Basic Perinatal Center with Well Newborn Nursery (Level I).

61-16.1306.B

This amendment clarifies the language for infants requiring ventilation support. This amendment adds language to this section to allow a certified Neonatal Nurse Practitioner to provide coverage for shared neonatology coverage. The added language is “For shared neonatology coverage, a certified Neonatal Nurse Practitioner having responsibilities limited to a single center and in house may provide coverage for that center.”

61-16.1306.C

This amendment revises this section to add language regarding the consultation services of a board-certified neonatologist. “A board-certified or board-eligible neonatologist shall be in the hospital or on site within 30 minutes, 24 hours a day.” This amendment revises ventilatory support for over twenty-four (24) hours. This amendment adds the requirement for data collection for outcomes measurement and quality improvement.

61-16.1306.D

This amendment revises the language requirement for ongoing education, coordination and development from the Regional Perinatal Centers to the Level I, Level II, and Level III facilities.

61-16.1306.E

This amendment adds the Complex Neonatal Intensive Care Unit (Level IV) designation requirements.

61-16.1307 Personnel

This section was revised to delete the Level IIE references and add Level III and Level IV requirements.

61-16.1313 Evaluation of Perinatal Care

This section revises Section 61-16.1313.A to delete the Level references and replace with all hospitals. This amendment revises Section 61-16.1313.C to delete “Each hospital” and replace with Level I and Level II hospitals. Additionally, Section 61-16.1313.E was revised to delete Level IIE reference.

Instructions: Amend R.61-16 pursuant to each individual instruction provided with the text of the amendments below.

Text:

61-16. Minimum Standards for Licensing Hospitals and Institutional General Infirmaries.

Add statutory authority under the title of R.61-16 and before the Table of Contents.

Statutory Authority: 1976 Code Sections 44-7-110 through 44-7-394, 44-37-40, 44-37-50, and 63-7-40.

Revise Section 61-16.1301 to read:

1301. Newborn Hearing Screening.

A. A facility that averages greater than 100 deliveries a year shall conduct a hearing screening on each newborn prior to discharge. In addition, the facility shall provide educational information about the screening procedure, the importance of the screening and the importance of having a complete audiobiological evaluation after discharge if the need is indicated.

B. If a facility averages fewer than 100 deliveries a year, a hearing screening is not required for each newborn, but the facility shall give the parents of each newborn educational information concerning the hearing screening procedure and the importance of having the screening procedure after discharge.

C. Each facility required to conduct newborn hearing screening shall regularly report the results of the screening to the Department in the required format.

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Revise Section 61-16.1302 to read:

1302. Shaking infant video & infant CPR information for parents and caregivers of newborn infants and adoptive parents.

A. A facility shall provide to the parents of each newborn baby delivered in the facility a video presentation on the dangers associated with shaking infants and young children. The facility shall also make available information on the importance of parents and caregivers learning infant CPR.

B. The facility shall request that the maternity patient, the father, or the primary caregiver view the video. Those persons whom the facility requests to view the video shall sign a document prescribed by the Department of Health and Environmental Control stating that they have been offered an opportunity to view the video.

C. The facility shall only use a video approved by the Director, or his/her designee, of the Department of Health and Environmental Control.

Revise Section 61-16.1303 to read:

1303. Providing a Safe Haven for Abandoned Babies.

Facilities and outpatient facilities shall:

A. Accept temporary physical custody of an infant under thirty days of age who is voluntarily left by a person who does not express an intent to return for the infant and the circumstances create a reasonable belief that a person does not intend to return for the infant.

B. Be in full compliance with EMTALA rules and regulations and perform any act necessary to protect the physical health or safety of the infant.

C. Offer the person information concerning the legal effect of leaving the infant by delivering to the person the information brochure supplied by the state DSS. Ask the person to identify any parent other than the person leaving the infant. Attempt to obtain from the person information concerning the infant's background and medical history as specified in the forms provided by DSS and appropriate forms available from facility files.

D. Using the DSS form, an attempt must be made to get information concerning use of controlled substances by the infant's mother and other pertinent health information which might determine medical care required by the infant.

E. If the person does not wish to provide or is unable to provide the information to the facility, the person must be offered the DSS form with a prepaid envelope supplied to the facility by DSS.

F. No later than the close of the first business day, after the date on which the facility takes possession of the infant, the facility must notify DSS that it has taken temporary physical custody of the infant. DSS will have legal custody of the infant upon receipt of this notice and DSS will assume physical custody no later than 24 hours after receiving notice that the infant is ready for discharge.

Revise Sections 61-16.1305 to read:

1305. Perinatal Organization.

A. Each hospital providing perinatal services shall request designation as a Level I, II, III, or IV perinatal hospital, or regional perinatal center (RPC) by letter to the Department. Initially, a hospital shall demonstrate capability to comply with requirements of a particular designation by submitting to the Department

documentation pertaining to the request for desired designation. For licensure renewals, along with maintaining compliance with the requirements of Section 1306, the hospital shall have birth weight-specific neonatal mortality data readily available for Department review relative to hospitals in the state of the same designation.

B. Each Level I, II, III, and IV hospital shall maintain and document a relationship with its designated RPC for consultation, transport and continuing education. All patients shall be transferred to the appropriate RPC when medically appropriate, if beds are available. This agreement/relationship shall include the ability to share data, as appropriate, related to these functions.

C. Labor and delivery shall occur in a hospital capable of meeting the expected needs of both the mother and the neonate. Ongoing risk assessment shall occur to determine the appropriate level of care.

Revise Section 61-16.1306 to read:

1306. Designation of Inpatient Perinatal Care Services.

A. Basic Perinatal Center with Well Newborn Nursery (Level I). Level I hospitals shall provide services for normal uncomplicated pregnancies. Level I hospitals shall identify maternity patients requiring transfer to a facility providing the appropriate level of care for the fetus, consult with the RPC on such matters, and offer a basic level of newborn care to infants at low risk. Level I hospitals shall have personnel who provide care for physiologically stable infants born at or beyond 35 weeks of gestation and stabilize ill newborn infants born at less than 35 weeks of gestation until they can be transferred to a facility where the appropriate level of neonatal care is provided. Level I hospitals shall have personnel and equipment available to provide neonatal resuscitation at every delivery and to evaluate and provide routine postnatal care for healthy term newborn infants. Level I hospitals shall have the capability to begin an emergency cesarean delivery within an interval based on timing that best incorporates maternal and fetal risks and benefits. When it is anticipated or determined that these criteria will not be or have not been met, consultation and a plan of care shall be initiated and mutually agreed upon with the RPC and documented in the medical record, immediately after the patient is stabilized. Level I hospitals shall provide care of postpartum conditions and make provisions of accommodations and policies that allow families, including their other children, to be together in the hospital following birth. Appropriate anesthesia, radiology, and laboratory and blood bank services shall be available on a twenty-four (24) hour basis. Management shall include emergency resuscitation and/or stabilization for both maternal and neonatal patients in preparation for transfer/transport for more specialized services. Hospitals at this level shall not provide care or services which are designated only for higher level hospitals, except under unforeseen, emergent circumstances. In this situation, the Department shall be notified within 24 hours.

B. Specialty Perinatal Center with Special Care Nursery (Level II). In addition to complying with all requirements of Section 1306.A, Level II hospitals shall provide services for both normal and selected high-risk obstetrical and neonatal patients. Level II hospital care shall include management of neonates who are at least 32 weeks of gestation with an anticipated birth weight of at least 1500 grams and problems expected to resolve rapidly (neonates not in need of sub-specialty services on an urgent basis). Level II hospitals shall provide care for infants convalescing after intensive care. Level II hospital shall stabilize infants born before 32 weeks of gestation and weigh less than 1500 grams until transfer to a neonatal intensive care facility. Level II hospitals shall have experienced personnel capable of providing continuous positive pressure airway pressure or mechanical ventilation for a brief period (less than 24 hours) or both until the infant's condition improves or the infant can be transferred to a higher-level facility. Level II hospitals shall have equipment (e.g. portable x-ray equipment, blood gas laboratory) and personnel (e.g. physicians, specialized nurses, respiratory therapists, radiology technicians, and laboratory technicians) available at all times to provide ongoing care and address emergencies. Referral to a higher level of care should occur for all infants when needed, for medical or subspecialty intervention. Support personnel shall include respiratory therapists, radiology technicians, laboratory technicians, and a lactation consultant. A board-certified or board-eligible pediatrician shall be in the hospital or on site within 30 minutes, 24 hours a day. There shall be no limit on the duration of Nasopharyngeal Continuous Positive Airway Pressure (NCPAP) or Nasal Prong Continuous Positive Airway Pressure

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(NPCPAP) when cared for by a neonatologist. The provision of CPAP or mechanical ventilation beyond the immediate stabilization period requires the immediate availability of respiratory therapists with neonatal training (including intubation of premature infants), nursing support with training to identify and respond to complications of ventilation, and the immediate availability of personnel and equipment to evacuate a pneumothorax. Level II hospitals with a board certified or board eligible neonatologist having responsibilities limited to a single center and in house or within 30 minutes of the unit at all times may provide care for patients requiring mechanical ventilation for up to 24 hours. For shared neonatology coverage, a certified Neonatal Nurse Practitioner having responsibilities limited to a single center and in house may provide coverage for that center. Neonates requiring the initiation of mechanical ventilator support beyond 24 hours of age shall be referred to the RPC. Neonates shall not require high-frequency ventilation support. These hospitals shall manage no less than an average of 500 deliveries annually, calculated over the previous three years based on the individual hospital statistics. This calculation shall include the number of maternal transfers made prior to delivery to higher level perinatal hospitals. A Level II hospital shall not admit outborn neonates into its nursery without prior concurrence with the RPC. Level II units shall not transport neonates between hospitals. Hospitals at this level shall not provide care or services which are designated only for higher level hospitals, except under unforeseen, emergent circumstances. In this situation, the Department shall be notified within 24 hours.

C. Subspecialty Perinatal Center with Neonatal Intensive Care Unit (Level III). In addition to complying with all requirements of Sections 1306.A through 1306.B, Level III hospitals shall provide all aspects of perinatal care, including intensive care and a range of continuously available subspecialty consultation as recommended in the most recent edition of the *Guidelines for Perinatal Care* (GPC) by the American Academy of Pediatrics (AAP) and The American College of Obstetricians and Gynecologists. Level III hospitals shall provide care for mothers and infants at less than 32 weeks gestation, estimated fetal weight less than 1500 grams, and anticipated complex medical or surgical conditions for mother or infant that may require sub-specialty services. Level III hospitals shall also provide care for infants born at less than 32 weeks of gestation and weigh less than 1500 grams at birth or have actual or anticipated complex medical or surgical conditions regardless of gestational age. Level III hospital care shall include expertise in neonatology and maternal-fetal medicine. Level III neonatal intensive care units (NICUs) shall include continuously available personnel (neonatologists, neonatal nurses, and respiratory therapists) and equipment available to provide life support as long as needed. Level III facilities shall provide ongoing assisted ventilation for periods longer than 24 hours, which may include conventional ventilation, high-frequency ventilation, and inhaled nitric oxide. Level III hospitals shall provide services and care for women and fetuses at high risk, both admitted and transferred to the facility. Level III hospitals shall have advanced respiratory support and physiologic monitoring equipment, laboratory and imaging facilities, nutrition and pharmacy support with pediatric expertise, social services, and pastoral care. Pediatric ophthalmology services and an organized program for the monitoring, treatment, and follow-up of retinopathy of prematurity shall also be readily available in Level III hospitals. Level III hospitals shall have the capability to perform advanced imaging with interpretation on an urgent basis, including computed tomography, magnetic resonance imaging, and echocardiography. Level III hospitals shall also have the capability to perform major surgery on site or at a closely related institution. A board-certified or board-eligible neonatologist shall be in the hospital or on site within 30 minutes, 24 hours a day. A board-certified maternal-fetal medicine specialist (perinatologist) shall be available for supervision and consultation, 24 hours a day. Perinatal consultation requirements may be met via telemedicine arrangements with a RPC. In addition to the Level II capabilities, Level III hospitals shall have the staffing and technical capability to manage high-risk obstetric and complex neonatal patients, including neonates requiring prolonged ventilatory support, surgical intervention, or 24-hour availability of multispecialty management. Hospitals with Level III designation shall manage no less than an average of 1500 deliveries annually, calculated over the previous three years, and at least an average of 100 neonate admissions who weigh less than 1500 grams each, require ventilatory support for over twenty-four (24) hours, or require surgery based on individual hospital statistics. This calculation shall include the number of maternal transfers made prior to delivery to higher level perinatal hospitals. The NICU budget shall include support for outcomes measurement, including data collection and membership in a multi-institutional collaborative quality improvement data base. Level III hospitals shall collect data to assess outcomes within their facility and to compare with other hospitals within their level. Hospitals at this level shall not provide

additional care or services designated only for RPC's, or perform neonatal transport, except under unforeseen, emergent circumstances. In this situation, the Department shall be notified within 24 hours.

D. Regional Perinatal Center with Neonatal Intensive Care Units (Level III) (RPC). In addition to complying with all requirements of Sections 1306.A through 1306.C, the RPC shall provide consultative, outreach, and support services to Level I, II, and III hospitals in the region. The RPC shall manage no less than an average of 2000 deliveries annually, calculated over the previous three years. Personnel qualified to manage obstetric or neonatal emergencies shall be in-house. A board-certified maternal-fetal medicine specialist (perinatologist) shall be in the hospital or on site within 30 minutes for supervision and consultation, 24 hours a day. The RPC shall participate in residency programs for obstetrics, pediatrics, and/or family practice. Physician-to-physician consultation shall be available 24 hours a day for Level I, II, and III hospitals. Regional Perinatal Centers shall coordinate the development and implementation of professional continuing education to maintain competency and provide education to other facilities within the region, facilitate transport from the perinatal centers to the regional perinatal center and back transport when possible, and collect data on long-term outcomes to evaluate the effectiveness of delivery of perinatal care services and the efficacy of new therapies. The RPC shall provide a perinatal transport system that operates 24 hours a day, seven days a week, and return transports neonates to lower level perinatal hospitals when the neonates' condition and care requirements are within the capability of those hospitals.

E. Complex Neonatal Intensive Care Unit (Level IV). In addition to complying with all requirements of Sections 1306.A through 1306.C, Level IV hospitals shall include additional capabilities and considerable experience in the care of the most complex and critically ill newborn infants and have pediatric medical and surgical specialty consultants available 24 hours a day. Level IV hospitals shall have capability to perform surgical repair of complex congenital or acquired conditions (e.g. Congenital malformations that require cardiopulmonary bypass with or without extracorporeal membrane oxygenation). Level IV hospitals shall maintain a full range of pediatric medical subspecialists, pediatric surgical subspecialists, and pediatric anesthesiologists at the facility. Not all Level IV hospitals need to act as regional centers. Regional organization of perinatal health care services requires that there be coordination in the development of specialized services, professional continuing education to maintain competency, facilitation of opportunities for transport and return transport, and collection of data on long-term outcomes to evaluate both the effectiveness of delivery of perinatal health care services and the safety and efficacy of new therapies. Level IV hospitals shall collect data to assess outcomes within their facility, and to compare with other hospitals within their level, if applicable.

Revise 61-16.1307 to read:

1307. Personnel.

A. Detailed components of support services and medical, nursing and ancillary staffing for each level shall meet the recommendations outlined in the most recent edition of the *Guidelines for Perinatal Care*.

B. The following medical specialists and subspecialists shall have medical staff credentials and/or written consultative agreements as follows:

1. Level I shall include:

a. Membership: Physician designated as physician-in-charge of obstetric services, physician designated for supervision of newborn care, anesthesia personnel with credentials to administer obstetric anesthesia available within 30 minutes, 24-hours a day, one person capable of initiating neonatal resuscitation available at every delivery.

b. Consultation: Obstetrician, pediatrician, general surgeon.

2. Level II, in addition to Level I requirements, shall include:

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- a. Membership: General surgeon, pathologist, radiologist, obstetrician, pediatrician, and anesthesiologist;
- b. Consultation: Maternal-fetal medicine specialist, neonatologist, and pediatric surgeon.

3. Level III and RPC, in addition to Level II requirements, shall include:

a. Membership: Maternal-fetal medicine specialist or effective consultation with Maternal-Fetal medicine specialist, (available 24 hours a day, 7 days a week) via telemedicine, obstetrician or radiologist with special interest and competence in maternal disease and its complications, pediatric radiologist, anesthesiologist with perinatal training and/or experience; pathologists with special competence in placental, fetal, and neonatal disease, and pediatric surgeon.

b. Urgent Consultation: Pediatric subspecialists including cardiology, neurology, hematology, genetics, endocrinology, nephrology, gastroenterology-nutrition, infectious diseases, pulmonology, immunology, pathology, metabolism and pharmacology. Pediatric surgical subspecialists, to include cardiovascular, neurosurgery, orthopedics, ophthalmology, urology and otolaryngology.

c. For Level III hospitals: Pediatric medical subspecialists, pediatric anesthesiologists, pediatric surgeons, and pediatric ophthalmologists may be at the site or at a closely related institution by prearranged consultative agreement. Prearranged consultative agreements can be performed using, for example, telemedicine technology, or telephone consultation, or both from a distant location.

4. Level IV, in addition to Level III requirements, shall include: Membership and on-site: Maternal-fetal medicine specialist, obstetrician or radiologist with special interest and competence in maternal disease and its complications, pediatric radiologist, anesthesiologist with perinatal training and/or experience; pathologists with special competence in placental, fetal, and neonatal disease, and pediatric surgeon.

Revise 61-16.1313 to read:

1313. Evaluation of Perinatal Care.

A. Review of maternal and neonate mortality and morbidity shall be conducted at least every three months by the medical staff or designated committee, regardless of the size or designation of the perinatal service. A perinatal mortality and morbidity review committee composed of representatives from the pediatric, obstetrical, and nursing staffs, with additional participation from other professionals, depending upon the cases to be reviewed, shall be established at all perinatal centers.

B. In all perinatal centers, selected case reviews shall include, but not be limited to:

1. Analysis of total perinatal mortality with identification of deaths attributable to various categories of complication;
2. Analysis of perinatal morbidity and related factors.

C. Level I and II hospitals shall review all live births or fetal/neonatal deaths in which the neonate weighed at least 350 grams and less than 1500 grams, utilizing the Department's *Very Low Birthweight Self-monitoring Tool*. Each completed self-monitoring DHEC form shall be retained by the facility and a copy made available to the Department as specified in the self-monitoring tool.

D. Each event shall be evaluated for potential opportunities for intervention with the intervention and follow-up described, if applicable. Written minutes of committee meetings shall be maintained and made available to the Department for review

E. Each Level I, II, and III perinatal center shall annually review and document the findings from these case reviews with its designated RPC. Minutes of these meetings shall be maintained and made available to the Department for review.

Fiscal Impact Statement:

The regulation will have no substantial fiscal or economic impact on the sale or its political subdivisions. Implementation of this regulation will not require additional resources. There is no anticipated additional cost by the Department or State government due to any inherent requirements of this regulation.

Statement of Need and Reasonableness:

The Department's Bureau of Health Facilities Licensing formulated this statement determined by analysis pursuant to S.C. Code Ann Section 1-23-115 C(1)-(3) and (9)-(11) (2005).

DESCRIPTION OF REGULATION: R.61-16, *Minimum Standards for Licensing Hospitals and Institutional General Infirmaries*.

Purpose: This revision is limited to provisions in the regulation relating to perinatal care. The Perinatal Care Services Sections were revised to account for evolving practices and to improve overall quality and effectiveness.

Legal Authority: 1976 Code Sections 44-7-110 through 44-7-394, 44-37-40, 44-37-50, and 63-7-40.

Plan for Implementation: Upon approval from the S.C. General Assembly and publication of this amendment as a final regulation in the South Carolina State Register, a copy of Regulation 61-16, that incorporates these revisions, will be made available electronically on the Department's regulation development website at <http://www.scdhec.gov/Agency/RegulationsAndUpdates/LawsAndRegulations/> under the Health Regulations category and subsequently on the South Carolina Legislature Online website in the S.C. Code of Regulations. Printed copies will be available for a fee from the Department's Freedom of Information Office. Staff will educate the regulated community on the provisions of the Act and the requirements of the regulation.

DETERMINATION OF NEED AND REASONABLENESS OF THE REGULATION BASED ON ALL FACTORS HEREIN AND EXPECTED BENEFITS:

The Department last amended the perinatal sections of R.61-16 on April 26, 2002. SC Code Section 1-23-120(J) (Supp. 2012) requires state agencies to perform a review of its regulations every five years and update them if necessary.

Issues found in the review, requests from the perinatal community and the necessity for overall updates render these amendments needed and reasonable. The amendments improve the perinatal hospital designation assignments by creating a new designation level and following the *Guidelines for Perinatal Care*. The regulation is an overall improvement for public health by seeking to secure volume requirements without jeopardizing other providers who currently provide services.

DETERMINATION OF COSTS AND BENEFITS:

Internal Costs: Implementation of this regulation will not require additional resources. There is no anticipated additional cost by the Department or State government due to any inherent requirements of these amendments.

External Costs: There are no external costs anticipated.

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External Benefits: The amendments update the perinatal sections for hospitals providing perinatal care while maintaining the interests of patient health and safety and lessening provider burdens. The amendments allow the community to maintain current perinatal care while adding new hospital designations.

UNCERTAINTIES OF ESTIMATES:

None.

EFFECT ON THE ENVIRONMENT AND PUBLIC HEALTH:

There will be no effect on the environment.

The amendments will reasonably account for evolving practices and improve overall quality and effectiveness of the perinatal community. The amendments will improve perinatal care within South Carolina by allowing new hospital perinatal care designations and be aligned with the current *Guidelines for Perinatal Care*.

DETRIMENTAL EFFECT ON THE ENVIRONMENT AND PUBLIC HEALTH IF THE REGULATION IS NOT IMPLEMENTED:

There would not be a detrimental effect on the environment.

If the revision is not implemented, unnecessary burdens will be placed on hospital facilities that provide perinatal care services.

Statement of Rationale:

The Department revised this regulation pursuant to the S.C. Code Ann. Section 1-23-120(J) (Supp. 2012) requirement that state agencies perform a review of its regulations every five years and update them if necessary. The regulation introduces a new designation to be aligned with the current *Guidelines for Perinatal Care*. The regulation is an overall improvement for public health by seeking to secure volume requirements without jeopardizing other providers who currently provide services.

Document No. 4482

DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL
CHAPTER 61

Statutory Authority: 1976 Code Sections 13-7-10, 13-7-40 and 13-7-45 et seq.

61-65. Particle Accelerators (Title C)

Synopsis:

This comprehensive amendment to R.61-65 will update the Regulation pertaining to Particle Accelerators and facilities that utilize Particle Accelerators. General areas of this revision include, clarifying and simplifying the regulations, adding new definitions as required and deleting regulations that are no longer applicable. Specific areas include the added requirement for ventilation systems for Particle Accelerators that create radioactive material, clarifying required and/or accepted interlock systems, and clarifying the requirements and responsibilities of the Radiation Safety Officer. In addition, amendments include amending the fee structure in accordance with the governing statute. Also stylistic changes were made for clarity, readability, grammar, punctuation, definitions, references, codification and overall improvement of the text of the regulation.

A Notice of Drafting for this regulation amendment was published in the *State Register* on July 25, 2014.

See Section-by-Section discussion below and the Statements of Need and Reasonableness and Rationale herein for more detailed information on these amendments.

Section-by-Section Discussion of Revisions:

The table of contents was changed to reflect the proposed regulations.

The language “TITLE C,” located after the table of contents and before the text of PART I, was deleted due to redundancy. The title of the regulation is stated at the beginning of the document and has not changed.

R.61-65 RHC 1.1

The title of this section was revised by adding the text “Purpose and” and by deleting the “.” between “RHC 1.1” and “Purpose and Scope.” The content of this section was revised to include persons who transfer particle accelerators and to clarify that these regulations apply to industrial use particle accelerators. Regulations for human use particle accelerators are addressed in R.61-64, X-Rays (Title B). The content of this section was moved from RHC 1.1 to RHC 1.1.2.

R.61-65 RHC 1.1.1

This subsection was added to clarify all applicable situations in which these regulations apply and to the types of particle accelerators covered by these regulations.

R.61-65 RHC 1.1.2

This subsection was moved from RHC 1.1 to RHC 1.1.2 and reworded for clarity.

R.61-65 RHC 1.1.3

This subsection was added to clarify which regulations apply to whom. This ensures the registrant will be aware of and subject to parts of R.61-64, X-Rays (Title B) and R.61-63, Radioactive Materials (Title A).

R.61-65 RHC 1.2

This section was changed from “Definitions of Terms as Used in This Part” to “Definitions” and revised grammatically by deleting the “.” between “RHC 1.2” and “Definitions.” This section was moved from RHC 1.2 to Part VIII “Definitions.” Definitions for the regulation were moved to Part VIII for easy reference. The title of this section was replaced with “Prohibited Use” and revised grammatically by deleting the “.” between “RHC 1.2” and “Prohibited Use.”

R.61-65 RHC 1.2.1

This subsection was revised to update the definition for “Accelerator facility” as outlined by R.61-64, X-Rays (Title B). This subsection was moved from RHC 1.2.1 to RHC 8.1 to be contained in Part VIII “Definitions.” This subsection was replaced with provisions clarifying lawful possession and use of particle accelerators.

R.61-65 RHC 1.2.2

This subsection was revised to update the definition for “Act” as outlined by R.61-64, X-Rays (Title B). This subsection was moved from RHC 1.2.2 to RHC 8.2 to be contained in Part VIII “Definitions.” This subsection was replaced by moving the updated wording from RHC 4.7 to RHC 1.2.2.

R.61-65 RHC 1.2.3

This subsection was revised to update the term “Agency” to “Department” and to update the definition to reflect the current title of DHEC. This subsection was moved from RHC 1.2.3 to RHC 8.7 to be contained in Part VIII “Definitions.” This subsection was replaced with provisions clarifying the use of sources of radiation. This allows the Department to prevent harm to public health.

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R.61-65 RHC 1.2.4

This subsection was deleted in its entirety. The defined term “Calendar quarter” is not present in the regulations. This subsection was replaced with provisions clarifying the conditions in which a particle accelerator and connected equipment must be placed in operation and used. This subsection was also replaced with additional provisions clarifying conditions requiring a person to be registered with the Department.

R.61-65 RHC 1.2.5

This subsection was revised to update the definition for “Occupational dose” as outlined by R.61-64, X-Rays (Title B). This subsection was moved from RHC 1.2.5 to RHC 8.18 to be contained in Part VIII “Definitions.”

R.61-65 RHC 1.2.6

This subsection was revised to update the definition for “Particle Accelerator” as outlined by R.61-64, X-Rays (Title B). This subsection was moved from RHC 1.2.6 to RHC 8.21 to be contained in Part VIII “Definitions.”

R.61-65 RHC 1.2.7

This subsection was revised to update the definition for “Person” as outlined by R.61-64, X-Rays (Title B). This subsection was moved from RHC 1.2.7 to RHC 8.22 to be contained in Part VIII “Definitions.”

R.61-65 RHC 1.2.8

This subsection was revised to update the definition for “Personnel monitoring program” as outlined by R.61-64, X-Rays (Title B). This subsection was moved from RHC 1.2.8 to RHC 8.23 to be contained in Part VIII “Definitions.”

R.61-65 RHC 1.2.9

This subsection was revised to update the definition for “Radiation” as outlined by R.61-64, X-Rays (Title B). This subsection was moved from RHC 1.2.9 to RHC 8.26 to be contained in Part VIII “Definitions.”

R.61-65 RHC 1.2.10

This subsection was revised to update the term “Radiation protection officer” to “Radiation safety officer” and to update the definition as outlined by R.61-64, X-Rays (Title B). This subsection was moved from RHC 1.2.10 to RHC 8.28 to be contained in Part VIII “Definitions.”

R.61-65 RHC 1.2.11

This subsection was revised to update the definition for “Restricted area” as outlined by R.61-64, X-Rays (Title B). This subsection was moved from RHC 1.2.11 to RHC 8.32 to be contained in Part VIII “Definitions.”

R.61-65 RHC 1.2.12

This subsection was moved from RHC 1.2.12 to RHC 8.35 to be contained in Part VIII “Definitions.”

R.61-65 RHC 1.2.13

This subsection was revised to update the definition for “Survey” as outlined by R.61-64, X-Rays (Title B). This subsection was moved from RHC 1.2.13 to RHC 8.36 to be contained in Part VIII “Definitions.”

R.61-65 RHC 1.2.14

This subsection was deleted in its entirety. The defined term “These regulations” is not defined in the regulations.

R.61-65 RHC 1.2.15

This subsection was revised to update the definition for “Unrestricted area” as outlined by R.61-64, X-Rays (Title B). This subsection was moved from RHC 1.2.15 to RHC 8.39 to be contained in Part VIII “Definitions.”

R.61-65 RHC 1.2.16

This subsection was deleted in its entirety. The defined term “Whole body” is not present in the regulations.

R.61-65 RHC 1.3

This section was deleted in its entirety. This section is addressed in Part VIII “Definitions.” This section was replaced by RHC 1.4 and revised grammatically by deleting the “.” between “RHC 1.3” and “Inspections.”

R.61-65 RHC 1.3.1

This subsection was revised to update the definition for “Dose” as outlined by R.61-64, X-Rays (Title B). This subsection was moved from RHC 1.3.1 to RHC 8.8 to be contained in Part VIII “Definitions.” This subsection was replaced by moving RHC 1.4.1 to RHC 1.3.1 with updated wording.

R.61-65 RHC 1.3.2

This subsection was deleted in its entirety. The defined term “rad” is addressed in RHC 8.32. This subsection was replaced by moving RHC 1.4.3 to RHC 1.3.2 with updated wording.

R.61-65 RHC 1.3.3

This subsection was revised to update the definition for “Rem” (to include the table) as outlined by R.61-64, X-Rays (Title B). This subsection was moved from RHC 1.3.3 to RHC 8.31 to be contained in Part VIII “Definitions.” This subsection was replaced with provisions clarifying the Department’s right to enter property and the conditions thereof.

R.61-65 RHC 1.3.3.1

This subsection subitem was moved from RHC 1.3.3.1 to RHC 8.31 in the form of a table.

R.61-65 RHC 1.3.3.2

This subsection subitem was moved from RHC 1.3.3.2 to RHC 8.31 in the form of a table.

R.61-65 RHC 1.3.3.3

This subsection subitem was moved from RHC 1.3.3.3 to RHC 8.31 in the form of a table.

R.61-65 RHC 1.3.4

This subsection was deleted in its entirety. The defined term “roentgen” is not present in the regulations. This subsection was replaced with provisions clarifying the Department’s exception to the Health Information Portability and Accountability Act.

R.61-65 RHC 1.4

This section was moved from RHC 1.4 to RHC 1.3. This section was replaced by moving RHC 1.5 to RHC 1.4 and revised grammatically by deleting the “.” between “RHC 1.4” and “Tests and Surveys.”

R.61-65 RHC 1.4.1

This subsection was updated by replacing instances of “Agency” with “Department” and moved from RHC 1.4.1 to RHC 1.3.1. This subsection was replaced by moving RHC 1.5.1 to RHC 1.4.1.

R.61-65 RHC 1.4.2

This subsection was updated for clarity and moved from RHC 1.4.2 to RHC 1.8.3. This subsection was replaced by moving RHC 1.5.2 to RHC 1.4.2.

R.61-65 RHC 1.4.2.1

This subsection subitem was moved from RHC 1.5.2.1 to RHC 1.4.2.1.

R.61-65 RHC 1.4.2.2

This subsection subitem was moved from RHC 1.5.2.2 to RHC 1.4.2.2.

R.61-65 RHC 1.4.2.3

This subsection subitem was moved from RHC 1.5.2.3 to RHC 1.4.2.3.

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R.61-65 RHC 1.4.2.4

This subsection subitem was moved from RHC 1.5.2.4 to RHC 1.4.2.4.

R.61-65 RHC 1.4.3

This subsection was updated by replacing instances of “Agency” with “Department” and moved from RHC 1.4.3 to RHC 1.3.2. This subsection was replaced with provisions clarifying documentation and availability requirements.

R.61-65 RHC 1.4.4

This subsection was added to clarify requirements surrounding radiation survey instruments. Periodic maintenance, operational checks, and user training ensure proper operation of the instrument for the detection of radiation.

R.61-65 RHC 1.4.4.1

This subsection subitem was added to clarify radiation survey instrument capability. This ensures the user is receiving accurate measurements when measuring a radiation field.

R.61-65 RHC 1.4.4.2

This subsection subitem was added to clarify the maintenance schedule for radiation survey instruments. This ensures proper operation of the instrument, thereby providing accurate measurements.

R.61-65 RHC 1.4.4.2.1, RHC 1.4.4.2.2, RHC 1.4.4.2.3, and RHC 1.4.4.2.4

These subsection subitems were added to clarify calibration requirements for radiation survey instruments. These requirements help ensure instruments provide users with accurate measurements.

R.61-65 RHC 1.4.4.2.5

This subsection subitem was added to clarify calibration documentation maintenance. This helps ensure the availability of records for review.

R.61-65 RHC 1.4.4.3

This subsection subitem was added to clarify the availability of the radiation survey instrument manufacturer’s instructions. This provides the user with the necessary information for the proper use of the instrument.

R.61-65 RHC 1.4.4.3.1, RHC 1.4.4.3.2, RHC 1.4.4.3.3

These subsection subitems were added to clarify radiation survey instrument operation, training, and documentation requirements. These help to ensure the user of the instrument is familiar with the manufacturer’s instructions and his/her competence is documented for review.

R.61-65 RHC 1.4.4.3.4

This subsection subitem was added to clarify requirements for operational checks on radiation survey instruments. This helps the operator ensure the instrument is operable prior to using it to measure radiation and may prevent unnecessary exposure to the user.

R.61-65 RHC 1.4.5

This subsection was added to clarify record retention for calibrations and instrumentation checks. This helps ensure records are maintained for review by the Department.

R.61-65 RHC 1.5

This section was moved from RHC 1.5 to RHC 1.4. This section was replaced by moving RHC 1.6 to RHC 1.5 and revised grammatically by deleting the “.” between “RHC 1.5” and “Exemptions.”.

R.61-65 RHC 1.5.1

This subsection was moved to RHC 1.4.1. This subsection was replaced by moving RHC 1.6.1 to RHC 1.5.1.

R.61-65 RHC 1.5.2

This subsection was updated by replacing instances of “Agency” with “Department” and moved to RHC 1.4.2. This subsection was replaced with provisions clarifying conditions for granting an exemption.

R.61-65 RHC 1.5.2.1

This subsection subitem was moved from RHC 1.5.2.1 to RHC 1.4.2.1. This subsection was replaced with provisions clarifying conditions for granting an exemption.

R.61-65 RHC 1.5.2.2

This subsection subitem was moved from RHC 1.5.2.2 to RHC 1.4.2.2. This subsection was replaced with provisions clarifying conditions for granting an exemption.

R.61-65 RHC 1.5.2.3

This subsection subitem was moved from RHC 1.5.2.3 to RHC 1.4.2.3. This subsection was replaced with provisions clarifying conditions for granting an exemption.

R.61-65 RHC 1.5.2.4

This subsection subitem was moved from RHC 1.5.2.4 to RHC 1.4.2.4.

R.61-65 RHC 1.6

This section was moved from RHC 1.6 to RHC 1.5. This section was replaced by moving RHC 1.7 to RHC 1.6 and revised grammatically by deleting the “.” between “RHC 1.6” and “Additional Requirements.”

R.61-65 RHC 1.6.1

This subsection was revised by updating requirements for “Exemptions” as outlined in R.61-64, X-Rays (Title B) and by replacing instances of “Agency” with “Department”. This subsection was moved from RHC 1.6.1 to RHC 1.5.1. This subsection was replaced by moving RHC 1.7.1 to RHC 1.6.1.

R.61-65 RHC 1.6.2

This subsection was added to clarify authorization to inspect and investigate potential health hazards. This allows the Department to evaluate potential health hazards caused by the operation of radiation installations.

R.61-65 RHC 1.6.3

This subsection was added to clarify the information required for the Department to review a request to operate equipment not currently covered in the regulations. This allows the Department to evaluate potentially harmful equipment prior to being operated.

R.61-65 RHC 1.6.4

This subsection was moved from RHC 3.3.1 to RHC 1.6.4 with revised requirements.

R.61-65 RHC 1.6.4.1

This subsection subitem was moved from RHC 4.3.1.1 to RHC 1.6.4.1.

R.61-65 RHC 1.6.4.2

This subsection subitem was moved from RHC 4.3.1.2 to RHC 1.6.4.2 with revised requirements.

R.61-65 RHC 1.6.4.3

This subsection subitem was moved from RHC 4.3.1.3 to RHC 1.6.4.3.

R.61-65 RHC 1.6.4.4

This subsection subitem was moved from RHC 4.3.1.4 to RHC 1.6.4.4 with revised requirements.

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R.61-65 RHC 1.7

This section was moved from RHC 1.7 to RHC 1.6. This section was replaced by moving RHC 1.8 to RHC 1.7 and revised grammatically by deleting the “.” between “RHC 1.7” and “Violations.”.

R.61-65 RHC 1.7.1

This subsection was updated by replacing instances of “Agency” with “Department” and moved from RHC 1.7.1 to RHC 1.6.1. This subsection was replaced by moving RHC 1.71 with RHC 1.8.1.

R.61-65 RHC 1.7.2

This subsection was added to clarify notification requirements following a violation. This allows the person 20 days to respond to each violation with a plan of action to correct the violation.

R.61-65 RHC 1.7.3

This subsection was added to clarify corrective action requirements. This allows the person 60 days to correct the violation and notify the Department in writing.

R.61-65 RHC 1.7.4

This subsection was added to clarify the authority of the Department to identify and act upon violations of the Act and regulations.

R.61-65 RHC 1.7.5

This subsection was added to clarify the assessing of civil penalties by the Department. This allows the Department to impose civil penalties.

R.61-65 RHC 1.8

This section was moved from RHC 1.8 to RHC 1.7. This section was replaced with provisions for the enforcement of the Act and these regulations. This allows the Department to take action if a registrant fails to comply with regulations.

R.61-65 RHC 1.8.1

This subsection was updated by replacing instances of “Agency” with “Department” and moved from RHC 1.8.1 to RHC 1.7.1. This subsection was replaced with provisions outlining action that will be taken by the Department in the event the Act or these regulations have been violated. This allows the Department to take action if a registrant fails to comply with regulations.

R.61-65 RHC 1.8.1.1

This subsection subitem was added to clarify the action the Department will take upon discovery of a violation. This provides the registrant with written notification of the violation.

R.61-65 RHC 1.8.1.1.1

This subsection subitem was added to clarify contents of the written notification. This provides the registrant with a listing of each regulation found to be in violation.

R.61-65 RHC 1.8.1.1.2

This subsection subitem was added to clarify contents of the written notification. This provides the registrant with a reason the violation is listed.

R.61-65 RHC 1.8.1.1.3

This subsection subitem was added to clarify the way in which the registrant is to respond to the written notification. This helps to ensure the Department is aware of corrective action being taken to correct violations.

R.61-65 RHC 1.8.1.1.4

This subsection subitem was added to clarify the establishment of a time frame by the Department for the registrant to submit an action plan. This helps to ensure the violations are corrected in a timely manner.

R.61-65 RHC 1.8.1.2

This subsection subitem was added to clarify action to be taken by the Department in the event the registrant fails to comply with the written notification. This allows the Department to enforce the Act and regulations through additional enforcement actions.

R.61-65 RHC 1.8.1.3

This subsection subitem was added to clarify steps to be taken by the Department in the event further enforcement actions are pursued. This helps ensure continuity when pursuing enforcement actions.

R.61-65 RHC 1.8.1.3.1

This subsection subitem was added to list a step that may be taken by the Department in the event further enforcement actions are pursued. This helps ensure continuity when pursuing enforcement actions.

R.61-65 RHC 1.8.1.3.1.1, RHC 1.8.1.3.1.2, RHC 1.8.1.3.1.3, and RHC 1.8.1.3.1.4

These subsection subitems were added to list possible results of an administrative order being issued. This helps ensure continuity when pursuing enforcement actions.

R.61-65 RHC 1.8.1.3.2 and RHC 1.8.1.3.3

These subsection subitems were added to list steps that may be taken by the Department in the event further enforcement actions are pursued. This helps ensure continuity when pursuing enforcement actions.

R.61-65 RHC 1.8.2

This subsection was added to clarify the conditions in which the Department may impound a source of radiation. This reduces risk or further risk to the health of the individuals involved.

R.61-65 RHC 1.8.3

This subsection was added by moving RHC 1.4.2 to RHC 1.8.3.

R.61-65 RHC 1.9

This section was revised grammatically by deleting the “.” between “RHC 1.9” and “Records.”

R.61-65 RHC 1.9.1

This subsection was updated to include provisions concerning the availability and disposal of records. This helps ensure records are available for Department review.

R.61-65 RHC 1.9.2

This subsection was added to clarify the information required to be maintained by the registrant. This helps ensure records are available for Department review.

R.61-65 RHC 1.9.2.1

This subsection subitem was added to clarify the information required to be maintained by the registrant. This information allows the Department to verify equipment onsite.

R.61-65 RHC 1.9.2.2

This subsection subitem was added to clarify the information required to be maintained by the registrant. This information allows the Department to verify the completion of required tests and surveys and the registration status of those persons performing them.

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R.61-65 RHC 1.9.2.3

This subsection subitem was added to clarify the information required to be maintained by the registrant. This allows the registrant to verify correspondence with the Department.

R.61-65 RHC 1.9.3

This subsection was added to clarify the information required to be maintained by the registrant. This allows the Department to verify inventory onsite.

R.61-65 RHC 1.9.4

This subsection was added to clarify record accuracy requirements. This prevents false statements from being made on the records required to be maintained by the registrant.

R.61-65 RHC 1.10

This section was revised grammatically by deleting the “.” between “RHC 1.10” and “Communications.”

R.61-65 RHC 1.10.1

This subsection was revised to update instances of “Agency” to “Department” and the current contact information for the Bureau of Radiological Health.

R.61-65 RHC 1.10.2

This subsection was added to clarify provisions for providing false information to the Department. This helps ensure information provided to the Department is accurate.

R.61-65 RHC 1.11

This section was moved from RHC 1.11 to RHC 2.7. This section was replaced with provisions for the administration of civil penalties. This provides guidelines for the administration of civil penalties.

R.61-65 RHC 1.11.1

This subsection was revised by replacing the term “accelerator” with “particle accelerator” and deleting the phrase “in accordance with a schedule of fees issued by the Department.” Statements concerning vendor and out-of-state facility fees and the due date of the registration fee were also added. The fees will remain the same as outlined in Part II of R.61-64, X-Rays (Title B) and is not in addition to current fees. This subsection was moved from RHC 1.11.1 to RHC 2.7.1. This subsection was replaced with provisions clarifying the criteria used in the assessment of civil penalties.

R.61-65 RHC 1.11.1.1

This subsection subitem was added to list the criteria used in the assessment of civil penalties. This allows the Department to consider the severity of the violation when assessing civil penalties.

R.61-65 RHC 1.11.1.2

This subsection subitem was added to list the criteria used in the assessment of civil penalties. This allows the Department to consider previous compliance history when assessing civil penalties.

R.61-65 RHC 1.11.1.3

This subsection subitem was added to list the criteria used in the assessment of civil penalties. This allows the Department to consider the amount assessed to deter future violations when assessing civil penalties.

R.61-65 RHC 1.11.1.4

This subsection subitem was added to list the criteria used in the assessment of civil penalties. This allows the Department to consider efforts to correct the violation when assessing civil penalties.

R.61-65 RHC 1.11.1.5

This subsection subitem was added to list the criteria used in the assessment of civil penalties. This allows the Department to consider any other factors when assessing civil penalties.

R.61-65 RHC 1.11.2

This subsection was moved from RHC 1.11.2 to RHC 2.7.4. This subsection was replaced with provisions clarifying the severity levels in which the violations will be categorized. This allows the Department to categorize the severity levels of the violations based on the categories presented within the subsection subitems that follow.

R.61-65 RHC 1.11.2.1

This subsection subitem was added to clarify the major violation category. This violation category is the most severe and is considered when determining civil penalty amounts using the penalty matrix.

R.61-65 RHC 1.11.2.2

This subsection subitem was added to clarify the moderate violation category. This violation category is less severe than the major category and is considered when determining civil penalty amounts using the penalty matrix.

R.61-65 RHC 1.11.2.3

This subsection subitem was added to clarify the minor violation category. This violation category is the least severe and is considered when determining civil penalty amounts using the penalty matrix.

R.61-65 RHC 1.11.2.4

This subsection subitem was added to clarify the way in which a violation will be characterized. This allows the Department to best characterize a violation or group of violations on a case by case basis.

R.61-65 RHC 1.11.3

This subsection was reworded for clarity and moved from RHC 1.11.3 to RHC 2.7.2. This subsection was replaced with provisions clarifying factors that may influence adjustments to the values listed in the penalty matrix. This allows the Department to apply adjustments based on factors presented within the subsection subitems that follow.

R.61-65 RHC 1.11.3.1

This subsection subitem was added to clarify provisions concerning a factor that may influence adjustments to the values listed in the penalty matrix. This allows the Department to apply adjustments based on the conditions presented within this subsection subitem.

R.61-65 RHC 1.11.3.2

This subsection subitem was added to clarify provisions concerning a factor that may influence adjustments to the values listed in the penalty matrix. This allows the Department to apply adjustments based on the conditions presented within this subsection subitem.

R.61-65 RHC 1.11.3.3

This subsection subitem was added to clarify provisions concerning a factor that may influence adjustments to the values listed in the penalty matrix. This allows the Department to apply adjustments based on the conditions presented within this subsection subitem.

R.61-65 RHC 1.11.3.4

This subsection subitem was added to clarify provisions concerning a factor that may influence adjustments to the values listed in the penalty matrix. This allows the Department to apply adjustments based on the conditions presented within this subsection subitem.

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R.61-65 RHC 1.11.3.5

This subsection subitem was added to clarify provisions concerning a factor that may influence adjustments to the values listed in the penalty matrix. This allows the Department to apply adjustments based on the conditions presented within this subsection subitem.

R.61-65 RHC 1.11.3.6

This subsection subitem was added to clarify the nature of the factors and the violations when considering the assessment of civil penalties. This allows the Department to consider all factors when assessing civil penalties.

R.61-65 RHC 1.11.4

This subsection was reworded for clarity and moved from RHC 1.11.4 to RHC 2.7.3. This subsection was replaced with provisions clarifying the schedule that will be used to issue civil penalties. This provides the Department with a matrix when considering the assessment of civil penalties.

R.61-65 RHC 1.11.4.1

This subsection subitem was added to present the penalty matrix that will be used when assessing civil penalties. This provides the Department with a standard when considering the assessment of civil penalties.

R.61-65 RHC 1.11.4.2

This subsection subitem was added to clarify the authority of the Department to impose civil penalties. This provides conditions that may cause civil penalties to be issued.

R.61-65 RHC 1.11.4.2.1

This subsection subitem was added to clarify a condition that may cause civil penalties to be issued by the Department. These conditions present a significant health hazard and should be deterred.

R.61-65 RHC 1.11.4.2.2

This subsection subitem was added to clarify a condition that may cause civil penalties to be issued by the Department. These conditions present a significant health hazard and should be deterred.

R.61-65 RHC 1.11.4.2.3

This subsection subitem was added to clarify a condition that may cause civil penalties to be issued by the Department. These conditions present a significant health hazard and should be deterred.

R.61-65 RHC 1.11.4.2.4

This subsection subitem was added to clarify a condition that may cause civil penalties to be issued by the Department. These conditions present a significant health hazard and should be deterred.

R.61-65 RHC 1.11.5

This subsection was reworded for clarity and moved from RHC 1.11.5 to RHC 2.7.5.

R.61-65 PART II

The title of this part was deleted in its entirety and replaced by moving RHC 4.2 to Part II. The new title was bolded and capitalized for stylistic purposes.

R.61-65 RHC 2.1

The title of this section was revised grammatically by deleting the “.” between “RHC 2.1” and “Purpose and Scope.” The content of this section was deleted in its entirety. The content of this section is addressed in Part III of R.61-64, X-Rays (Title B). The content of this section was replaced with revised requirements moved from RHC 4.1 to RHC 2.1.

R.61-65 RHC 2.1.1

This subsection was added to clarify each person responsible for registering industrial use particle accelerators and facilities. This allows the Department to track potential radiation producing machines.

R.61-65 RHC 2.1.2

This subsection was moved from RHC 4.8.1 to RHC 2.1.2 and revised for stylistic purposes.

R.61-65 RHC 2.2

The title of this section was deleted in its entirety and replaced with “Exemptions.” The title of this section was revised grammatically by deleting the “.” between “RHC 2.2” and “Exemptions.”

R.61-65 RHC 2.2.1

This subsection was deleted in its entirety. This subsection is addressed in R.61-64, X-Rays (Title B) as referenced through Appendix A “Occupational Dose Limits for Adults (Part III).” This subsection was replaced with revised requirements moved from RHC 4.12.1 to RHC 2.2.1.

R.61-65 RHC 2.2.2

This subsection was deleted in its entirety. Registrants are not permitted to exceed current federal occupational dose limits. This subsection was replaced with revised requirements moved from RHC 4.12.2 to RHC 2.2.2.

R.61-65 RHC 2.2.2.1

This subsection subitem was deleted in its entirety. Registrants are not permitted to exceed current federal occupational dose limits.

R.61-65 RHC 2.2.2.2

This subsection subitem was deleted in its entirety. Registrants are not permitted to exceed current federal occupational dose limits.

R.61-65 RHC 2.2.2.3

This subsection subitem was deleted in its entirety. Registrants are not permitted to exceed current federal occupational dose limits.

R.61-65 RHC 2.2.3

This subsection was deleted in its entirety. Registrants are not permitted to exceed current federal occupational dose limits. This subsection was replaced with text explaining any facility that falls under federal jurisdiction is exempt from registration.

R.61-65 RHC 2.2.4

This subsection was moved from RHC 4.12.3 to RHC 2.2.4 and revised for clarity.

R.61-65 RHC 2.3

This section was deleted in its entirety. Occupational dose limits for minors is addressed in Part III of R.61-64, X-Rays (Title B). This section was replaced with “Facility Registration Approval” and revised grammatically by deleting the “.” between “RHC 2.3” and “Facility Registration Approval.”

R.61-65 RHC 2.3.1

This subsection was added to require any facility planning to install a particle accelerator to follow the provisions required by RHC 2.3.1.1 through RHC 2.3.1.3.

R.61-65 RHC 2.3.1.1

This subsection subitem was added to require the facility to submit information necessary to register.

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R.61-65 RHC 2.3.1.1.1

This subsection subitem was added to clarify the necessary information to be submitted in order to register the facility.

R.61-65 RHC 2.3.1.1.2

This subsection subitem was added to clarify the necessary information to be submitted in order to register the facility.

R.61-65 RHC 2.3.1.1.3

This subsection subitem was added to clarify the necessary information to be submitted in order to register the facility.

R.61-65 RHC 2.3.1.1.4

This subsection subitem was added to clarify the necessary information to be submitted in order to register the facility.

R.61-65 RHC 2.3.1.1.5

This subsection subitem was added to clarify the necessary information to be submitted in order to register the facility.

R.61-65 RHC 2.3.1.1.6

This subsection subitem was added to clarify the necessary information to be submitted in order to register the facility.

R.61-65 RHC 2.3.1.2

This subsection subitem was added stating a facility registration approval will be issued upon review and approval of the information required by RHC 2.3.1.1.

R.61-65 RHC 2.3.1.3

This subsection subitem was added to require a facility to be issued a facility registration approval prior to installing a particle accelerator. The facility must be registered before equipment can be registered.

R.61-65 RHC 2.4

This section was deleted in its entirety. Dose limits for individual members of the public is addressed in Part III of R.61-64, X-Rays (Title B). The title of this section was replaced with "Equipment Registration Requirements, Users of Particle Accelerators" and revised grammatically by deleting the "." between "RHC 2.4" and "Equipment Registration Requirements, Users of Particle Accelerators." The content of this section was deleted in its entirety. The radiation symbol is addressed in Part III of R.61-64, X-Rays (Title B).

R.61-65 RHC 2.4.1

This subsection was deleted in its entirety. Dose limits for individual members of the public is addressed in Part III of R.61-64, X-Rays (Title B). This subsection was replaced with requirements clarifying persons possessing a particle accelerator must register the machine within thirty days of acquisition.

R.61-65 RHC 2.4.1.1

This subsection subitem was deleted in its entirety. Dose limits for individual members of the public is addressed in Part III of R.61-64, X-Rays (Title B). This subsection subitem was replaced with text clarifying the issuance of a registration sticker upon registration of a particle accelerator and that it is to be placed on the control panel.

R.61-65 RHC 2.4.1.2

This subsection subitem was deleted in its entirety. Dose limits for individual members of the public is addressed in Part III of R.61-64, X-Rays (Title B). This subsection subitem was replaced with text requiring the removal

of the registration sticker if the particle accelerator is removed from the facility. The sticker is invalid if the equipment is removed from the facility.

R.61-65 RHC 2.4.1.3

This subsection subitem was added to allow vendors to confirm the registration of both the facility and the particle accelerator by verifying an accurate registration sticker is present. This allows vendors to ensure they are following the requirements of RHC 2.5.3.

R.61-65 RHC 2.4.2

This subsection was deleted in its entirety. Dose limits for individual members of the public is addressed in Part III of R.61-64, X-Rays (Title B). This subsection was replaced with text clarifying the requirements for re-registration of particle accelerators. This allows the Department to keep accurate records of equipment at any given facility.

R.61-65 RHC 2.4.3

This subsection was added to clarify the requirements for reporting changes of status with the facility and particle accelerator. This gives the facility ample time to report changes in registration status and allows the Department to keep accurate records of equipment at any given facility.

R.61-65 RHC 2.4.4

This subsection was added to clarify the responsibility of the registrants to verify the vendor providing service is registered. This prevents unregistered vendors from furnishing services to registrants without the proper knowledge of state regulations.

R.61-65 RHC 2.5

The title of this section was deleted in its entirety. The radiation symbol is addressed in Part III of R.61-64, X-Rays (Title B). The title of this section was replaced with “Vendor Registration and Obligation” and revised grammatically by deleting the “.” between “RHC 2.5” and “Vendor Registration and Obligation.”

R.61-65 RHC 2.5.1

This subsection was deleted in its entirety. The radiation symbol is addressed in Part III of R.61-64, X-Rays (Title B). This subsection was replaced with text clarifying the persons required to register as a vendor. This ensures the registration of any vendor performing services to registrants.

R.61-65 RHC 2.5.1.1

This subsection subitem was replaced with text allowing in-house personnel to be exempt from the registration requirement. This allows qualified experts employed by the facility to perform services for particle accelerators in that facility only.

R.61-65 RHC 2.5.1.1.1

This subsection subitem was added to further clarify the conditions to be exempt from the registration requirement.

R.61-65 RHC 2.5.1.1.2

This subsection subitem was added to further clarify the conditions to be exempt from the registration requirement.

R.61-65 RHC 2.5.1.2

This subsection subitem was added to require the maintenance of documentation for in-house service personnel. This allows the Department to review the records during inspections.

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R.61-65 RHC 2.5.2

This subsection was added to require registered vendors to provide notification of particular services provided in the state.

R.61-65 RHC 2.5.2.1

This subsection subitem was added to clarify the information required with the notifications.

R.61-65 RHC 2.5.2.2

This subsection subitem was added to clarify the information required with the notifications.

R.61-65 RHC 2.5.2.3

This subsection subitem was added to clarify the information required with the notifications.

R.61-65 RHC 2.5.2.4

This subsection subitem was added to clarify the way in which and how often the vendor is required to provide notification.

R.61-65 RHC 2.5.3

This subsection was added to clarify conditions to be met before vendors may provide services or supplies to registrants. This prevents vendors from providing services to unregistered persons.

R.61-65 RHC 2.5.4

This subsection was added to require vendors to retain records. This allows the Department to review the records when necessary.

R.61-65 RHC 2.5.4.1

This subsection subitem was added to clarify the records required to be retained by vendors. This allows the Department to review the records when necessary.

R.61-65 RHC 2.5.4.2

This subsection subitem was added to clarify the records required to be retained by vendors. This allows the Department to review the records when necessary.

R.61-65 RHC 2.5.4.3

This subsection subitem was added to clarify the records required to be retained by vendors. This allows the Department to review the records when necessary.

R.61-65 RHC 2.5.4.4

This subsection subitem was added to clarify the records required to be retained by vendors. This allows the Department to review the records when necessary.

R.61-65 RHC 2.5.5

This subsection was added to clarify conditions for disposal of the records required to be retained by vendors. This allows the Department to review the records when necessary.

R.61-65 RHC 2.5.6

This subsection was added to clarify requirements for the maintenance of operable instruments used by the vendor and retaining records of the maintenance. This allows the Department to review the records when necessary.

R.61-65 RHC 2.5.6.1

This subsection subitem was added to clarify calibration frequencies for survey meters. This will help to prevent surveys from being performed with equipment that is out of calibration.

R.61-65 RHC 2.6

The title of this section was deleted in its entirety. Caution signs are addressed in Part III of R.61-64, X-Rays (Title B). The title of this section was replaced with “Modification, Revocation, Termination of Registrants” and revised grammatically by deleting the “.” between “RHC 2.6” and “Modification, Revocation, Termination of Registrants.” The content of this section was deleted in its entirety. Personnel monitoring is addressed in Part IV “Personnel Monitoring Requirements” of these regulations.

R.61-65 RHC 2.6.1

This subsection was deleted in its entirety. Posting requirements are addressed in Part III of R.61-64, X-Rays (Title B). This subsection was replaced to clarify the terms and conditions of registrations. This allows the Department to change the registration status of registrants under particular circumstances.

R.61-65 RHC 2.6.1.1

This subsection subitem was deleted in its entirety. Posting requirements are addressed in Part III of R.61-64, X-Rays (Title B). This subsection subitem was replaced with text clarifying conditions that may affect registration statuses. This allows the Department to change registration statuses based on changes to the Act.

R.61-65 RHC 2.6.1.2

This subsection subitem was deleted in its entirety. Posting requirements are addressed in Part III of R.61-64, X-Rays (Title B). This subsection subitem was replaced with text clarifying conditions that may affect registration statuses. This allows the Department to change registration statuses based on adopted regulations.

R.61-65 RHC 2.6.1.3

This subsection subitem was added to clarify conditions that may affect registration statuses. This allows the Department to change registration statuses based on orders issued by the Department.

R.61-65 RHC 2.6.2

This subsection was revised to update the definition for “Radiation Area” as outlined by R.61-64, X-Rays (Title B). This subsection was moved from RHC 2.6.2 to RHC 8.27 to be contained in Part VIII “Definitions.” This subsection was replaced to clarify conditions that may affect registration statuses. This allows the Department to revoke, suspend, or modify any registration under certain conditions.

R.61-65 RHC 2.6.2.1

This subsection subitem was added to clarify conditions that may affect registration statuses. This allows the Department to revoke, suspend, or modify any registration for supplying material false statements or any statement of fact.

R.61-65 RHC 2.6.2.2

This subsection subitem was added to clarify conditions that may affect registration statuses. This allows the Department to revoke, suspend, or modify any registration because of any statement or other means that would warrant a refusal of registration.

R.61-65 RHC 2.6.2.3

This subsection subitem was added to clarify conditions that may affect registration statuses. This allows the Department to revoke, suspend, or modify any registration for violations of any terms and conditions that apply.

R.61-65 RHC 2.6.3

This subsection was revised to update the definition for “High radiation area” as outlined by R.61-64, X-Rays (Title B). This subsection was moved from RHC 2.6.3 to RHC 8.11 to be contained in Part VIII “Definitions.” This subsection was replaced with text stating a revocation may be appealed pursuant to applicable law. This allows the registrant to appeal revocation of registration.

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R.61-65 RHC 2.6.4

This subsection was deleted in its entirety. Posting requirements are addressed in Part III of R.61-64, X-Rays (Title B). This subsection was replaced with provisions clarifying the registration modification, revocation, and suspension process.

R.61-65 RHC 2.6.4.1

This subsection subitem was added to clarify steps to be taken prior to making changes to a registrant's registration status. This provides the registrant with notification prior to action being taken.

R.61-65 RHC 2.6.4.2

This subsection subitem was added to clarify steps to be taken prior to making changes to a registrant's registration status. This provides the registrant an opportunity to demonstrate compliance prior to action.

R.61-65 RHC 2.6.5

This subsection was added to clarify the process of terminating a registration. This allows the registrant to provide a written request to terminate a registration.

R.61-65 RHC 2.6.6

This subsection was added to clarify the application of the provisions in Part II. This ensures both machines and vendors are covered.

R.61-65 RHC 2.7

The title of this section "Personnel Monitoring" was moved from RHC 2.7 to RHC 4.1. The title of this section was replaced by moving RHC 1.11 to RHC 2.7. The title of this section was revised grammatically by deleting the "." between "RHC 2.7" and "Annual Fees."

R.61-65 RHC 2.7.1

This subsection was deleted in its entirety. Personnel monitoring is addressed in Part IV "Personnel Monitoring Requirements" of these regulations. This subsection was replaced by moving RHC 1.11.1 to RHC 2.7.1 with revised language and is not in addition to current fees.

R.61-65 RHC 2.7.2

This subsection was deleted in its entirety. Personnel monitoring is addressed in Part IV "Personnel Monitoring Requirements" of these regulations. This subsection was replaced by moving RHC 1.11.3 to RHC 2.7.2. This subsection was moved for convenience and is not in addition to current fees.

R.61-65 RHC 2.7.3

This subsection was deleted in its entirety. Personnel monitoring is addressed in Part IV "Personnel Monitoring Requirements" of these regulations. This subsection was replaced by moving RHC 1.11.4 to RHC 2.7.3. This subsection was added for convenience and is not in addition to current fees.

R.61-65 RHC 2.7.4

This subsection was deleted in its entirety. Personnel monitoring is addressed in Part IV "Personnel Monitoring Requirements" of these regulations. This subsection was replaced by moving RHC 1.11.2 to RHC 2.7.4. This subsection was moved for convenience and is not in addition to current fees.

R.61-65 RHC 2.7.5

This subsection was added by moving RHC 1.11.5 to RHC 2.7.5. This subsection was moved for convenience and is not in addition to current fees.

R.61-65 RHC 2.7.6

This subsection was added to clarify the schedule of fees that will be used to determine annual fees due. This subsection was added for convenience and is not in addition to current fees.

R.61-65 RHC 2.8

The title of this section was deleted in its entirety. Records of personnel monitoring is addressed in Part IV “Personnel Monitoring Requirements” of these regulations.

R.61-65 RHC 2.8.1

This subsection was deleted in its entirety. Records of personnel monitoring is addressed in Part IV “Personnel Monitoring Requirements” of these regulations.

The footnote denoted as “¹” referencing RHC 2.8.1 was deleted in its entirety. The Department does not supply this form to registrants.

R.61-65 RHC 2.9

This section was deleted in its entirety. This section is addressed in R.61-64, X-Rays (Title B) as referenced through Appendix A “Notification of Incidents (Part III).”

R.61-65 RHC 2.9.1

This subsection was deleted in its entirety. This subsection is addressed in R.61-64, X-Rays (Title B) as referenced through Appendix A “Notification of Incidents (Part III).”

R.61-65 RHC 2.9.1.1

This subsection subitem was deleted in its entirety. This subsection subitem is addressed in R.61-64, X-Rays (Title B) as referenced through Appendix A “Notification of Incidents (Part III).”

R.61-65 RHC 2.9.2

This subsection was deleted in its entirety. This subsection is addressed in R.61-64, X-Rays (Title B) as referenced through Appendix A “Notification of Incidents (Part III).”

R.61-65 RHC 2.9.2.1

This subsection subitem was deleted in its entirety. This subsection subitem is addressed in R.61-64, X-Rays (Title B) as referenced through Appendix A “Notification of Incidents (Part III).”

R.61-65 RHC 2.9.3

This subsection was deleted in its entirety. This subsection is addressed in R.61-64, X-Rays (Title B) as referenced through Appendix A “Notification of Incidents (Part III).”

R.61-65 RHC 2.10

This section was deleted in its entirety. This section is addressed in R.61-64, X-Rays (Title B) as referenced through Appendix A “Reports of Exposures and Radiation Levels Exceeding the Limits (Part III).”

R.61-65 RHC 2.10.1

This subsection was deleted in its entirety. This subsection is addressed in R.61-64, X-Rays (Title B) as referenced through Appendix A “Reports of Exposures and Radiation Levels Exceeding the Limits (Part III).”

R.61-65 RHC 2.10.1.1

This subsection subitem was deleted in its entirety. This subsection subitem is addressed in R.61-64, X-Rays (Title B) as referenced through Appendix A “Reports of Exposures and Radiation Levels Exceeding the Limits (Part III).”

R.61-65 RHC 2.10.1.2

This subsection subitem was deleted in its entirety. This subsection subitem is addressed in R.61-64, X-Rays (Title B) as referenced through Appendix A “Reports of Exposures and Radiation Levels Exceeding the Limits (Part III).”

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R.61-65 RHC 2.10.1.3

This subsection subitem was deleted in its entirety. This subsection subitem is addressed in R.61-64, X-Rays (Title B) as referenced through Appendix A “Reports of Exposures and Radiation Levels Exceeding the Limits (Part III).”

R.61-65 RHC 2.10.1.4

This subsection subitem was deleted in its entirety. This subsection subitem is addressed in R.61-64, X-Rays (Title B) as referenced through Appendix A “Reports of Exposures and Radiation Levels Exceeding the Limits (Part III).”

R.61-65 RHC 2.10.2

This subsection was deleted in its entirety. This subsection is addressed in R.61-64, X-Rays (Title B) as referenced through Appendix A “Reports of Exposures and Radiation Levels Exceeding the Limits (Part III).”

R.61-65 RHC 2.11

This section was deleted in its entirety. This section is addressed in R.61-64, X-Rays (Title B) as referenced through Appendix A “Notices, Instructions, and Reports to Workers: Inspections (Part X).”

R.61-65 RHC 2.11.1

This subsection was deleted in its entirety. This subsection is addressed in R.61-64, X-Rays (Title B) as referenced through Appendix A “Notices, Instructions, and Reports to Workers: Inspections (Part X).”

R.61-65 RHC 2.11.2

This subsection was deleted in its entirety. This subsection is addressed in R.61-64, X-Rays (Title B) as referenced through Appendix A “Notices, Instructions, and Reports to Workers: Inspections (Part X).”

R.61-65 RHC 2.11.3

This subsection was deleted in its entirety. This subsection is addressed in R.61-64, X-Rays (Title B) as referenced through Appendix A “Notices, Instructions, and Reports to Workers: Inspections (Part X).”

The footnote denoted as “²” referencing RHC 2.11.3 was deleted in its entirety. This form is addressed in R.61-64, X-Rays (Title B) as referenced through Appendix A “Notices, Instructions, and Reports to Workers: Inspections (Part X).”

R.61-65 RHC 2.11.4

This subsection was deleted in its entirety. This subsection is addressed in R.61-64, X-Rays (Title B) as referenced through Appendix A “Notices, Instructions, and Reports to Workers: Inspections (Part X).”

R.61-65 RHC 2.11.5

This subsection was deleted in its entirety. This subsection is addressed in R.61-64, X-Rays (Title B) as referenced through Appendix A “Notices, Instructions, and Reports to Workers: Inspections (Part X).”

R.61-65 RHC 2.11.6

This subsection was deleted in its entirety. This subsection is addressed in R.61-64, X-Rays (Title B) as referenced through Appendix A “Notices, Instructions, and Reports to Workers: Inspections (Part X).”

R.61-65 PART III

The title of this part was changed from “RADIATION SAFETY REQUIREMENTS FOR PARTICLE ACCELERATORS” to “RADIATION SAFETY REQUIREMENTS FOR RADIATION SAFETY OFFICERS AND OPERATORS.” The new title was bolded and capitalized for stylistic purposes.

R.61-65 RHC 3.1

The title of this section was deleted in its entirety and replaced with “Minimum Personnel Radiation Safety Requirements for Radiation Safety Officers and Operators.” The content of this section was deleted in its entirety. The intent of the scope of this part is contained in the title of this section.

R.61-65 RHC 3.1.1

This subsection was added to establish training requirements for acting as a Radiation Safety Officer. This ensures that Radiation Safety Officers are properly qualified.

R.61-65 RHC 3.1.1.1

This subsection subitem was added to clarify training requirements for acting as a Radiation Safety Officer. This ensures that Radiation Safety Officers are properly qualified.

R.61-65 RHC 3.1.1.2

This subsection subitem was added to clarify training requirements for acting as a Radiation Safety Officer. This ensures that Radiation Safety Officers are properly qualified.

R.61-65 RHC 3.1.1.3

This subsection subitem was added to clarify training requirements for acting as a Radiation Safety Officer. This ensures that Radiation Safety Officers are properly qualified.

R.61-65 RHC 3.1.2

This subsection was added to establish training requirements for operators. This ensures that operators are properly qualified.

R.61-65 RHC 3.1.2.1

This subsection subitem was added to clarify training requirements for operators. This ensures that operators are properly qualified.

R.61-65 RHC 3.1.2.2

This subsection subitem was added to clarify training requirements for operators. This ensures that operators are properly qualified.

R.61-65 RHC 3.1.2.3

This subsection subitem was added to clarify training requirements for operators. This ensures that operators are properly qualified.

R.61-65 RHC 3.1.2.4

This subsection subitem was added to clarify training requirements for operators. This ensures that operators are properly qualified.

R.61-65 RHC 3.1.3

This subsection was moved from RHC 3.3.5 to RHC 3.1.3 and revised for simplicity.

R.61-65 RHC 3.2

This section was deleted in its entirety. Definitions are contained in Part VIII “Definitions” of these regulations. This section was replaced by moving RHC 3.7 to RHC 3.2 and revised grammatically by deleting the “.” between “RHC 3.2” and “Minimum Subjects to be Covered in Training Radiation Safety Officers and Operators.”

R.61-65 RHC 3.2.1

This subsection was deleted in its entirety. The defined term “Emergency Procedure” is addressed in RHC 8.19. This subsection was replaced with revised requirements moved from RHC 3.3.4 to RHC 3.2.1.

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R.61-65 RHC 3.2.1.1

This subsection subitem was moved from RHC 3.7.1 to RHC 3.2.1.1 and revised grammatically.

R.61-65 RHC 3.2.1.1.1

This subsection subitem was moved from RHC 3.7.1.1 to RHC 3.2.1.1.1 and revised for simplicity.

R.61-65 RHC 3.2.1.1.2

This subsection subitem was moved from RHC 3.7.1.2 to RHC 3.2.1.1.2 and revised for clarity.

R.61-65 RHC 3.2.1.1.3

This subsection subitem was moved from RHC 3.7.1.3 to RHC 3.2.1.1.3 with revised requirements.

R.61-65 RHC 3.2.1.1.4

This subsection subitem was moved from RHC 3.7.1.4 to RHC 3.2.1.1.4 with revised requirements.

R.61-65 RHC 3.2.1.1.5

This subsection subitem was moved from RHC 3.7.1.5 to RHC 3.2.1.1.5 with revised requirements.

R.61-65 RHC 3.2.1.1.5.1

This subsection subitem was added to list the required instruction of operators in controlling radiation dose with working time. This ensures that operators have proper radiation safety training in basic ALARA “As Low As Reasonably Achievable” principles.

R.61-65 RHC 3.2.1.1.5.2

This subsection subitem was added to list the required instruction of operators in controlling radiation dose with working distances. This ensures that operators have proper radiation safety training in basic ALARA “As Low As Reasonably Achievable” principles.

R.61-65 RHC 3.2.1.1.5.3

This subsection subitem was moved from RHC 3.7.1.5.1 to RHC 3.2.1.1.5.3.

R.61-65 RHC 3.2.1.2

This subsection subitem was added to list the required instruction of operators in the use of radiation detection instrumentation. This ensures that operators have proper training in radiation detection instruments.

R.61-65 RHC 3.2.1.2.1

This subsection subitem was added to list the required instruction of operators in the use of radiation detection instrumentation. This ensures that operators have proper training in radiation detection instruments.

R.61-65 RHC 3.2.1.2.1.1

This subsection subitem was added to list the required instruction of operators in the use of radiation detection instrumentation. This ensures that operators have proper training in radiation detection instruments.

R.61-65 RHC 3.2.1.2.1.2

This subsection subitem was added to list the required instruction of operators in the use of radiation detection instrumentation. This ensures that operators have proper training in radiation detection instruments.

R.61-65 RHC 3.2.1.2.1.3

This subsection subitem was added to list the required instruction of operators in the use of radiation detection instrumentation. This ensures that operators have proper training in radiation detection instruments.

R.61-65 RHC 3.2.1.2.2

This subsection subitem was added to list the required instruction of operators in the use of radiation detection instrumentation. This ensures that operators have proper training in radiation detection instruments.

R.61-65 RHC 3.2.1.2.3

This subsection subitem was moved from RHC 3.7.2 to RHC 3.2.1.2.3 and revised for clarity.

R.61-65 RHC 3.2.1.2.3.1

This subsection subitem was added to list the required instruction of operators in the use of specific types of personnel monitoring equipment. This ensures that operators have proper training in radiation detection instruments.

R.61-65 RHC 3.2.1.2.3.2

This subsection subitem was added to list the required instruction of operators in the use of specific types of personnel monitoring equipment. This ensures that operators have proper training in radiation detection instruments.

R.61-65 RHC 3.2.1.3

This subsection subitem was moved from RHC 3.7.3 to RHC 3.2.1.3 with revised requirements.

R.61-65 RHC 3.2.1.4

This subsection subitem was moved from RHC 3.7.4 to RHC 3.2.1.4 and revised for organizational purposes.

R.61-65 RHC 3.2.1.5

This subsection subitem was moved from RHC 3.7.5 to RHC 3.2.1.5 and revised for organizational purposes.

R.61-65 RHC 3.2.2

This subsection was deleted in its entirety. The defined term “Maintenance Personnel” is not defined in these regulations.

R.61-65 RHC 3.2.3

This subsection was revised to update the definition for “Operating Procedures” as outlined by R.61-64, X-Rays (Title B) and moved from RHC 3.2.3 to RHC 8.19 to be contained in Part VIII “Definitions.”

R.61-65 RHC 3.2.4

This subsection was revised by changing the reference within the definition from RHC 3.7 to RHC 3.2. This subsection was moved from RHC 3.2.4 to RHC 8.20 to be contained in Part VIII “Definitions.”

R.61-65 RHC 3.3

This section was deleted in its entirety. The intent of this section is addressed throughout this regulation. The title of this section was replaced with “Operating and Emergency Procedures” and revised grammatically by deleting the “.” between “RHC 3.3” and “Operating and Emergency Procedures.”

R.61-65 RHC 3.3.1

This subsection was revised to specify the facility’s responsibility to appoint a Radiation Safety Officer who is responsible for radiation protection at the facility. This subsection was moved from RHC 3.3.1 to RHC 1.3.2. This subsection was replaced to require registrants to have written operating and emergency procedures. This ensures personnel are aware of and instructed in the operating and emergency procedures of the facility.

R.61-65 RHC 3.3.1.1

This subsection subitem was added to clarify items that must be included in the operating and emergency procedures. This ensures personnel are aware of and instructed in the handling of particle accelerators so as not to exceed occupational exposure limits.

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R.61-65 RHC 3.3.1.2

This subsection subitem was added to clarify items that must be included in the operating and emergency procedures. This ensures personnel are aware of and instructed in how and when to conduct radiation surveys.

R.61-65 RHC 3.3.1.3

This subsection subitem was added to clarify items that must be included in the operating and emergency procedures. This ensures personnel are aware of and instructed in how to control radiation areas.

R.61-65 RHC 3.3.1.4

This subsection subitem was added to clarify items that must be included in the operating and emergency procedures. This ensures personnel are aware of and instructed in how to secure particle accelerators when not in use.

R.61-65 RHC 3.3.1.5

This subsection subitem was added to clarify items that must be included in the operating and emergency procedures. This ensures personnel are aware of and instructed in the use of personnel monitoring.

R.61-65 RHC 3.3.1.6

This subsection subitem was added to clarify items that must be included in the operating and emergency procedures. This ensures personnel are aware of and instructed in handling exposed personnel.

R.61-65 RHC 3.3.1.7

This subsection subitem was added to clarify items that must be included in the operating and emergency procedures. This ensures personnel are aware of and instructed in minimizing exposure in case of an accident.

R.61-65 RHC 3.3.1.8

This subsection subitem was added to clarify items that must be included in the operating and emergency procedures. This ensures personnel are aware of and instructed in notifying the proper persons in the event of an accident.

R.61-65 RHC 3.3.1.9

This subsection subitem was added to clarify items that must be included in the operating and emergency procedures. This ensures personnel are aware of and instructed in maintaining records.

R.61-65 RHC 3.3.2

This subsection was deleted in its entirety. The Radiation Safety Officer is responsible for the operating and emergency procedures by default since the Radiation Safety Officer is responsible for the entire radiation safety program at the facility in accordance with RHC 1.3.2 of these regulations.

R.61-65 RHC 3.3.3

This subsection was deleted in its entirety. Familiarity to operating and emergency procedures is addressed in RHC 3.2.1.5. Availability of operating and emergency procedures is addressed in RHC 6.3.7.

R.61-65 RHC 3.3.4

This subsection was revised to include the requirement that operators must be trained in and demonstrate an understanding of the topics listed in RHC 3.2.1.1 through RHC 3.2.1.5 and moved from RHC 3.3.4 to RHC 3.2.1.

R.61-65 RHC 3.3.5

This subsection was revised for simplicity and moved from RHC 3.3.5 to RHC 3.1.3.

R.61-65 RHC 3.3.6

This subsection was revised to delete “or open entrances to High Radiation Areas.” Controlling access to radiation areas is addressed in RHC 3.3.1.3. This subsection was moved from RHC 3.3.6 to RHC 6.3.1.

R.61-65 RHC 3.3.7

This subsection was deleted in its entirety. This requirement is addressed in R.61-64, X-Rays (Title B).

R.61-65 RHC 3.3.8

This subsection was revised to clarify steps that must be taken to operate a particle accelerator with an interlock that is intentionally bypassed. This subsection was moved from RHC 3.3.8 to RHC 6.3.6.

R.61-65 RHC 3.4

The title of this section was revised from “Equipment Controls” to “Particle Accelerator Controls and Interlock Systems” and moved from RHC 3.4 to RHC 6.1. The title of this section was replaced with “Authority and Responsibility for the Radiation Safety Officer” and revised grammatically by deleting the “.” between “RHC 3.4” and “Authority and Responsibility for the Radiation Safety Officer.”

R.61-65 RHC 3.4.1

This subsection was revised to specify the instrumentation, readouts and controls on the particle accelerator must be clearly identified and easily discernible. This subsection was moved from RHC 3.4.1 to RHC 6.1.1. This subsection was replaced to clarify what registrants must allow so that the Radiation Safety Officer may perform the duties set forth in these regulations. This gives the appointed Radiation Safety Officer the authority and opportunity to perform required duties.

R.61-65 RHC 3.4.1.1

This subsection subitem was added to clarify duties that the registrant must allow the Radiation Safety Officer to perform. This gives the appointed Radiation Safety Officer the authority and opportunity to identify radiation safety problems.

R.61-65 RHC 3.4.1.2

This subsection subitem was added to clarify duties that the registrant must allow the Radiation Safety Officer to perform. This gives the appointed Radiation Safety Officer the authority and opportunity to provide corrective actions to radiation safety problems.

R.61-65 RHC 3.4.1.3

This subsection subitem was added to clarify duties that the registrant must allow the Radiation Safety Officer to perform. This gives the appointed Radiation Safety Officer the authority and opportunity to stop unsafe operations.

R.61-65 RHC 3.4.1.4

This subsection subitem was added to clarify duties that the registrant must allow the Radiation Safety Officer to perform. This gives the appointed Radiation Safety Officer the authority and opportunity to verify corrective actions are being put into practice.

R.61-65 RHC 3.4.2

This subsection was revised to include specific devices that may be used to secure the control of the particle accelerator. This subsection was moved from RHC 3.4.2 to RHC 6.1.2. This subsection was replaced with the requirement of establishing investigative limits with respect to annual occupational exposure limits. This requires the registrant to document, investigate and correct the radiation safety practices of personnel whose dose exceeds the limits set in place by the Radiation Safety Officer.

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R.61-65 RHC 3.4.3

This subsection was revised to include the condition that the interlocks shut down the machine if a barrier leading to a high radiation area is penetrated. This prevents exposure to personnel who may penetrate the barrier during operation. This subsection was moved from RHC 3.4.3 to RHC 6.1.3.

R.61-65 RHC 3.4.4

This subsection was revised to require the tripped interlock to be reset at its location before the particle accelerator is reset at the main control panel. This prevents the operator from overriding the tripped scram button from the control panel. This subsection was moved from RHC 3.4.4 to RHC 6.1.7.

R.61-65 RHC 3.4.5

This subsection was revised to include the requirement making it necessary to reset a scram button manually before being allowed to restart the particle accelerator from the main control panel. This prevents the operator from overriding the tripped scram button from the control panel. This subsection was moved from RHC 3.4.5 to RHC 6.1.8.

R.61-65 RHC 3.4.6

This subsection was moved from RHC 3.4.6 to RHC 6.1.5.

R.61-65 RHC 3.4.7

This subsection was revised to include the need for the electrical circuit diagrams to be available to the operators and to the Department for review. This subsection was moved from RHC 3.4.7 to RHC 6.3.5.

R.61-65 RHC 3.4.8

This subsection was revised by removing the requirement stating that registrants shall check and service all safety and warning devices after 500 hours of operation, not to exceed six months. Instead these devices shall be checked at least on a quarterly basis. This interval was established by the Conference of Radiation Control Program Directors in the Suggested State Regulations for Control of Radiation. This subsection was also changed to require the results of the testing to be available to the Department for review. This subsection was moved from RHC 3.4.8 to RHC 6.3.4.

R.61-65 RHC 3.5

The title of this section was revised to add the word "Requirements" to the end of "Radiation Monitoring." The title of this section was revised grammatically by deleting the "." between "RHC 3.5" and "Radiation Monitoring Requirements." and moved from RHC 3.5 to RHC 6.4.

R.61-65 RHC 3.5.1

This subsection was revised to include the requirement for all portable monitoring equipment to be operable and appropriately calibrated for the radiation energy levels encountered at the facility annually or after servicing and repair. This prevents inaccurate readings from equipment that is not calibrated properly. This subsection was moved from RHC 3.5.1 to RHC 6.4.1.

R.61-65 RHC 3.5.2

This subsection was revised to require high radiation areas to be monitored continuously with monitors that are electrically independent of the accelerator control and interlocks. The monitor must allow readings to be observed at the control panel. This ensures the operator is aware of the radiation levels in the monitored area while at the control panel. This subsection was moved from RHC 3.5.2 to RHC 6.4.3.

R.61-65 RHC 3.5.2.1

This subsection subitem was revised to require any entrance into a high radiation area be equipped with an indicator light indicating radiation is being produced instead of indicating when a predetermined limit has been met. This ensures personnel are aware that radiation is being produced. This subsection subitem was moved from RHC 3.5.2.1 to RHC 6.2.1.

R.61-65 RHC 3.5.2.2

This subsection subitem was revised to require the use of a radiation monitor with an audible alarm when entering a target room or any high radiation area. This prevents excess radiation exposure to the operator upon entering the high radiation area. This subsection subitem was moved from RHC 3.5.2.2 to RHC 6.4.4.

R.61-65 RHC 3.5.2.3

This subsection subitem was revised to require the use of a radiation monitor with an audible alarm when entering a target room or any high radiation area. This prevents excess radiation exposure to the operator upon entering the high radiation area. This subsection subitem was moved from RHC 3.5.2.3 to RHC 6.4.4.

R.61-65 RHC 3.5.2.4

This subsection subitem was deleted in its entirety. Monitors approved by the Department are those monitors that satisfy these regulations.

R.61-65 RHC 3.5.3

This subsection was deleted in its entirety. Monitoring of individuals in restricted areas is addressed in RHC 4.1.2 of these regulations.

R.61-65 RHC 3.6

The title of this section was deleted in its entirety. Radiation surveys are addressed in RHC 6.4 “Radiation Monitoring Requirements” of these regulations.

R.61-65 RHC 3.6.1

This subsection was deleted in its entirety. This subsection is addressed in RHC 6.4 “Radiation Monitoring Requirements” of these regulations.

R.61-65 RHC 3.6.2

This subsection was revised to include additional circumstances requiring a radiation survey. This subsection was moved from RHC 3.6.2 to RHC 6.4.2.

R.61-65 RHC 3.6.3

This subsection was revised and broken up into several separate subsections for clarity. The statement that required frequency of radiation protection surveys was reworded for clarity and moved from RHC 3.6.3 to RHC 6.4.2. The statements concerning records of the survey was revised to include a diagram of the area along with the use of quantified results while conforming to the registrant’s written procedures and moved from RHC 3.6.3 to RHC 6.4.4 through RHC 6.4.6.

R.61-65 RHC 3.7

The title of this section was revised from “Minimum Subjects to be Covered in Training of Particle Accelerator Operators” to “Minimum Subjects to be Covered in Training Radiation Safety Officers and Operators” and moved from RHC 3.7 to RHC 3.2.

R.61-65 RHC 3.7.1

This subsection was revised grammatically by changing the “.” at the end of the subsection to a “:” and moved from RHC 3.7.1 to RHC 3.2.1.1.

R.61-65 RHC 3.7.1.1

This subsection subitem was revised to encompass beta, gamma, and x-radiation into ionizing radiation for simplicity and moved from RHC 3.7.1.1 to RHC 3.2.1.1.1.

R.61-65 RHC 3.7.1.2

This subsection subitem was revised to include the base units of radiation dose, rem and Sievert. This subsection subitem was moved from RHC 3.7.1.2 to RHC 3.2.1.1.2.

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R.61-65 RHC 3.7.1.3

This subsection subitem was revised to include the hazards of any exposure to radiation and moved from RHC 3.7.1.3 to RHC 3.2.1.1.3.

R.61-65 RHC 3.7.1.4

This subsection subitem was revised to include all sources of radiation and moved from RHC 3.7.1.4 to RHC 3.2.1.1.4.

R.61-65 RHC 3.7.1.5

This subsection subitem was revised to specify general methods of controlling radiation dose and moved from RHC 3.7.1.5 to RHC 3.2.1.1.5.

R.61-65 RHC 3.7.1.5.1

This subsection subitem was moved from RHC 3.7.1.5.1 to RHC 3.2.1.1.5.3.

R.61-65 RHC 3.7.1.5.2

This subsection subitem was deleted in its entirety. Training in interlock systems is addressed in RHC 3.2.1.3.

R.61-65 RHC 3.7.1.5.3

This subsection subitem was deleted in its entirety. Operating and emergency procedures training is addressed in RHC 3.2.1.5.

R.61-65 RHC 3.7.1.5.4

This subsection subitem was deleted in its entirety. Radiation detection instrumentation training is addressed RHC 3.2.1.2.

R.61-65 RHC 3.7.2

This subsection was revised to include specific types of personnel monitoring equipment to be discussed during training and moved from RHC 3.7.2 to RHC 3.2.1.2.3.

R.61-65 RHC 3.7.3

This subsection was revised to include training in interlock systems of particle accelerators and moved from RHC 3.7.3 to RHC 3.2.1.3.

R.61-65 RHC 3.7.4

This subsection was revised for organizational purposes and moved from RHC 3.7.4 to RHC 3.2.1.4.

R.61-65 RHC 3.7.5

This subsection was revised for organizational purposes and moved from RHC 3.7.5 to RHC 3.2.1.5.

R.61-65 RHC 3.7.6

This subsection was deleted in its entirety. It is the responsibility of the registrant to determine the amount of on-the-job training required for each operator to be competent in the use of the particle accelerators at the facility.

R.61-65 RHC 3.7.7

This subsection was deleted in its entirety. An operator's assistant or helper is considered to be an operator under these regulations and is therefore required to be trained in accordance to these regulations.

R.61-65 RHC 3.8

This section was deleted in its entirety. The intent of this section is addressed in RHC 3.1.3. Maintenance personnel are required to have the same training as particle accelerator operators.

R.61-65 RHC 3.8.1

This subsection was deleted in its entirety. The intent of this subsection is addressed in RHC 3.1.3. Maintenance personnel are required to have the same training as particle accelerator operators.

R.61-65 RHC 3.8.2

This subsection was deleted in its entirety. The intent of this subsection is addressed in RHC 3.1.3. Maintenance personnel are required to have the same training as particle accelerator operators.

R.61-65 RHC 3.8.2.1

This subsection subitem was deleted in its entirety. The intent of this subsection subitem is addressed in RHC 3.1.3. Maintenance personnel are required to have the same training as particle accelerator operators.

R.61-65 RHC 3.8.2.2

This subsection subitem was deleted in its entirety. The intent of this subsection subitem is addressed in RHC 3.1.3. Maintenance personnel are required to have the same training as particle accelerator operators.

R.61-65 RHC 3.8.2.3

This subsection subitem was deleted in its entirety. The intent of this subsection subitem is addressed in RHC 3.1.3. Maintenance personnel are required to have the same training as particle accelerator operators.

R.61-65 RHC 3.8.2.4

This subsection subitem was deleted in its entirety. The intent of this subsection subitem is addressed in RHC 3.1.3. Maintenance personnel are required to have the same training as particle accelerator operators.

R.61-65 RHC 3.8.3

This subsection was deleted in its entirety. The intent of this subsection is addressed in RHC 3.1.3. Maintenance personnel are required to have the same training as particle accelerator operators.

R.61-65 PART IV

The title of this part was changed from “REGISTRATION OF PARTICLE ACCELERATORS” to “PERSONNEL MONITORING REQUIREMENTS.” The new title was bolded and capitalized for stylistic purposes.

R.61-65 RHC 4.1

The title of this section was deleted in its entirety and replaced with “Personnel Monitoring.” The content of this section was revised to specify the registration of the control and tube of the particle accelerator and the facility and moved from RHC 4.1 to RHC 2.1.

R.61-65 RHC 4.1.1

This subsection was added to outline requirements for operators and Radiation Safety Officers to wear personnel monitoring equipment.

R.61-65 RHC 4.1.2

This subsection was added to include all provisions of Part III of R.61-64, X-Rays (Title B) in the requirements for personnel monitoring in accordance with these regulations.

R.61-65 RHC 4.2

This section was revised by deleting the “s.” at the end of “Registration Procedures.” and bolded for stylistic purposes. This section was moved from RHC 4.2 to Part II.

R.61-65 RHC 4.2.1

This subsection was deleted in its entirety. Registration procedures are addressed in Part II of these regulations.

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R.61-65 RHC 4.3

This section was deleted in its entirety. The Radiation Safety Officer is addressed in RHC 1.3.2.

R.61-65 RHC 4.3.1

This subsection was revised to clarify that the individual responsible for radiation safety is the Radiation Safety Officer and moved from RHC 4.3.1 to RHC 1.3.2.

R.61-65 RHC 4.3.1.1

This subsection subitem was moved from RHC 4.3.1.1 to RHC 1.3.2.1.

R.61-65 RHC 4.3.1.2

This subsection subitem was revised to require the Radiation Safety Officer to develop and implement a radiation safety program instead of simply recommend a program. This subsection subitem was moved from RHC 4.3.1.2 to RHC 1.3.2.2.

R.61-65 RHC 4.3.1.3

This subsection subitem was moved from RHC 4.3.1.3 to RHC 1.3.2.3.

R.61-65 RHC 4.3.1.4

This subsection subitem was revised grammatically and to make the Radiation Safety Officer responsible for giving radiation safety instructions. This subsection subitem was moved from RHC 4.3.1.4 to RHC 1.3.2.4.

R.61-65 RHC 4.4

This section was deleted in its entirety. The Department does not provide the registrant with a Notice of Registration.

R.61-65 RHC 4.5

This section was deleted in its entirety. Report of change is addressed in Part II of R.61-64, X-Rays (Title B).

R.61-65 RHC 4.5.1

This subsection was deleted in its entirety. Report of change is addressed in Part II of R.61-64, X-Rays (Title B).

R.61-65 RHC 4.6

This section was deleted in its entirety. Registrants are not required to re-register equipment with the Department.

R.61-65 RHC 4.6.1

This subsection was deleted in its entirety. Registrants are not required to re-register equipment with the Department.

R.61-65 RHC 4.7

This section was updated for clarity and moved from RHC 4.7 to RHC 1.2.2.

R.61-65 RHC 4.7.1

This subsection was deleted in its entirety. Prohibited advertisement is addressed in Part I of R.61-64, X-Rays (Title B).

R.61-65 RHC 4.8

This section was deleted in its entirety. Applicable provisions are addressed in RHC 2.1.2.

R.61-65 RHC 4.8.1

This subsection was revised for stylistic purposes and moved from RHC 4.8.1 to RHC 2.1.2.

R.61-65 RHC 4.9

This section was deleted in its entirety. Facilities with particle accelerators are required to register as a facility. This is not an alternate registration to be maintained in lieu of equipment registration. Acquiring a Facility Registration Approval is addressed in RHC 2.3.

R.61-65 RHC 4.9.1

This subsection was deleted in its entirety. Facilities with particle accelerators are required to register as a facility. This is not an alternate registration to be maintained in lieu of equipment registration. Acquiring a Facility Registration Approval is addressed in RHC 2.3.

R.61-65 RHC 4.9.1.1

This subsection subitem was deleted in its entirety. Facilities with particle accelerators are required to register as a facility. This is not an alternate registration to be maintained in lieu of equipment registration. Acquiring a Facility Registration Approval is addressed in RHC 2.3.

R.61-65 RHC 4.9.1.2

This subsection subitem was deleted in its entirety. Facilities with particle accelerators are required to register as a facility. This is not an alternate registration to be maintained in lieu of equipment registration. Acquiring a Facility Registration Approval is addressed in RHC 2.3.

R.61-65 RHC 4.9.1.3

This subsection subitem was deleted in its entirety. Facilities with particle accelerators are required to register as a facility. This is not an alternate registration to be maintained in lieu of equipment registration. Acquiring a Facility Registration Approval is addressed in RHC 2.3.

R.61-65 RHC 4.9.1.4

This subsection subitem was deleted in its entirety. Facilities with particle accelerators are required to register as a facility. This is not an alternate registration to be maintained in lieu of equipment registration. Acquiring a Facility Registration Approval is addressed in RHC 2.3.

R.61-65 RHC 4.9.1.5

This subsection subitem was deleted in its entirety. Facilities with particle accelerators are required to register as a facility. This is not an alternate registration to be maintained in lieu of equipment registration. Acquiring a Facility Registration Approval is addressed in RHC 2.3.

R.61-65 RHC 4.9.1.6

This subsection subitem was deleted in its entirety. Facilities with particle accelerators are required to register as a facility. This is not an alternate registration to be maintained in lieu of equipment registration. Acquiring a Facility Registration Approval is addressed in RHC 2.3.

R.61-65 RHC 4.10

This section was deleted in its entirety. Exemptions from the registration of particle accelerators are addressed in RHC 2.2.4

R.61-65 RHC 4.11

This section was deleted in its entirety. The U.S Atomic Energy Commission was abolished by the Energy Reorganization Act of 1974.

R.61-65 RHC 4.11.1

This subsection was deleted in its entirety. The U.S Atomic Energy Commission was abolished by the Energy Reorganization Act of 1974.

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R.61-65 RHC 4.11.2

This subsection was deleted in its entirety. The U.S Atomic Energy Commission was abolished by the Energy Reorganization Act of 1974.

R.61-65 RHC 4.11.3

This subsection was deleted in its entirety. The U.S Atomic Energy Commission was abolished by the Energy Reorganization Act of 1974.

R.61-65 RHC 4.11.4

This subsection was deleted in its entirety. The U.S Atomic Energy Commission was abolished by the Energy Reorganization Act of 1974.

R.61-65 RHC 4.12

This subsection was deleted in its entirety. Equipment that is exempt from these regulations is addressed in RHC 2.2.

R.61-65 RHC 4.12.1

This subsection was revised to include the exemptions of any video display terminal and computer monitor when used without modification. This subsection was moved from RHC 4.12.1 to RHC 2.2.1.

R.61-65 RHC 4.12.2

This subsection was revised to clarify conditions required in order for other electronic equipment to be exempt from registration. The dose equivalent rate must be averaged over a ten square centimeter area and be less than 0.5 mR per hour at 5 cm at any accessible surface. This allows for a more consistent measurement so that a more accurate determination of qualifying for exemption from registration can be made. This subsection was moved from RHC 4.12.2 to RHC 2.2.2.

R.61-65 RHC 4.12.3

This subsection was revised to clarify the intent of the regulation by adding “are exempt from the requirements of this Part” to the end and moved from RHC 4.12.3 to RHC 2.2.4.

R.61-65 PART V

This part was added to designate shielding and safety design requirements. Proper shielding is required to protect all persons in the area from radiation in excess of designated limits set forth by these regulations. The title of this part was bolded and capitalized for stylistic purposes.

R.61-65 RHC 5.1

This section was added to require shielding for particle accelerators. Proper shielding is required to protect all persons in the area from radiation in excess of designated limits set forth by these regulations.

R.61-65 RHC 5.1.1

This subsection was added to require a qualified expert to be consulted in the design of a particle accelerator and to perform a radiation safety survey once the equipment is able to produce radiation. A qualified expert will possess the knowledge to supply the proper shielding to protect all persons in the area from radiation in excess of designated limits set forth by these regulations. The radiation safety survey will verify that the particle accelerator is properly shielded.

R.61-65 RHC 5.1.2

This subsection was added to ensure that each particle accelerator that is installed is supplied with the proper amount of primary and secondary shielding. This will allow all persons in the area to be protected from radiation in excess of designated limits set forth by these regulations.

R.61-65 PART VI

This part was added to organize requirements for particle accelerator controls and interlock systems. The title of this part was bolded and capitalized for stylistic purposes.

R.61-65 RHC 6.1

This section was moved from RHC 3.4 to RHC 6.1 and revised for clarity.

R.61-65 RHC 6.1.1

This subsection was moved from RHC 3.4.1 to RHC 6.1.1 and revised for clarity.

R.61-65 RHC 6.1.2

This subsection was moved from RHC 3.4.2 to RHC 6.1.2 and revised for clarity.

R.61-65 RHC 6.1.2.1

This subsection subitem was added to list an option for securing the controls of the particle accelerator. The controls should be secured to prevent unauthorized use.

R61-65 RHC 6.1.2.2

This subsection subitem was added to list an option for securing the controls of the particle accelerator. The controls should be secured to prevent unauthorized use.

R.61-65 RHC 6.1.3

This subsection was moved from RHC 3.4.3 to RHC 6.1.3 with revised requirements.

R.61-65 RHC 6.1.4

This subsection was added to require safety interlocks to be electrically independent of all other safety interlocks. This requirement prevents all safety interlocks from failing if only one fails.

R.61-65 RHC 6.1.5

This subsection was moved from RHC 3.4.6 to RHC 6.1.5.

R.61-65 RHC 6.1.6

This subsection was added to require safety interlocks to be designed such that any defect or failure will not allow the particle accelerator to operate. This prevents the particle accelerator from operating without working safety interlocks in place.

R.61-65 RHC 6.1.7

This subsection was moved from RHC 3.4.4 to RHC 6.1.7 with revised requirements.

R.61-65 RHC 6.1.8

This subsection was moved from RHC 3.4.5 to RHC 6.1.8 with revised requirements.

R.61-65 RHC 6.2

This section was added to require warning devices be in place in particle accelerator facilities. This will ensure that all persons are aware of high radiation areas.

R.61-65 RHC 6.2.1

This subsection was moved from RHC 3.5.2.1 to RHC 6.2.1 with revised requirements.

R.61-65 RHC 6.2.2

This subsection was added to require an audible warning device to be activated for 15 seconds before the creation of a high radiation area. This will ensure that all persons are aware of the potential for the area to become a high radiation area.

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R.61-65 RHC 6.2.3

This subsection was added to require barriers and pathways leading to high radiation areas to be posted in accordance with R.61-64, X-Rays (Title B). This will ensure that all high radiation areas are posted in such a way that all persons will be aware of the barriers of the high radiation area.

R.61-65 RHC 6.3

This section was added to require particular methods to be carried out during the operation of particle accelerators. Following the required methods of operation will ensure the particle accelerator is operated with all safety features in place.

R.61-65 RHC 6.3.1

This subsection was moved from RHC 3.3.6 to RHC 6.3.1 with revised requirements.

R.61-65 RHC 6.3.2

This subsection was added to ensure particle accelerators are secured when not in operation. This prevents unauthorized use of the particle accelerator.

R.61-65 RHC 6.3.3

This subsection was added to ensure that the operator does not use the interlocks to turn off the power to the machine as a standard practice. Interlocks are in place as a precautionary measure to ensure the machine is shielded properly during operation. Using the interlocks improperly along with a malfunction causing an interlock to fail to cut the power of the machine could result in an operator receiving excess exposure. This prevents the operator from counting on the interlock system to turn the machine off.

R.61-65 RHC 6.3.4

This subsection was moved from RHC 3.4.8 to RHC 6.3.4 with revised requirements.

R.61-65 RHC 6.3.5

This subsection was moved from RHC 3.4.7 to RHC 6.3.5 with revised requirements.

R.61-65 RHC 6.3.6

This subsection was moved from RHC 3.3.8 to RHC 6.3.6 and revised for clarity.

R.61-65 RHC 6.3.6.1

This subsection subitem was added to clarify the need to gain authorization from the Radiation Safety Officer or Radiation Safety Committee to intentionally bypass an interlock. This prevents the operation of a particle accelerator with intentionally bypassed interlocks without the consent of the person responsible for radiation safety at the facility.

R.61-65 RHC 6.3.6.2

This subsection subitem was added to clarify the need for a permanent log to be kept noting authorizations to operate a particle accelerator with interlocks intentionally bypassed. This allows the Radiation Safety Officer or Radiation Safety Committee and the Department to review the log for radiation safety practices. This subsection subitem also clarifies that a notice must be posted at the accelerator control console notifying personnel of the situation. This posting notifies persons in the area of the potential for excess radiation in the area.

R.61-65 RHC 6.3.6.3

This subsection subitem was added to clarify that the operation of a particle accelerator with interlocks intentionally bypassed must be terminated as soon as possible. This prevents extended use of the particle accelerator without all safety precautions in place.

R.61-65 RHC 6.3.7

This subsection was added to require a copy of the operating and emergency procedures be maintained at the control panel. This ensures that the proper procedures will be readily available to the operators and therefore followed as is required.

R.61-65 RHC 6.4

This section was moved from RHC 3.5 to RHC 6.4 and revised for clarity.

R.61-65 RHC 6.4.1

This subsection was moved from RHC 3.5.1 to RHC 6.4.1 with revised requirements.

R.61-65 RHC 6.4.2

This subsection was moved from RHC 3.6.3 to RHC 6.4.2 and reworded for clarity.

R.61-65 RHC 6.4.2.1

This subsection subitem was added to ensure that all surveys are done in accordance with the facility's written operating procedures established by a qualified expert or the Radiation Safety Officer. This ensures consistency between surveys and ensures the surveys are done properly in accordance with a qualified expert or the Radiation Safety Officer.

R.61-65 RHC 6.4.2.2

This subsection subitem was added to require the survey to include a diagram of the machine and the surrounding area. This ensures consistency in surveying particular points in the area so that comparisons can be made and any changes in radiation levels will be easily noticed. This will allow the person surveying the area to investigate the reason for the elevation in radiation and correct to the problem if necessary.

R.61-65 RHC 6.4.2.3

This subsection subitem was added to require survey results to be recorded as quantified units of radiation. This ensures a more accurate representation of the radiation levels measured at each point of the radiation survey while preventing terms like "okay" and "within limits" from being used.

R.61-65 RHC 6.4.3

This subsection was moved from RHC 3.5.2 to RHC 6.4.3 with revised requirements.

R.61-65 RHC 6.4.4

This subsection was moved from RHC 3.5.2.2 and RHC 3.5.2.3 with revised requirements.

R.61-65 RHC 6.4.5

This subsection was added to require that all area monitors and survey instruments be calibrated annually and after each service or repair. This ensures that the equipment used to measure radiation is accurate and prevents possible excess exposure to personnel.

R.61-65 RHC 6.4.6

This subsection was added to require the users of the radiation survey instruments to check the instrument for proper operation each day it is used by using a dedicated check source. This allows the user to be sure the instrument is functioning properly before each use. This will prevent false readings of "zero" in areas where radiation is present.

R.61-65 RHC 6.4.7

This subsection was added to require the registrant to perform periodic surveys to determine the amount of airborne particulate radioactivity present. This will prevent personnel from ingesting excess radioactive particulate in the air surrounding the particle accelerator.

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R.61-65 RHC 6.4.8

This subsection was added to require the registrant to perform periodic smear surveys to determine the degree of contamination on surfaces. This allows the registrant to be aware of surface contamination and possible leakage causing any excess contamination.

R.61-65 RHC 6.4.9

This subsection was added to require the registrant to retain records of all radiation protection surveys, calibrations, and instrumentation tests for five years. This subsection also requires the records to be maintained at the facility for inspection by the Department. This ensures the records required during the inspection of the facility by the Department are available.

R.61-65 PART VII

This part was added to address requirements for ventilation systems at particle accelerator facilities. This will prevent personnel from being exposed to excess radioactive material. The title of this part was bolded and capitalized for stylistic purposes.

R.61-65 RHC 7.1

This section was added to address requirements for ventilation systems at particle accelerator facilities. This will prevent personnel from being exposed to excess radioactive material.

R.61-65 RHC 7.1.1

This subsection was added to require registrants to provide a ventilation system to ensure that personnel entering an area with airborne radioactivity will not be exposed in excess of the limits specified in R.61-63, Radioactive Materials (Title A).

R.61-65 RHC 7.1.2

This subsection was added to require registrants to refrain from venting, releasing or discharging airborne radioactive material to an unrestricted area which exceeds the limits specified in R.61-63, Radioactive Materials (Title A). This is to ensure that the release of radioactive materials to unrestricted areas is as low as reasonably achievable. This will prevent personnel in unrestricted areas from being excessively exposed to radioactive material.

R.61-65 PART VIII

This part was added to organize all necessary definitions into one part for convenience. The title of this part was bolded and capitalized for stylistic purposes.

R.61-65 RHC 8.1

This section was moved from RHC 1.2.1 to RHC 8.1 and revised to update.

R.61-65 RHC 8.2

This section was moved from RHC 1.2.2 to RHC 8.2 and revised to update.

R.61-65 RHC 8.3

This section was added to define “Adult” as outlined by R.61-64, X-Rays (Title B).

R.61-65 RHC 8.4

This section was added to define “Annually” as outlined by R.61-64, X-Rays (Title B).

R.61-65 RHC 8.5

This section was added to define “Calibration” as outlined by R.61-64, X-Rays (Title B).

R.61-65 RHC 8.5.1

This subsection was added to clarify the definition of “Calibration” as outlined by R.61-64, X-Rays (Title B).

R.61-65 RHC 8.5.2

This subsection was added to clarify the definition of “Calibration” as outlined by R.61-64, X-Rays (Title B).

R.61-65 RHC 8.6

This section was added to define “Dedicated check source” as a source of radiation with a known value used to ensure a survey instrument is operational and responding to the levels of radiation in which it is designed to measure.

R.61-65 RHC 8.7

This section was added to define “Department” as outlined by R.61-64, X-Rays (Title B).

R.61-65 RHC 8.8

This section was moved from RHC 1.3.1 to RHC 8.8 and revised to update.

R.61-65 RHC 8.9

This section was added to define “Facility” as outlined by R.61-64, X-Rays (Title B).

R.61-65 RHC 8.10

This section was added to define “Healing arts” as outlined by R.61-64, X-Rays (Title B).

R.61-65 RHC 8.11

This section was moved from RHC 2.6.3 to RHC 8.11 and revised to update.

R.61-65 RHC 8.12

This section was added to define “Individual” as outlined by R.61-64, X-Rays (Title B).

R.61-65 RHC 8.13

This section was added to define “Industrial use particle accelerator” as any particle accelerator used for nonhuman applications.

R.61-65 RHC 8.14

This section was added to define “Interlock” as outlined by R.61-64, X-Rays (Title B).

R.61-65 RHC 8.15

This section was added to define “Investigative limits” as a preset administrative level of radiation exposure over a set time established by the Radiation Safety Officer or the Radiation Safety Committee, used to prevent an individual from exceeding annual occupational exposure limits.

R.61-65 RHC 8.16

This section was added to define “‘Limits’ or ‘Dose Limits’” as outlined by R.61-64, X-Rays (Title B).

R.61-65 RHC 8.17

This section was added to define “‘Monitoring,’ ‘radiation monitoring’ or ‘radiation protection monitoring’” as outlined by R.61-64, X-Rays (Title B).

R.61-65 RHC 8.18

This section was moved from RHC 1.2.5 to RHC 8.18 and revised to update.

R.61-65 RHC 8.19

This section was moved from RHC 3.2.3 to RHC 8.19 and revised to update.

R.61-65 RHC 8.20

This section was moved from RHC 3.2.4 to RHC 8.20 and revised for accuracy.

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R.61-65 RHC 8.21

This section was moved from RHC 1.2.6 to RHC 8.21 and revised to update.

R.61-65 RHC 8.22

This section was moved from RHC 1.2.7 to RHC 8.22 and revised to update.

R.61-65 RHC 8.23

This section was moved from RHC 1.2.8 to RHC 8.23 and revised to update.

R.61-65 RHC 8.24

This section was added to define “Protective barrier” as outlined by R.61-64, X-Rays (Title B).

R.61-65 RHC 8.24.1

This subsection was added to clarify a type of protective barrier and to define “Primary protective barrier” as outlined by R.61-64, X-Rays (Title B) with the removal of the phrase “other than the patient.” The removal of this phrase allows the definition to apply to nonhuman use particle accelerator installations.

R.61-65 RHC 8.24.2

This subsection was added to clarify a type of protective barrier and to define “Secondary protective barrier” as outlined by R.61-64, X-Rays (Title B).

R.61-65 RHC 8.25

This section was added to define “Qualified expert” as outlined by R.61-64, X-Rays (Title B).

R.61-65 RHC 8.26

This section was moved from RHC 1.2.9 to RHC 8.26 and revised to update.

R.61-65 RHC 8.27

This section was moved from RHC 2.6.2 to RHC 8.27 and revised to update.

R.61-65 RHC 8.28

This section was moved from RHC 1.2.10 to RHC 8.28 and revised to update.

R.61-65 RHC 8.29

This section was added to define “Registrant” as outlined by R.61-64, X-Rays (Title B).

R.61-65 RHC 8.30

This section was added to define “Registration” as outlined by R.61-64, X-Rays (Title B).

R.61-65 RHC 8.31

This section was moved from RHC 1.3.3 to RHC 8.31 and revised to update.

R.61-65 RHC 8.32

This section was moved from RHC 1.2.11 to RHC 8.32 and revised to update.

R.61-65 RHC 8.33

This section was added to define “Revocation” as a facility’s registration is withdrawn and is required to cease operation of all particle accelerators until such time as the Department deems necessary.

R.61-65 RHC 8.34

This section was added to define “Smear survey” as a survey performed to measure the amount of removable contamination.

R.61-65 RHC 8.35

This section was moved from RHC 1.2.12 to RHC 8.35.

R.61-65 RHC 8.36

This section was moved from RHC 1.2.13 to RHC 8.36 and revised to update.

R.61-65 RHC 8.37

This section was added to define “Target” as outlined by R.61-64, X-Rays (Title B).

R.61-65 RHC 8.38

This section was added to define “Test” as outlined by R.61-64, X-Rays (Title B).

R.61-65 RHC 8.39

This section was moved from RHC 1.2.15 to RHC 8.39 and revised to update.

R.61-65 RHC 8.40

This section was added to define “Vendor” as outlined by R.61-64, X-Rays (Title B).

R.61-65 RHC 8.41

This section was added to define “Very high radiation area” as outlined by R.61-64, X-Rays (Title B).

R.61-65 Appendix A

This appendix was added to refer registrants to additional requirements outlined by R.61-64, X-Rays (Title B). The topics listed are those that will most likely be referenced by a registrant. This list is not meant to limit additional requirements found in R.61-64, X-Rays (Title B). The title of this appendix was bolded for stylistic purposes.

Instructions: Replace R.61-65. Particle Accelerators (Title C) in entirety with this amendment.

Text:

61-65. Particle Accelerators (Title C).

Statutory Authority: 1976 Code Section 13-7-10 et seq.

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Appendix A

PART I GENERAL PROVISIONS

RHC 1.1 Purpose and Scope.

1.1.1 These regulations establish procedures for the registration and the use of particle accelerators.

1.1.2 Except as otherwise specifically provided, these regulations apply to all persons who develop, manufacture, receive, possess, use, transfer, own, or acquire any industrial use particle accelerator.

1.1.3 In addition to the requirements of this Regulation, all registrants are subject to the requirements of Parts I, II, III, VIII, and X of R.61-64, X-Rays (Title B). Registrants engaged in the healing arts are subject to

the requirements of Part VI of R.61-64, X-Rays (Title B). Registrants whose operations result in the production of radioactive material are also subject to the requirements of R.61-63, Radioactive Materials (Title A).

RHC 1.2 Prohibited Use.

1.2.1 It shall be unlawful to use, receive, own, or possess a particle accelerator unless the facility is registered with the Department and is operated in compliance with all applicable provisions.

1.2.2 No person, in any advertisement, shall refer to the fact that any particle accelerator facility, particle accelerator, or any activity under these regulations has been approved by the Department.

1.2.3 The use of any source of radiation may be prohibited when it is determined by the Department to be detrimental to public health and safety.

1.2.4 No person shall make, sell, lease, transfer, lend, repair, or install a particle accelerator or the supplies used in connection with such equipment unless such supplies or equipment, when properly placed in operation and properly used will meet the requirements of these regulations. Also, such persons shall be registered with the Department in accordance with RHC 2.5

RHC 1.3 Inspections.

1.3.1 Each registrant shall afford, at all reasonable times, the Department or its duly authorized representative the opportunity to inspect particle accelerators and the premises and facilities wherein such particle accelerators are used or stored.

1.3.2 Each registrant shall make available to the Department or its authorized representative for inspection, upon reasonable notice, records maintained pursuant to these regulations.

1.3.3 The Department shall have the right to enter at all reasonable times upon any private or public property, except property under the jurisdiction of the federal government, for the purpose of determining whether there is compliance with the provisions of the Act and regulations issued by the Department pursuant thereto.

1.3.4 The Department is authorized by law to enter and inspect property in order to determine compliance with Department regulations. Such entry and inspection falls under the health oversight activities exception of the Health Information Portability and Accountability Act (HIPAA). Therefore, when protected health information is necessary for determining compliance with Department regulations, protected health information may be used and disclosed to the Department without the subject's authorization.

RHC 1.4 Tests and Surveys.

1.4.1 Each registrant shall make or cause to be made such surveys as are necessary for him to comply with these regulations.

1.4.2 Each registrant shall perform, upon instructions from the Department, or shall permit the Department to perform, such reasonable tests as the Department deems appropriate or necessary including, but not limited to, tests of:

1.4.2.1 Particle accelerators;

1.4.2.2 Facilities wherein particle accelerators are used or stored;

1.4.2.3 Radiation detection and monitoring instruments; and

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1.4.2.4 Other equipment and devices used in connection with utilization or storage of particle accelerators.

1.4.3 Results of such tests and surveys shall be submitted to the Department upon request.

1.4.4 Radiation Survey Instruments.

1.4.4.1 The radiation survey instrument used shall have a minimum operation range consistent with the radiation field being measured.

1.4.4.2 Each radiation survey instrument shall be maintained annually.

1.4.4.2.1 Each radiation survey instrument shall be calibrated at intervals not to exceed 12 months and after each instrument servicing and repair.

1.4.4.2.2 Each radiation survey instrument shall be calibrated such that accuracy within 20 percent traceable to a national standard can be demonstrated.

1.4.4.2.3 Each radiation survey instrument shall be calibrated at two or more widely separated points, other than zero, on each scale.

1.4.4.2.4 Each radiation survey instrument shall be calibrated according to manufacturer's specifications.

1.4.4.2.5 Records of these calibrations shall be maintained for inspection by this Department.

1.4.4.3 The registrant shall make available to survey instrument users the manufacturer's instructions of the survey instrument including any restrictions of the operating techniques required for the proper operation of the particular instrument.

1.4.4.3.1 The registrant shall adhere to the manufacturer's instructions in all respects.

1.4.4.3.2 The user shall be able to demonstrate familiarity and competence with these instructions.

1.4.4.3.3 Documentation must be maintained, indicating that the user has read and agrees to adhere to the operating instructions.

1.4.4.3.4 The operator shall check each survey instrument for proper operation with a dedicated check source each day of use to ensure the instrument is operating properly. Documentation of these checks shall be maintained for Department review.

1.4.5 Records of all calibrations and instrumentation checks shall be retained for five years or until the next Department inspection, whichever is later.

RHC 1.5 Exemptions.

1.5.1 The Department may, upon application by any user or upon its own initiative, grant such exemptions from the requirements of these regulations as it determines are authorized by law and will not result in undue hazard to life, health, or property. Applications for exemptions shall specify why such exemptions are necessary.

1.5.2 Before granting an exemption, the Department shall determine that there is reasonable and adequate assurance that:

1.5.2.1 The occupational dose to any individual adult will not exceed those specified in "Occupational Dose Limits for Adults" of R.61-64, X-Rays (Title B).

1.5.2.2 The dose to an individual member of the public will not exceed those specified in "Dose Limits for Individual Members of the Public" of R.61-64, X-Rays (Title B).

1.5.2.3 There is no significant hazard to life or property.

RHC 1.6 Additional Requirements.

1.6.1 The Department may, by rule, regulation, or order, impose upon any registrant such requirements in addition to those established in these regulations as it deems appropriate or necessary to minimize danger to public health and safety or property.

1.6.2 The Department is authorized to inspect and investigate the premises and operations and personnel of any radiation installation, whether or not such installation is required to be registered by the Department, for the purpose of studying and evaluating the health hazard(s) caused by the use and operation of such machines and material.

1.6.3 **Equipment Not Covered In Regulations.** Prior to operation of radiation producing equipment not specifically covered in these regulations, the facility and the vendor shall submit for review and approval to the Department a listing of manufacturer's specifications for the equipment, an analysis of exposure rates around the equipment, and written operating procedures describing how the equipment is to be used.

1.6.4 **Radiation Safety Officer.** The registrant shall designate an individual who will be responsible for radiation protection at the facility. Such individual shall:

1.6.4.1 Be qualified by training and experience concerning all hazards and precautions involved in operating the equipment for which he is responsible;

1.6.4.2 Develop and implement a program of radiation safety for effective compliance with the applicable requirements of these regulations;

1.6.4.3 Give instructions concerning hazards and safety practices to individuals who may be exposed to radiation from the particle accelerators;

1.6.4.4 Ensure that surveys are made, procedures are carried out, and radiation safety instructions are given as required by these regulations.

RHC 1.7 Violations.

1.7.1 The Department may obtain an injunction or other court order prohibiting any violation or any provision of the Act or any regulation or order issued thereunder. Any person who willfully violates any provision of the Act or any regulation or order issued thereunder shall be guilty of a misdemeanor and, upon conviction, shall be punished by fine or imprisonment or both, as provided by the Act.

1.7.2 Any person found in violation of any regulation shall notify the Department, in writing, within 20 calendar days, from the date of citation with respect to action that has been taken or planned to correct the violation.

1.7.3 All violations shall be corrected within 60 calendar days from the date of citation. The Department shall be notified in writing of all action taken to correct the violations.

1.7.4 The Department is authorized to hold public hearings, compel attendance of witnesses, make findings of fact and determinations, and to assess fines and civil penalties relating to violations of the provisions of the Act or any regulation, temporary or permanent order, or final determination of the Department.

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1.7.5 The Department may impose a civil penalty not to exceed Twenty-five Thousand Dollars (\$25,000) on a person who violates a provision of the Act, rules, regulations, or orders issued. Each day of continued violation shall constitute a separate offense in computing the civil penalty. Civil penalties shall be assessed as specified in RHC 1.11.

RHC 1.8 Enforcement.

1.8.1 Upon determination by the Department that the Act or these regulations have been violated or that a public health risk exists, the Department will:

1.8.1.1 Provide written notification to the non-compliant registrant as soon as possible after violations are noted which:

1.8.1.1.1 Cites each section of the Act or regulations violated.

1.8.1.1.2 Specifies the manner in which the registrant failed to comply.

1.8.1.1.3 Requires submission of a timely and comprehensive corrective action plan, including a time schedule for completion of the plan.

1.8.1.1.4 Establishes a firm time schedule within which a corrective action plan must be submitted. The Department will approve the plan and proposed time schedule for its completion if the plan is adequate.

1.8.1.2 In cases where the registrant fails to comply with the conditions of the written notification, the Department will seek further enforcement action, appropriate penalties, and direct remedial relief.

1.8.1.3 If the registrant fails to comply with the requirements of the regulations within ten days, or in cases where there is an imminent hazard to human health and safety, the Department will take one or a combination of the following steps:

1.8.1.3.1 Issue an administrative order which:

1.8.1.3.1.1 Imposes an appropriate civil penalty; or

1.8.1.3.1.2 Requires corrective action; or

1.8.1.3.1.3 Impounds or orders the impounding of sources of radiation in accordance with the Act; or

1.8.1.3.1.4 Revokes the facility's registration in accordance with Part II; or

1.8.1.3.2 Requests the Department attorney or the attorney general to seek court action to enjoin violations and seek conviction for a simple misdemeanor; or

1.8.1.3.3 Take enforcement action that the Department feels appropriate and necessary and is authorized by law.

1.8.2 Under an actual or potential condition posing a risk to any individual comparable to a Major severity level violation, the Department may immediately impound or order the impounding of sources of radiation in accordance with the Act.

1.8.3 The Department may immediately impound or order the impounding of sources of radiation in the possession of any person who fails to comply with these regulations or provisions of the Act, or when the Department deems a situation to constitute an emergency.

RHC 1.9 Records.

1.9.1 Each registrant shall keep records showing the receipt, transfer, use, storage, and disposal of all particle accelerators and major components. These records shall be maintained by the registrant until disposal is authorized by the Department. All records shall be readily available at the facility for Department review. Additional record requirements are specified elsewhere in these regulations.

1.9.2 The registrant shall maintain the following information for each particle accelerator system for inspection by the Department:

1.9.2.1 Model and serial numbers of all tubes and controls;

1.9.2.2 Records of surveys, maintenance, and modifications performed on the particle accelerator(s), with the names of persons who performed such services. Records shall be maintained for five years or until the next Department inspection, whichever is later;

1.9.2.3 A copy of all correspondence with the Department regarding that particle accelerator system.

1.9.3 Each registrant shall maintain a current inventory listing that indicates the model number, serial number, and location and status of each control. The inventory listing shall be made available to the Department upon request.

1.9.4 All records required by these regulations shall be accurate and true.

RHC 1.10 Communications.

1.10.1 All communications and reports concerning these regulations and registrations filed thereunder, shall be addressed to the Department at:

SC Department of Health and Environmental Control
Bureau of Radiological Health
2600 Bull Street
Columbia, SC 29201

1.10.2 Material False Statements. It shall be unlawful to make a material false statement to the Department regarding information contained in the application for registration, information pertaining to an inspection or any other information required by any provision of these regulations.

RHC 1.11 Administration of Civil Penalties.

1.11.1 Assessment. Assessment of civil penalties shall be based on the following criteria:

1.11.1.1 The seriousness of the violation(s);

1.11.1.2 Previous compliance history;

1.11.1.3 The amount necessary to deter future violations;

1.11.1.4 Efforts to correct the violation; and

1.11.1.5 Any other mitigating or enhancing factors.

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1.11.2 Severity Levels. The seriousness of violations shall be categorized by one of the following severity levels.

1.11.2.1 Major. Violations that are most significant and have a direct negative impact on occupational or public health and safety, or which represent a significant deviation from the requirements of this regulation.

1.11.2.2 Moderate. Violations that are of more than minor significance, but if left uncorrected, could lead to more serious circumstances, or which represent a moderate deviation from the requirements of this regulation.

1.11.2.3 Minor. Violations that are of minor safety significance, or which represent a minor deviation from the requirements of this regulation.

1.11.2.4 In each case, the severity of a violation will be characterized at the level best suited to the significance of the particular violation. In some cases, violations may be evaluated in the aggregate and a single severity level assigned for a group of violations.

1.11.3 Application. Adjustments to the values listed in RHC 1.11.4.1 under each severity level may be made for the presence or absence of the following factors:

1.11.3.1 Prompt Identification and Reporting. Reduction of a civil penalty may be given when a registrant identifies the violation and promptly reports the violation to the Department. In weighing this factor, consideration will be given to, among other things, the length of time the violation existed prior to discovery, the opportunity available to discover the violation, the ease of discovery and the promptness and completeness of any required report. No consideration will be given to this factor if the registrant does not take immediate action to correct the problem upon discovery.

1.11.3.2 Corrective Action to Prevent Recurrence. Recognizing that corrective action is always required to meet regulatory requirements, the promptness and extent to which the registrant takes corrective action, including actions to prevent recurrence, may be considered in modifying the civil penalty to be assessed. Unusually prompt and extensive corrective action may result in reducing the proposed civil penalty. On the other hand, the civil penalty may be increased if initiation of corrective action is not prompt or if the corrective action is only minimally acceptable. In weighing this factor, consideration will be given to, among other things, the timeliness of the corrective action, degree of registrant initiative, and comprehensiveness of the corrective action - such as whether the action is focused narrowly to the specific violation or broadly to the general area of concern.

1.11.3.3 Compliance History. Reduction of the civil penalty may be given for prior good performance in the general area of concern. In weighing this factor, consideration will be given to, among other things, the effectiveness of previous corrective action for similar problems, overall performance such as previous compliance history in the area of concern. For example, failure to implement previous corrective action for prior similar problems may result in an increase in the civil penalty.

1.11.3.4 Prior Notice of Similar Events. The civil penalty may be increased for cases where the registrant had prior knowledge of a problem as a result of a registrant audit, or specific industry notification, and had failed to take effective preventive steps.

1.11.3.5 Multiple Occurrences. The civil penalty may be increased where multiple examples of a particular violation are identified during the inspection period.

1.11.3.6 The above factors are additive. However, the civil penalty will not exceed twenty-five thousand dollars (\$25,000) for any one violation. Each day of noncompliance shall constitute a separate violation.

1.11.4 The Department shall issue civil penalties according to the following schedule:

1.11.4.1 Penalty Matrix

Deviation from Requirement:	Major (11-30)	Moderate (4-10)	Minor (1-3)
Potential for Harm:	\$25,000-5,000	\$15,000-5,000	\$10,000-2,500
Major (11-70)	\$10,000-2,500	\$7,500-1,000	\$5,000-500
Moderate (6-10)	\$5,000-1,000	\$3,000-500	\$2,500-250
Minor (0-5)			

Calculation of Base Penalty:

Each violation is assigned a relative point value as follows: Potential for Harm- 0-70, with 70 being maximum harm; Deviation from Requirement- 1-30, with 30 being the maximum deviation. Add the two values together, convert to a decimal value (15 to .15, for example), and multiply by the maximum per day per violation per civil penalty (\$25,000). This is the base civil penalty per violation. The base penalty may be increased for repeat violations, multi-day penalties, or degree of recalcitrance, willfulness, negligence, or indifference.

Minimum Increase for Repeat Violations Found on Follow-up Inspections or Reinspections

Second Offense (First Follow-up Inspection or First Reinspection)	15%
Third Offense (Second Follow-up Inspection or Second Reinspection)	30%
Fourth Offense (Third Follow-up Inspection or Third Reinspection)	45%
Fifth and Subsequent Offenses	60%

Multi-Day Penalties:

Increase penalty 1% to 7% for each day of noncompliance.

Degree of Recalcitrance, Willfulness, Negligence, or Indifference:

Increase Penalty 10% to 50%.

1.11.4.2 The Department reserves the right to impose a civil penalty up to Twenty-five Thousand Dollars (\$25,000) on a person who violates the regulations in such a manner so as to present an imminent hazard to human health and safety. The Twenty-five Thousand Dollar civil penalty may be levied for the following:

1.11.4.2.1 Two or more incidents of workers receiving excess radiation exposures, when such exposures are contrary to the occupational dose limits for adults as set forth in the provisions of Part III of R.61-64, X-Rays (Title B).

1.11.4.2.2 Two or more incidents of members of the general public, or non-radiation workers, receiving excess radiation exposures contrary to the dose limits for individual members of the public as set forth in the provisions of Part III of R.61-64, X-Rays (Title B).

1.11.4.2.3 Two or more incidents on two consecutive inspections of failing to perform required surveys, tests, checks, calibrations or evaluations. (RHC 1.4)

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1.11.4.2.4 Four or more incidents in a one year period of making, selling, leasing, transferring, lending, assembling, or installing equipment without the equipment meeting all applicable regulations when properly placed in operation. (RHC 2.5.3)

PART II REGISTRATION PROCEDURE

RHC 2.1 Purpose and Scope.

This part provides for the registration of industrial use particle accelerators (controls and tubes) and facilities.

2.1.1 Except as specifically exempted in RHC 2.2, each person who develops, manufactures, receives, possesses, uses, transfers, owns, or acquires any industrial use particle accelerator shall register the control and tubes of such machine with the Department in accordance with the requirements of this Part.

2.1.2 In addition to the requirements of this Part, all registrants are subject to the applicable provisions of other Parts of these regulations.

RHC 2.2 Exemptions.

2.2.1 Television receivers, video display terminals, and computer monitors, when used without modification to their internal or external construction, are exempt from the requirements of this Part.

2.2.2 Electronic equipment producing radiation incidental to its operation for other purposes is exempt from the registration requirements of this Part if dose equivalent rate averaged over an area of 10 square centimeters does not exceed 0.5 mrem per hour at 5 centimeters from any accessible surface of such equipment. The production, testing, or factory servicing of such equipment is not exempt.

2.2.3 Any facility where a federal agency has exclusive jurisdiction is exempt from the requirements of this Part.

2.2.4 Particle accelerators while in transit or storage incident thereto are exempt from the requirements of this Part.

RHC 2.3 Facility Registration Approval.

2.3.1 Any facility planning to install a particle accelerator (fixed or mobile) shall meet the following provisions:

2.3.1.1 Prior to installation of any particle accelerator, the facility where the installation will be shall submit to the Department the following information:

2.3.1.1.1 Facility Name, Location Address, and Mailing Address;

2.3.1.1.2 The name of the Radiation Safety Officer and the individual's qualifications to serve in such a capacity;

2.3.1.1.3 Type and make of particle accelerator to be installed;

2.3.1.1.4 Operating procedures as required by RHC 3.3;

2.3.1.1.5 A training plan as required by RHC 3.2;

2.3.1.1.6 The name, address, and contact person of the company selling and installing the equipment. If more than one company is involved in the sale and/or installation, then the above information shall be provided for all companies involved.

2.3.1.2 Upon review and approval of the above information, the Department shall issue a facility registration approval.

2.3.1.3 A facility shall not install or cause to be installed any particle accelerator until the Department has issued a facility registration approval.

RHC 2.4 Equipment Registration Requirements, Users of Particle Accelerators.

2.4.1 Initial Equipment Registration. Every person possessing a particle accelerator shall register the machine's control and tubes with the Department within 30 days of the date of acquisition. Registration shall be made on Form DHEC 819 furnished by the Department.

2.4.1.1 Upon registration of a control, the Department shall issue the facility a registration sticker to be placed on each control. The registration sticker shall be placed on the control panel in a clearly visible location.

2.4.1.2 When a control is removed from a facility, the facility shall remove the registration sticker.

2.4.1.3 A registration sticker on a control displaying the facility's proper name shall be considered indicative of a facility's and a control's registration status, as required to be confirmed by RHC 2.5.3.

2.4.2 Renewal of Equipment Registration. The Department shall provide an annual re-registration statement to all registrants. The re-registration statements shall be reviewed, corrected, signed, and returned to the Department within 30 days.

2.4.3 Report of Change. The registrant shall report to the Department, within 30 days, any changes of status affecting any particle accelerator or facility. Report of a change of status shall be made in writing and forwarded to the Department.

2.4.4 Verification of Service Representative. Each registrant shall require any person furnishing particle accelerator servicing or services as described in this Part to provide evidence that he/she has been registered with the Department as a vendor in accordance with these regulations.

RHC 2.5 Vendor Registration and Obligation.

2.5.1 Each person who is a) engaged in the business of selling, leasing, or installing particle accelerators or machine components; or b) offering to sell, lease, or install particle accelerators or machine components; or c) engaged in the business of furnishing or offering to furnish any equipment services in South Carolina shall apply for registration as a vendor with the Department within 30 days following the effective dates of these regulations or thereafter prior to furnishing or offering to furnish any such services.

2.5.1.1 In-house personnel employed by a registered facility or corporation shall be exempt from the registration requirement, provided such personnel:

2.5.1.1.1 Shall meet the education, training, and experience requirements for the appropriate vendor Class and;

2.5.1.1.2 Shall exclusively service one facility or corporation.

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2.5.1.2 Documentation of education, training, and experience for in-house service personnel shall be maintained by the facility or corporation and available for Department review.

2.5.2 Any person who sells, leases, transfers, lends, moves, assembles or installs particle accelerators in South Carolina shall notify the Department of the following within 30 days of the transaction:

2.5.2.1 The name and address of persons who have received the machine;

2.5.2.2 The manufacturer, control model and serial number, and tube(s) model and serial number of each particle accelerator transferred; and

2.5.2.3 The date of transfer of each particle accelerator.

2.5.2.4 Notification to the Department shall be made on DHEC Form 823. A DHEC 823 form shall be submitted to the Department each month by Class I and Class II vendors, as outlined in Part II "Registration of X-Ray Machines and Services" of R.61-64, X-Rays (Title B), regardless of whether a particle accelerator was sold that month.

2.5.3 No person shall make, sell, lease, transfer, lend, maintain, repair, assemble, reassemble, reinstall or install particle accelerators or the supplies used in connection with such machines unless such supplies and equipment, when properly placed in operation and used, meet the requirements of these regulations. Each vendor shall ensure that the facility it is providing with services or supplies is registered with the Department prior to providing services or supplies.

2.5.4 Each vendor shall maintain records for review by the Department. These records shall include, at a minimum:

2.5.4.1 All information required by RHC 2.5;

2.5.4.2 Tests performed at the time of installation to ensure that the equipment complies with these regulations. A copy of these results shall be provided to the registrant at the time of installation;

2.5.4.3 Records of any routine maintenance, repair, alterations, or reassembly of particle accelerators. Records of maintenance, repair, alterations, or reassemblies shall include the date that the service was performed and the legible signature of the person performing the service. A copy of these records shall be provided to the registrant at the time the service is provided;

2.5.4.4 Names of all employees and their dates of employment with the vendor. Records shall also be maintained of training provided to the employees during their term of employment.

2.5.5 All records required by this Part shall be maintained by the vendor for review by the Department. Training records shall be retained for personnel currently acting in any role as described in this Part. All other records shall be retained for five years. All records shall be accurate and factual.

2.5.6 Each vendor shall maintain sufficient calibrated and operable instruments to perform the testing appropriate to the class in which the vendor is registered. Instruments must be calibrated with sources consistent with the conditions under which they are used. Records shall be maintained of the calibrations performed on instrumentation used for testing.

2.5.6.1 Survey meters used for radiation area surveys shall be calibrated at intervals not to exceed 12 months and after each instrument servicing.

RHC 2.6 Modification, Revocation, Termination of Registrants.

2.6.1 The terms and conditions of all registrations are subject to amendment, revision, or modification and all registrations are subject to suspension or revocation by reason of:

2.6.1.1 Amendments to the Act;

2.6.1.2 Rules and regulations adopted pursuant to provisions of the Act; or

2.6.1.3 Orders issued by the Department.

2.6.2 Any registration may be revoked, suspended, or modified in whole or part:

2.6.2.1 For any material false statement in the application or in any statement of fact required by provisions of this Part;

2.6.2.2 Because of any statement of fact, any report, record, inspection, or other means which would warrant the Department to refuse to grant a registration on original application; or

2.6.2.3 For violations of, or failure to observe any of the terms and conditions of the Act, the registration, these regulations, or any order of the Department.

2.6.3 An order of revocation may be appealed pursuant to applicable law, including S.C. Code Title 44, Chapter 1; and Title 1, Chapter 23.

2.6.4 Except in cases of willfulness or those in which the public health, interest, or safety requires otherwise, prior to the institution of proceedings for modification, revocation, or suspension of a registrant, the Department shall:

2.6.4.1 Call to the attention of the registrant in writing the facts or conduct which may warrant these actions; and

2.6.4.2 Provide an opportunity for the registrant to demonstrate or achieve compliance with all regulations.

2.6.5 The Department may terminate a registration upon written request submitted by the registrant to the Department.

2.6.6 The provisions of this Part shall apply to both registration of particle accelerators and registration of particle accelerator services (vendors).

RHB 2.7 Annual Fees.

2.7.1 Any person issued or granted a registration for the possession and use of particle accelerator(s) shall pay an annual registration fee. Vendors and out-of-state facilities shall pay an annual flat fee. The annual registration fee shall be due on January 15 of each year.

2.7.2 Persons failing to pay the fees required by RHC 2.7.1 by March 15 of that year shall also pay a penalty of 50 Dollars. If the required fees are not paid by April 15 of that year, the registrant shall be notified by certified mail to be sent to his last known address that his registration is revoked, and that any activities permitted under the authority of the registration must cease immediately.

2.7.3 A registrant suspended for failure to pay the required fee under RHC 2.7.2 may be reinstated by the Department upon payment of the required fee, the penalty of 50 Dollars and an additional penalty of 100 Dollars,

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if the registrant is otherwise in good standing and presents to the Department a satisfactory explanation for his failure to pay the required fee.

2.7.4 Payment of fees shall be made in accordance with the instructions of a "Statement of Fees Due" issued annually by the Department.

2.7.5 Fees required by RHC 2.7.1 for a particle accelerator, out-of-state facility, or vendor registration which is issued during a calendar year shall be prorated for the remainder of that year based on the date of issuance of the registration.

2.7.6 Schedule of Fees. The fee schedule pursuant to Part II "Annual Fees" of R.61-64, X-Rays (Title B) shall be used by the Department to determine the annual fee due.

PART III

RADIATION SAFETY REQUIREMENTS FOR RADIATION SAFETY OFFICERS AND OPERATORS

RHC 3.1 Minimum Personnel Radiation Safety Requirements for Radiation Safety Officers and Operators.

3.1.1 No registrant shall permit any individual to act as a Radiation Safety Officer until such person:

3.1.1.1 Has been instructed in the subjects outlined in RHC 3.2 of this Part;

3.1.1.2 Has received copies of and instruction in these regulations and the registrant's operating and emergency procedures and shall have demonstrated understanding thereof; and

3.1.1.3 Has demonstrated competence to use the particle accelerator, related handling tools, and survey instruments that will be employed in the assignment.

3.1.2 No registrant shall permit any individual to act as an operator until such person:

3.1.2.1 Has been instructed in the subjects outlined in RHC 3.2 of this Part;

3.1.2.2 Has received copies of and instruction in these regulations and the registrant's operating and emergency procedures and shall have demonstrated understanding thereof; and

3.1.2.3 Has demonstrated competence to use, under the personal supervision of the Radiation Safety Officer, the particle accelerator, related handling tools, and survey instruments that will be employed in his assignment.

3.1.2.4 The registrant shall have all training procedures and testing documented in writing and available for the Department's review.

3.1.3 Maintenance personnel performing any activities involving a particle accelerator shall have minimum training as outlined in RHC 3.1.2 of this Part.

RHC 3.2 Minimum Subjects to be Covered in Training Radiation Safety Officers and Operators.

3.2.1 No registrant shall permit any individual to act as an operator of a particle accelerator until such individual has been instructed in radiation safety and shall have demonstrated an understanding in the following:

3.2.1.1 Fundamentals of Radiation Safety:

3.2.1.1.1 Characteristics of ionizing radiation;

- 3.2.1.1.2 Units of radiation dose (rem or Sievert);
- 3.2.1.1.3 Hazards of exposure to radiation;
- 3.2.1.1.4 Levels of radiation from sources of radiation;
- 3.2.1.1.5 Methods of controlling radiation dose;
 - 3.2.1.1.5.1 Working time;
 - 3.2.1.1.5.2 Working distances; and
 - 3.2.1.1.5.3 Shielding.

3.2.1.2 Radiation Detection Instrumentation to be Used:

- 3.2.1.2.1 Use of radiation survey instruments;
 - 3.2.1.2.1.1 Operation;
 - 3.2.1.2.1.2 Calibration; and
 - 3.2.1.2.1.3 Limitations.
- 3.2.1.2.2 Survey techniques; and
- 3.2.1.2.3 Use of personnel monitoring equipment:
 - 3.2.1.2.3.1 Film badges or other approved dosimeters; and
 - 3.2.1.2.3.2 Pocket dosimeters or pocket chambers, if applicable.
- 3.2.1.3 Operation and control of particle accelerators and interlock systems.
- 3.2.1.4 The requirements of pertinent state regulations.
- 3.2.1.5 The registrant's written operating and emergency procedures.

RHC 3.3 Operating and Emergency Procedures.

3.3.1 The registrant shall have written operating and emergency procedures. These procedures shall include instruction in:

3.3.1.1 The handling and use of particle accelerators to be employed such that no person is likely to be exposed to radiation doses in excess of the occupational dose limits established in Part III "Standards for Protection Against Radiation" of R.61-64, X-Rays (Title B);

- 3.3.1.2 Methods and occasions for conducting radiation surveys;
- 3.3.1.3 Methods for controlling access to radiation areas;
- 3.3.1.4 Methods for locking and securing particle accelerators when not in use or in storage;

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3.3.1.5 Personnel monitoring and the use of personnel monitoring equipment, including steps that must be taken by radiation personnel in the event a pocket dosimeter is found to be off-scale;

3.3.1.6 The proper handling of exposed personnel;

3.3.1.7 Minimizing exposure of individuals in the event of an accident;

3.3.1.8 The procedure for notifying proper persons in the event of an accident. This shall include the listing of names, addresses, and telephone numbers; and

3.3.1.9 Maintenance of records.

RHC 3.4 Authority and Responsibility for the Radiation Safety Officer.

3.4.1 The registrant shall provide the Radiation Safety Officer sufficient authority, organizational freedom, time, resources, and management prerogative, to:

3.4.1.1 Identify radiation safety problems;

3.4.1.2 Initiate, recommend, or provide corrective actions;

3.4.1.3 Stop unsafe operations; and

3.4.1.4 Verify implementation of corrective actions.

3.4.2 The registrant shall establish either monthly or quarterly investigative limits to ensure individuals will not exceed annual occupational exposure limits.

PART IV PERSONNEL MONITORING REQUIREMENTS

RHC 4.1 Personnel Monitoring.

4.1.1 No registrant shall permit any individual to act as a Radiation Safety Officer or as an operator unless, at all times during radiographic operations, each such person wears a film badge, thermoluminescent dosimeter (TLD), or other dosimeter approved by the Department.

4.1.2 All provisions of Part III "Standards for Protection Against Radiation" of R.61-64, X-Rays (Title B) apply.

PART V SHIELDING AND SAFETY DESIGN REQUIREMENTS

RHC 5.1 Shielding.

5.1.1 A qualified expert, acceptable to the Department, shall be consulted in the design of a particle accelerator installation and called upon to perform a radiation survey when the accelerator is first capable of producing radiation.

5.1.2 Each particle accelerator installation shall be provided with such primary and secondary barriers as are necessary to assure compliance with occupational dose limits as outlined in Part III "Standards for Protection Against Radiation" of R.61-64, X-Rays (Title B).

PART VI
PARTICLE ACCELERATOR CONTROLS AND INTERLOCK SYSTEMS

RHC 6.1 Particle Accelerator Controls and Interlock Systems.

6.1.1 Instrumentation, readouts, and controls on the particle accelerator control console shall be clearly identified and easily discernible.

6.1.2 Accelerator controls shall be equipped with one or more of the following:

6.1.2.1 A keyswitch or other device which will render the console inoperative when the key or device is removed or;

6.1.2.2 A password protected computer system.

6.1.3 Each entrance into a target room or other high radiation area shall be equipped with multiple safety interlocks that shut down the machine under conditions of barrier penetration.

6.1.4 Each safety interlock shall be on a circuit which shall allow it to operate independently of all other safety interlocks.

6.1.5 All shielding that is temporary, movable, or detachable shall be interlocked.

6.1.6 All safety interlocks shall be designed so that any defect or component failure in the safety interlock system prevents operation of the accelerator.

6.1.7 When a safety interlock system has been tripped, it shall only be possible to resume operation of the accelerator by manually resetting controls at the position where the safety interlock has been tripped and, lastly, at the main control console.

6.1.8 A scram button or other emergency power cutoff switch shall be located and easily identifiable in all high radiation areas. Such a cutoff switch shall include a manual reset so that the accelerator cannot be restarted from the accelerator control console without resetting the cutoff switch.

RHC 6.2 Warning Devices.

6.2.1 Each location designated as a high radiation area, and each entrance to such location shall be equipped with easily observable warning lights that operate when, and only when, radiation is being produced.

6.2.2 Each high radiation area shall have an audible warning device which shall be activated for 15 seconds prior to the possible creation of such high radiation area. Such warning devices shall be clearly discernible in all high radiation areas.

6.2.3 Barriers, temporary or otherwise, and pathways leading to high radiation areas shall be posted in accordance with Part III "Standards for Protection Against Radiation" of R.61-64, X-Rays (Title B).

RHC 6.3 Methods of Operation.

6.3.1 The name(s) of the operator, as outlined in Part III of these regulations, shall be displayed at the control of each particle accelerator. Only the operator(s) whose name is displayed shall operate the particle accelerator.

6.3.2 Particle accelerators, when not in operation, shall be secured to prevent unauthorized use.

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6.3.3 The safety interlock system shall not be used to turn off the accelerator beam except in an emergency.

6.3.4 All safety and warning devices, including interlocks, shall be checked for proper operation at intervals not to exceed three months. Results of such tests shall be maintained at the accelerator facility for inspection by the Department.

6.3.5 Electrical circuit diagrams of the accelerator and the associated safety interlock systems shall be kept current and maintained for inspection by the Department and shall be available to the operator at each accelerator facility.

6.3.6 If, for any reason, it is necessary to intentionally bypass a safety interlock or interlocks, such action shall be:

6.3.6.1 Authorized by the Radiation Safety Committee or Radiation Safety Officer;

6.3.6.2 Recorded in a permanent log and a notice posted at the accelerator control console; and

6.3.6.3 Terminated as soon as possible.

6.3.7 A copy of the current operating and the emergency procedures shall be maintained at the accelerator control panel.

RHC 6.4 Radiation Monitoring Requirements.

6.4.1 There shall be available at each particle accelerator facility appropriate portable monitoring equipment which is operable and has been appropriately calibrated for the radiation energy levels being produced at the facility.

6.4.2 A radiation protection survey shall be performed and documented by a qualified expert, acceptable to the Department, at intervals not to exceed three months and when changes have been made in shielding, operation, equipment, workload, or occupancy of adjacent areas.

6.4.2.1 All surveys shall be made in accordance with the written procedures established by a qualified expert acceptable to the Department and the Radiation Safety Officer.

6.4.2.2 All surveys shall include a diagram of the machine and adjacent areas including, but not limited to, the operator's area at the control panel.

6.4.2.3 All survey results shall be recorded using quantified units of radiation at each survey point.

6.4.3 Radiation levels in all high radiation areas shall be continuously monitored. The monitoring devices shall be electrically independent of the accelerator control and safety interlock systems and capable of providing a readout at the control panel.

6.4.4 Personnel entering a target room or high radiation area shall use a radiation monitor capable of producing an audible alarm or "chirp" in the presence of radiation. The alarm shall be fully functional and checked for operability in accordance with RHC 6.4.6.

6.4.5 All area monitors and survey instruments shall be calibrated at intervals not to exceed one year and after each servicing and repair.

6.4.6 The operator shall check each survey instrument for proper operation with a dedicated check source each day in which the instrument is used to ensure the instrument is operating properly.

6.4.7 Whenever applicable, periodic surveys shall be made to determine the amount of airborne particulate radioactivity present.

6.4.8 Whenever applicable, periodic smear surveys shall be made to determine the degree of contamination.

6.4.9 Records of all radiation protection surveys, calibrations, and instrumentation tests shall be maintained at the accelerator facility for inspection by the Department. The registrant shall retain these records for five years or until the next Department inspection, whichever is later.

PART VII VENTILATION SYSTEMS

RHC 7.1 Ventilation Systems.

7.1.1 Ventilation systems shall be provided to ensure that personnel entering any area where airborne radioactivity may be produced will not be exposed to airborne radioactive material in excess of those limits specified in R.61-63, Radioactive Materials (Title A).

7.1.2 A registrant shall not vent, release, or otherwise discharge airborne radioactive material to an unrestricted area which exceeds the limits specified in R.61-63, Radioactive Materials (Title A). Every effort must be made to maintain releases of radioactive material to unrestricted areas as far below these limits as is reasonably achievable.

PART VIII DEFINITIONS

8.1 "Accelerator facility" (See "Facility").

8.2 "Act" means Act No. 223, Atomic Energy and Radiation Control Act enacted by the 1967 Session South Carolina Legislature. [Section 13-7-40 et seq., S.C. Code of Laws (1976, as amended)].

8.3 "Adult" means an individual 18 or more years of age.

8.4 "Annually" means at intervals not to exceed 12 consecutive months.

8.5 "Calibration" means:

8.5.1 the response or reading of an instrument relative to a series of known radiation values over the range of the instrument; or

8.5.2 the strength of a source of radiation relative to a standard.

8.6 "Dedicated check source" means a source of radiation with a known value used to ensure a survey instrument is operational and responding to the levels of radiation in which it is designed to measure.

8.7 "Department" means the South Carolina Department of Health and Environmental Control.

8.8 "Dose" is a generic term which means absorbed dose, dose equivalent, effective dose equivalent, or total effective dose equivalent.

8.9 "Facility" means the location at which one or more particle accelerators are installed or located within one building, vehicle, or under one roof and are under the same administrative control.

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8.10 "Healing arts" means any system, treatment, operation, diagnosis, prescription, or practice for the ascertainment, cure, relief, palliation, adjustment, or correction of any human disease, ailment, deformity, injury, or unhealthy or abnormal physical or mental condition.

8.11 "High radiation area" means any area, accessible to individuals, in which there exists radiation at such levels that the whole body could receive in any one hour, a dose in excess of 0.1 rem (mSv) in one hour at 30 centimeters from the radiation source or from any surface that the radiation penetrates.

8.12 "Individual" means any human being.

8.13 "Industrial use particle accelerator" means any particle accelerator used for nonhuman applications.

8.14 "Interlock" means a device for precluding access to a high radiation area by automatically reducing the exposure rate upon entry by personnel.

8.15 "Investigative limits" means a preset administrative level of radiation exposure over a set time, established by the Radiation Safety Officer or the Radiation Safety Committee, used to prevent an individual from exceeding annual occupational exposure limits.

8.16 "Limits" or "dose limits" means the permissible upper bounds of radiation doses.

8.17 "Monitoring", "radiation monitoring" or "radiation protection monitoring" means the measurement of radiation levels, concentrations, surface area concentrations or quantities of radioactive material and the use of the results of these measurements to evaluate potential exposures and doses.

8.18 "Occupational dose" means the dose received by an individual in a restricted area or in the course of employment in which the individual's assigned duties involve exposure to radiation, whether in the possession of the registrant or other person. Occupational dose does not include dose received from background radiation, as a patient from medical practices, from voluntary participation in medical research programs, or as a member of the general public.

8.19 "Operating procedures" means detailed written instructions including, but not limited to, use of the particle accelerator, use of shielding and barriers, quality assurance methods, occasions and methods for conducting area surveys, use of personnel monitoring devices, and alignment, calibration, or preventative maintenance of the particle accelerator. Routine and emergency radiation safety considerations are part of these procedures. Emergency procedures shall include methods of notifying proper persons in the event of an emergency, to include the listing of names, addresses and phone numbers.

8.20 "Operator" means a person qualified by training and experience as defined in RHC 3.2 to assume responsibility for the safe operation of a particle accelerator.

8.21 "Particle accelerator" means any machine capable of accelerating electrons, protons, deuterons, or other nuclear particles in a vacuum and discharging these particles into a medium external to the accelerating device.

8.22 "Person" means any individual, corporation, partnership, firm, association, trust, estate, public or private institution, group, agency, political subdivision of this State, any other state or political subdivision or agency thereof, and any legal successor, representative, agent or agency of the foregoing, other than entities over which a federal government agency has exclusive jurisdiction.

8.23 "Personnel monitoring equipment" means devices designed to be carried or worn by an individual for the purpose of measuring the dose which an individual receives (e.g., film badges, pocket chambers, pocket dosimeters).

8.24 "Protective barrier" means a barrier of radiation absorbing material(s) used to reduce radiation exposure. The types of protective barriers are as follows:

8.24.1 "Primary protective barrier" means the material, excluding filters, placed in the useful beam, to protect anyone from radiation exposure.

8.24.2 "Secondary protective barrier" means a barrier sufficient to attenuate the stray radiation to the required degree.

8.25 "Qualified expert" means an individual who has demonstrated to the satisfaction of the Department that such individual possesses the knowledge, training and experience to measure ionizing radiation, to evaluate safety techniques, and to advise regarding radiation protection needs.

8.26 "Radiation" means ionizing radiation, including gamma rays, x-rays, alpha particles, beta particles, high speed electrons, neutrons, high speed protons, and other atomic particles, but not sound or radio waves, or visible, infrared, or ultraviolet light.

8.27 "Radiation area" means any area accessible to individuals in which there exists radiation at such levels that the whole body could receive in any one hour, a dose in excess of 5 millirem (.05 mSv) at 30 centimeters from the radiation source or from any surface that the radiation penetrates.

8.28 "Radiation Safety Officer" means one who has the knowledge and responsibility to apply appropriate radiation protection regulations, and is approved in writing by the registrant.

8.29 "Registrant" means any person who is registered with the Department or is legally obligated to register with the Department pursuant to the Act and these regulations.

8.30 "Registration" means registering with the Department in accordance with these regulations and the Act.

8.31 "Rem" is the special unit of any of the quantities expressed as dose equivalent. The dose equivalent in rems is equal to the absorbed dose in rads multiplied by the quality factor (1 rem = 0.01 sievert). The quality factors for converting absorbed dose to dose equivalent are as follows:

QUALITY FACTORS AND ABSORBED DOSE EQUIVALENCIES

TYPE OF RADIATION	Quality Factor (Q)	Absorbed Dose Equal to a Unit Dose Equivalent*
X-, gamma, or beta radiation	1	1 a Unit Dose Equivalent
Alpha particles, multiple-charged particles, fission fragments, and heavy particles of unknown charge	20	0.05
Neutrons of unknown energy	10	0.1
High-energy protons	10	0.1

*Absorbed dose in rad equal to one rem or the absorbed dose in gray equal to one sievert.

8.32 "Restricted area" (controlled area) means any area, access to which is controlled by the registrant for purposes of protection of individuals from exposure to radiation. A "restricted area" shall not include any areas used for residential quarters, although a separate room or rooms in a residential building may be set apart as a restricted area.

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8.33 "Revocation" means a facility's registration is withdrawn and is required to cease operation of all particle accelerator equipment until such time as the Department deems necessary.

8.34 "Smear survey" means a survey performed to measure the amount of removable contamination.

8.35 "Source of radiation" means any radioactive material or any device or equipment emitting or capable of producing radiation.

8.36 "Survey" means an evaluation of the use of sources of radiation under a specific set of conditions to determine actual or potential radiation hazards. When appropriate, such evaluation includes, but is not limited to tests, physical examination, and measurements of levels of radiation.

8.37 "Target" means that part of a radiation head which by design intercepts a beam of accelerated particles with subsequent emission of other radiation.

8.38 "Test" means a method for determining the characteristics or condition of sources of radiation or components thereof.

8.39 "Unrestricted area" (uncontrolled area) means any area to which access is not controlled by the registrant for purposes of protection of individuals from exposure to radiation, and any area used for residential quarters.

8.40 "Vendor" means a person who is engaged in the business of selling, leasing, installing, or offering to sell, lease, or install particle accelerators or machine components or is engaged in the business of furnishing or offering to furnish particle accelerator services, which includes, but is not limited to, reinstalling, reassembling, leasing, servicing, maintenance, calibration, and repair of particle accelerator equipment, facility and shielding design, radiation surveys, instrument calibration, personnel dosimetry, processor cleaning and maintenance, and health physics consultations.

8.41 "Very high radiation area" means an area, accessible to individuals, in which radiation levels could result in an individual receiving an absorbed dose in excess of 500 rads (5 grays) in one hour at one meter from a radiation source or from any surface that the radiation penetrates. At very high doses received at high dose rates, units of absorbed dose (e.g., rads and grays) are appropriate, rather than units of dose equivalent (e.g., rems and sieverts).

Appendix A

For further requirements outlined for the following topics refer to R.61-64, X-Rays (Title B):

Registration Requirements-Servicing and Services (VENDORS) (Part II)

Out-of-state Facilities (Part II)

Radiation Dose Limits (Part III)

Control of Access to High and Very High Radiation Areas (Part III)

Caution Signs (Part III)

Posting Requirements (Part III)

Notification of Incidents (Part III)

Reports of Exposures and Radiation Levels Exceeding the Limits (Part III)

Notices, Instructions, and Reports to Workers: Inspections (Part X)

Fiscal Impact Statement:

There will be no increased costs to the State or its political subdivisions with the implementation of these amendments. This program is funded by the collection of fees from the regulated community as mandated by the Atomic Energy and Radiation Control Act. The Act requires the cost of running the program to be recovered through the collection of fees.

Statement of Need and Reasonableness:

This statement of need and reasonableness was determined by staff analysis pursuant to S.C. Code Section 1-23-115(C)(1)-(3) and (9)-(11).

DESCRIPTION OF REGULATION: R.61-65. Particle Accelerators (Title C).

Purpose: The amendment of R.61-65 is to update the regulation pertaining to particle accelerators and facilities that utilize particle accelerators.

Legal Authority: R.61-65. Particle Accelerators (Title C) is authorized by 1976 Code Section 13-7-45 et seq.

Plan for Implementation: Upon approval from the S.C. General Assembly and publication as a final regulation in the South Carolina *State Register*, a copy of R.61-65 that includes these amendments, will be available electronically on the Department's website under the Health Regulations Category at <http://www.scdhec.gov/Agency/RegulationsAndUpdates/LawsAndRegulations/> and subsequently in the Code of Regulations of the S.C. Code of Laws. Printed copies will be available for a fee from the Department's Freedom of Information Office. Staff will educate the regulated community on the provisions of the Act and the requirements of the regulation.

DETERMINATION OF NEED AND REASONABLENESS OF THE REGULATION BASED ON ALL FACTORS HEREIN AND EXPECTED BENEFITS:

These revisions are needed in order to update the existing regulation due to changes in national standards of dosimetry. R.61-65 was last revised on July 27, 1984. The changes will clarify the requirements of facilities that utilize particle accelerators as well as state the responsibility of the radiation safety officer. The language changes will clarify many Sections and Parts of the regulation. This update will add new requirements that will promote greater health and safety to the public, delete requirements that are no longer applicable, and make stylistic and grammatical changes for clarity.

The changes are reasonable due to the fact that they will specify current national requirements of dosimetry and will be implemented with existing staff.

DETERMINATION OF COST AND BENEFITS:

This program is funded by the collection of fees from the regulated community as mandated by the Atomic Energy and Radiation Control Act. This Act requires the cost of running the program to be through the collection of fees. Fees are addressed and enforced through R.61-64. X-Rays (Title B). Pursuant to the implementation of the revised regulation, fees will be referenced in R.61-65 for convenience and clarification.

See Preliminary Fiscal Impact Statement above for cost to the State and its political subdivisions.

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UNCERTAINTIES OF ESTIMATES:

There are no known uncertainties of estimates.

EFFECTS ON ENVIRONMENT AND PUBLIC HEALTH:

There is no anticipated effect upon the environment, provided that limits specified by R.61-65, Particle Accelerators (Title C), are adhered to. The amendments should have a positive effect upon the public health of the citizens of the state. The revision of R.61-65 will clarify the entire regulation.

DETRIMENTAL EFFECTS ON THE ENVIRONMENT AND PUBLIC HEALTH IF THE REGULATIONS ARE NOT IMPLEMENTED:

There are no anticipated detrimental effects on the environment if these changes are not implemented. The public health of the citizens would not be reduced over that which is present with the current regulations, however it would be increased with the added proposed requirements and clarifications.

Statement of Rationale:

As a result of the 2012, statutory five-year review of this regulation and due to advancing technologies, the Department has determined it necessary to substantially amend R.61-65. The revisions are intended to update the regulation based on current Departmental practices, national standards, and practices that will better promote safety to facilities that utilize particle accelerators. The language changes seek to clarify the regulation by making it more specific, better organized, and the intent more clear. In addition, revisions include amending the fee structure in accordance with the governing statute.

Document No. 4497

DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL CHAPTER 61

Statutory Authority: 1976 Code Sections 44-1-140 and 44-1-150

61-34.1. Pasteurized Milk and Milk Products

Synopsis:

The intent of R.61-34.1, *Pasteurized Milk and Milk Product*, is to ensure consumers are receiving safe, high quality Grade "A" milk and milk products and to assure consumers the latest sanitation requirements are being met by the dairy industry. The regulation governs the manufacturing of pasteurized milk and milk products in South Carolina. The current R.61-34.1 was derived from the U.S. Food and Drug Administration (FDA) Grade "A" Pasteurized Milk Ordinance, 2003 Revision.

R.61-34.1 was last amended in 2005. Since that amendment, there have been changes in the milk and milk products industry, and updates to the FDA *Grade "A" Pasteurized Milk Ordinance (PMO)*, on which R.61-34.1 is based. In the most recent FDA Grade "A" Interstate Milk Shippers (IMS) Program Triennial State Evaluation (FY 2011-2013) report on the South Carolina Dairy Program, the current version of R.61-34.1 was determined to be out of date and to not meet the minimum Grade "A" IMS Program requirements. FDA Memorandum of Information (M-I-03-2012 - Supplement 1), requires a state to adopt the *Grade "A" Pasteurized Milk Ordinance (PMO)* or have an equivalent regulation no more than six (6) years behind the current National Conference on Interstate Milk Shipments (NCIMS) and the PMO.

The South Carolina Dairy Program's continued participation at the NCIMS depends on compliance with the PMO. The amendment will bring R.61-34.1 into compliance with the most updated procedures of the NCIMS;

specifically, in accordance with Sections VI and VII of the *Procedures Governing the Cooperative State - Public Health Service, Food and Drug Administration Program of the National Conference on Interstate Milk Shipments and the FDA Pasteurized Milk Ordinance, 2013 Revision*.

Through the FDA Cooperative Milk Safety Program and a Memorandum of Understanding (MOU) established on August 5, 1977 between the FDA and the NCIMS, the FDA requires a state's dairy regulation be at least as stringent as the FDA *Grade "A" Pasteurized Milk Ordinance*.

In order for South Carolina milk producers and processors to continue the shipment of milk and milk products in interstate commerce and market their milk products as Grade "A," it is essential to keep R.61-34.1 updated with respect to the current edition of the FDA *Grade "A" PMO* and its associated documents. This overall amendment incorporates into R.61-34.1 statutory changes so as to match the administrative appeals process pursuant to S.C. Code Ann. Section 44-1-60 (Supp. 2013).

A Notice of Drafting for this amendment was published in the *State Register* on March 28, 2014.

See the Section-by-Section Discussion of Amendment below and the Statements of Need and Reasonableness and Rationale herein.

Section-by-Section Discussion of Amendment

The Department of Health and Environmental Control, through statutory authority, may make, adopt, promulgate and enforce reasonable rules and regulations from time to time.

The Department has revised R.61-34.1 in its entirety through adoption by reference with exceptions, information included in the most recent edition of the FDA *Grade "A" Pasteurized Milk Ordinance (PMO), 2013 Revision* and its associated documents. The Section-by-Section Discussion of Amendment of Regulation 61-34.1 is provided to highlight the exceptions for South Carolina State Law and South Carolina specific regulatory requirements to meet these laws and regulation requirements, and the sections from the PMO being adopted by reference.

The FDA *Grade "A" Pasteurized Milk Ordinance, 2013 Revision*, may be accessed from the Internet at <http://www.fda.gov/food/guidanceregulation/guidancedocumentsregulatoryinformation/milk/ucm389905.htm>, or a copy can be obtained by contacting the U.S. Food and Drug Administration, Milk Safety Branch, Division of Cooperative Programs, 5100 Paint Branch Parkway, College Park, MD 207403-3835, and is also available for inspection at the DHEC, Environmental Quality Control, Bureau of Environmental Health Services, Division of Food Protection and Rabies Prevention.

This section-by-section information provides relevant details of the adoption by reference of the PMO, 2013 Revision, associated Procedures and Methods documents and the necessary exceptions by sections to the PMO where amendments for South Carolina specific law and regulatory requirements apply.

Correct Statutory Authority to: 1976 S.C. Code Section 44-1-140 and 44-1-150

Adoption of the Grade "A" Pasteurized Milk Ordinance, 2013 Revision and Associated Documents

As published by the U.S. Department of Health and Human Services, Public Health Service, Food and Drug Administration, all sections, appendices and footnotes of the Grade "A" Pasteurized Milk Ordinance (PMO), 2013 Revision, along with the PMO associated documents are being adopted by reference with exceptions, and as written the PMO shall become R.61-34.1 by this amendment.

The following sections, appendices, and footnotes of the Grade "A" Pasteurized Milk Ordinance, 2013 Revision apply in their entirety:

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Section 4. Labeling, of the PMO, 2013 Revision, replaces Section IV. Labeling, of R.61-34.1. Changes reflect bringing the regulation current and in accordance with applicable requirements of the Federal Food, Drug and Cosmetic Act (FFD&CA) and the Nutrition Labeling and Education Act through the PMO language updates.

Section 6. The Examination Of Milk And/Or Milk Products, of the PMO, 2013 Revision, replaces Section VI. The Examination Of Milk And Milk Products, of R.61-34.1 to update to current language of the PMO.

Section 7. Standards For Grade "A" Milk And/Or Milk Products, of the PMO, 2013 Revision, replaces Section VII. Standards For Milk And Milk Products, of R.61-34.1 with updates in Table 1 to include goat somatic cell counts numbers and also to include adding public health reasons related to Section 7.

Section 8. Animal Health, of the PMO, 2013 Revision, replaces Section VIII. Animal Health, of R.61-34.1 to update to current PMO language and added language on determination that herd or stock are free of brucellosis by the development and implementation of a State administered brucellosis free herd certification program. It also includes adding public health reasons related to Section 8.

Section 9. Milk And/Or Milk Products Which May Be Sold, of the PMO, 2013 Revision, replaces Section IX. Milk And Milk Products Which May Be Sold, of R.61-34.1 to update to current PMO language.

Section 10. Transferring; Delivery Containers; Cooling, of the PMO, 2013 Revision, replaces Section X. Transferring; Delivery Containers; Cooling, of R.61-34.1 to update to current PMO language.

Section 11. Milk And/Or Milk Products From Points Beyond The Limits Of Routine Inspection, of the PMO, 2013 Revision, replaces Section XI. Milk And Milk Products From Points Beyond The Limits Of Routine Inspections, of R.61-34.1 for language added to define acceptance of milk and milk products from outside the United States from foreign suppliers required to meet standards of the PMO on milk and/or milk products.

Section 12. Plans For Construction And Reconstruction, of the PMO, 2013 Revision, replaces Section XII. Future Dairy Farms, Milk Plants, Construction, Remodeling, Additions And Equipment Changes, of R.61-34.1 to update to current PMO language for title change.

Section 13. Personnel Health, of the PMO, 2013 Revision, replaces Section XIII. Personnel Health, of R.61-34.1 to update to current PMO language.

Section 14. Procedures When Infection Or High Risk Of Infection Is Discovered, of the PMO, 2013 Revision, replaces Section XIV. Procedures When Infection Or High Risk Of Infection Is Discovered, of R.61-34.1.

Section 18. Separability Clause, of the PMO, 2013 Revision replaces Section XIX. Unconstitutionality Clause of R.61-34.1.

Footnotes are adopted as written in the PMO, 2013 Revision without exception.

Appendices A through S are adopted as written in the PMO, 2013 Revision without exception.

The following associated documents of the Grade "A" Pasteurized Milk Ordinance, 2013 Revision apply in their entirety:

Procedures Governing the Cooperative State - Public Health Service, Food and Drug Administration Program of the National Conference on Interstate Milk Shipments, 2013 Revision (Procedures).

Methods of Making Sanitation Ratings of Milk Shippers, 2013 Revision (Methods).

Evaluation of Milk Laboratories, 2013 Revision.

The following provisions of the Grade "A" Pasteurized Milk Ordinance, 2013 Revision apply with the additions, exceptions, and superseding amendments specified below:

Section 1. Definitions

Section 1. Definitions, of the PMO 2013 Revision replaces Section I. Definitions and Standards, of R.61-34.1. Some definitions were amended for South Carolina specific regulatory identification in the PMO.

Amend definition: RR. Regulatory Agency: as defined in the PMO, to read:

RR. REGULATORY AGENCY: The Regulatory Agency shall mean the State of South Carolina's Department of Health and Environmental Control ("the Department") or their authorized representative. The term, "Regulatory Agency", whenever it appears in the *Ordinance* shall mean the appropriate agency, including a Third Party Certifier (TPC) authorized under the NCIMS voluntary International Certification Program (ICP), having jurisdiction and control over the matters embraced within this *Ordinance*.

Ordinance, as used in the Pasteurized Milk Ordinance, 2013 Revision, shall mean the provisions and appendices of the Pasteurized Milk Ordinance, 2013 Revision as adopted by the South Carolina Department of Health and Environmental Control ("the Department").

Section 2. Adulterated Or Misbranded Milk And/Or Milk Products

Amend Section 2. with the addition of language from R.61-34.1 (2005), to PMO, 2013 Revision, for South Carolina specific regulatory compliance and testing equipment use, as quoted below:

"Milk and milk products shall be examined by the Regulatory Agency as often as may be necessary to determine freedom from adulteration or misbranding. The Regulatory Agency may, upon written notice to the owner or person in charge, place a hold order on any milk or milk product which it determines, or has probable cause to believe, to be unwholesome or otherwise adulterated or misbranded. Under a hold order, milk or milk products shall be permitted to be suitably stored. It shall be unlawful for any person to remove or alter a hold order, notice, or tag placed on milk or milk products by the Regulatory Agency, and neither such milk or milk products nor the containers thereof shall be relabeled, repacked, reprocessed, altered, disposed of, or destroyed without permission of the Regulatory Agency, except on order by a court of competent jurisdiction.

When the freezing point of milk and milk products, other than cultured products, is greater than -0.525°H (-0.507°C), the farm or plant owner or manager shall be notified that apparently the milk or milk product contains added water. If a second violation of this freezing point standard occurs within two (2) years, an observed milking or operation of processing shall be conducted and samples analyzed. The freezing point obtained from milk collected during the observation shall be used to determine a definite freezing point from the individual farm or plant. A violation of the determined freezing point for a specific operation by over three (3) percent within two (2) years of setting the standard shall call for a two (2) day permit suspension or equivalent.

When milk is found to be adulterated by the presence of drugs, pesticides, herbicides, or other poisonous substances, it shall be impounded and additional samples analyzed. Milk found to be adulterated shall be disposed of until analysis shows the product not to be adulterated. If testing reveals milk positive for drug residues, the milk shall be disposed of in a manner that removes it from the human or animal food chain, except where acceptably reconditioned under FDA Compliance Policy Guide (CPG 7126.20). The Regulatory Agency shall determine the producer(s) responsible for the drug residue violation and immediately suspend the producer's Grade "A" permit or equally effective measures shall be taken to prevent the sale of milk containing drug residues and a penalty shall be imposed. Future pick-ups are prohibited until subsequent testing reveals the milk is free of drug residue. The penalty shall be for the

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value of all milk on the contaminated load plus any costs associated with the disposition of the contaminated load. The Regulatory Agency may accept certification from the violative producer's milk marketing cooperative or purchaser of milk as satisfying the penalty requirements. The Grade "A" producer's permit may be reinstated, or other action taken, to allow the sale of milk for human food, when a representative sample taken from the producer's milk, prior to commingling with any other milk, is no longer positive for drug residue. Whenever a drug residue test is positive, an investigation shall be made to determine the cause. The farm inspection is completed by The Regulatory Agency to determine the cause of the residue and actions taken to prevent future violations including:

On-farm changes in procedures necessary to prevent future occurrences as recommended by the Regulatory Agency.

Discussion and education on the Drug Residue Avoidance Control measures outlined in Appendix C. of the PMO.

When pasteurized milk or milk products are found to be adulterated by drugs, pesticides, herbicides, or other poisonous substances, the adulterated products shall be removed from the market, disposed of, and sale stopped until analysis proves the product to be free from adulteration."

Amend Section 2. by adding language from R.61-34.1 (2005), to PMO, 2013 Revision, for South Carolina specific regulatory compliance, under administrative procedures, as quoted below:

"When two (2) of the last four (4) samples of a pasteurized product are in violation of the milkfat or milk solids not fat standard for that product a warning letter shall be issued by the Regulatory Agency. When three (3) of the last five (5) samples are in violation, the Regulatory Agency shall suspend the permit."

Section 3. Permits

Amend Section 3. – PMO, 2013 Revision, with deletion of second paragraph on page 16 of the 2013 PMO. The language, as quoted below, is not in compliance for South Carolina specific law and shall not apply as shown:

"Upon notification, acceptable to the Regulatory Agency, by any person whose permit has been suspended, or upon application within forty-eight (48) hours of any person who has been served with a notice of intention to suspend, and in the latter case before suspension, the Regulatory Agency shall within seventy-two (72) hours proceed to a hearing to ascertain the facts of such violation(s) or interference and upon evidence presented at such hearing shall affirm, modify or rescind the suspension or intention to suspend."

Amend Section 3. – PMO, 2013 Revision, under Administrative Procedures, Suspension of Permit on page 17 of the 2013 PMO with language from R.61-34.1 (2005), that complies with South Carolina specific law.

The following part under **SUSPENSION OF PERMIT** as written in the PMO, 2013 Revision shall not apply, and as quoted below, was deleted:

"The Regulatory Agency may forego suspension of the permit, provided the milk and/or milk product in violation is not sold or offered for sale as a Grade "A" milk and/or milk product. A Regulatory Agency may allow the imposition of a monetary penalty in lieu of a permit suspension, provided the milk and/or milk product in violation is not sold or offered for sale as a Grade "A" milk and/or milk product. Except, that a milk producer may be assessed a monetary penalty in lieu of permit suspension for violative counts provided:

1. If the monetary penalty is due to a violation of the bacterial or cooling temperature standards, the Regulatory Agency shall conduct an inspection of the facility and operating methods and make the

determination that the conditions responsible for the violation have been corrected. Samples shall then be taken at the rate of not more than two (2) per week on separate days within a three (3) week period in order to determine compliance with the appropriate standard as determined in accordance with Section 6 of this Ordinance.

2. If the monetary penalty is due to a violation of the somatic cell count standard, the Regulatory Agency shall verify that the milk supply is within acceptable limits as prescribed in Section 7 of this Ordinance. Samples shall then be taken at the rate of not more than two (2) per week on separate days within a three (3) week period in order to determine compliance with the appropriate standard as determined in accordance with Section 6 of this Ordinance.”

The following part was added under **SUSPENSION OF PERMIT**, and as quoted below, shall apply:

“When any requirement(s) of this *Ordinance* is violated, the permit holder is subject to the suspension of their permit.

When the permit suspension is due to violations other than bacterial, coliform, somatic cell, cooling temperature, or drug residue test standards, the permit holder, manager or other authorized representative is notified by certified mail or hand delivery of the intent to suspend the permit in thirty days unless a written request for a hearing is filed with the Department. If no request is made in thirty (30) days, the permits shall be suspended until the violations are corrected.

The Department may without warning, notice, or hearing suspend a permit when an imminent health hazard exists. An imminent health hazard includes, but is not limited to, violations of bacterial, coliform, somatic cell, cooling temperature, or drug residue test standards. Following permit suspension, all manufacturing operations shall immediately cease.”

ISSUANCE OF PERMITS, and **REINSTATEMENT OF PERMITS** remain the same and applies as written in the PMO, 2013 Revision under Administrative Procedures.

Section 5. Inspection Of Dairy Farms And Milk Plants

Amend Section 5. – PMO, 2013 Revision, on page 22 of the PMO, fifth paragraph down, reword to read:

One (1) copy of the inspection/audit report shall be provided to the operator, or other responsible person or be posted in a conspicuous place on an inside wall of the establishment. Said inspection/audit report shall not be defaced and shall be made available to the Regulatory Agency upon request.

Section 15. Enforcement

Amend Section 15. Language from R.61-34.1 (2005), to PMO, 2013 Revision, language for South Carolina specific law, with the addition of the following:

This Regulation is issued and shall be enforced under the authority of Section 44-1-140, 1976 S.C. Code of Laws of South Carolina, as amended.

Section 16. Penalty

Amend Section 16. – PMO, 2013 Revision, by deletion of PMO language on page 134 under Section 16. The language is not in compliance for South Carolina specific law, and as quoted below, shall not apply:

“Any person who shall violate any of the provisions of this Ordinance shall be guilty of a misdemeanor and upon conviction thereof shall be punished by a fine not more than \$... and/or such persons may be

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enjoined from continuing such violation(s). Each day upon which such a violation(s) occurs shall constitute a separate violation.”

Amend Section 16. – PMO, 2013 Revision, by addition of language from R.61-34.1 (2005) that is specific for South Carolina law, and as quoted below, shall apply:

“Violations of this Regulation shall be punishable in accordance with S.C. Code Section 44-1-150. Each day of continued violation shall be a separate offense.”

Section 17. Repeal And Date Of Effect

Section 17. – PMO, 2013 Revision, as written shall not apply. Upon approval by the General Assembly and publication in the State Register, the regulation will have the full weight of regulation as R.61-34.1 and supersede the previous regulation of the same.

Instructions: Replace R.61-34.1 in its entirety with this amendment.

Text:

61-34.1. PASTEURIZED MILK AND MILK PRODUCTS.

Statutory Authority: 1976 S.C. Code Section 44-1-140 and 44-1-150

SECTION I. APPLICABILITY OF THE GRADE "A" PASTEURIZED MILK ORDINANCE, 2013 REVISION

A. The following sections, appendices, and footnotes of the Grade "A" Pasteurized Milk Ordinance (PMO), 2013 Revision apply in their entirety:

1. Section 4. Labeling;
2. Section 6. The Examination Of Milk And/Or Milk Products;
3. Section 7. Standards For Grade "A" Milk And/Or Milk Products;
4. Section 8. Animal Health;
5. Section 9. Milk And/Or Milk Products Which May Be Sold;
6. Section 10. Transferring; Delivery Containers; Cooling;
7. Section 11. Milk And/Or Milk Products From Points Beyond The Limits Of Routine Inspection;
8. Section 12. Plans For Construction And Reconstruction;
9. Section 13. Personnel Health;
10. Section 14. Procedures When Infection Or High Risk Of Infection Is Discovered;
11. Section 18. Separability Clause;
12. Footnotes; and

13. Appendices A through S.

B. The following associated documents of the Grade "A" Pasteurized Milk Ordinance, 2013 Revision apply in their entirety:

1. Procedures Governing the Cooperative State - Public Health Service, Food and Drug Administration Program of the National Conference on Interstate Milk Shipments, 2013 Revision (Procedures);
2. Methods of Making Sanitation Ratings of Milk Shippers, 2013 Revision (Methods); and
3. Evaluation of Milk Laboratories, 2013 Revision.

C. The following provisions of the Grade "A" Pasteurized Milk Ordinance, 2013 Revision apply with the additions, exceptions, and superseding amendments specified below:

1. Section 1. Definitions applies with the following exceptions:

- a. The definition RR. Regulatory Agency applies with the following amendment:

RR. REGULATORY AGENCY: The Regulatory Agency shall mean the State of South Carolina's Department of Health and Environmental Control ("the Department") or their authorized representative. The term, "Regulatory Agency", whenever it appears in the *Ordinance* shall mean the appropriate agency, including a Third Party Certifier (TPC) authorized under the NCIMS voluntary International Certification Program (ICP), having jurisdiction and control over the matters embraced within this *Ordinance*.

- b. Ordinance, as used in the Pasteurized Milk Ordinance, 2013 Revision, shall mean the provisions and appendices of the Pasteurized Milk Ordinance, 2013 Revision as adopted by the South Carolina Department of Health and Environmental Control ("the Department").

2. Section 2. Adulterated Or Misbranded Milk And/Or Milk Products applies with the following exceptions:

- a. The following applies in addition to Section 2:

Milk and milk products shall be examined by the Regulatory Agency as often as may be necessary to determine freedom from adulteration or misbranding. The Regulatory Agency may, upon written notice to the owner or person in charge, place a hold order on any milk or milk product which it determines, or has probable cause to believe, to be unwholesome or otherwise adulterated or misbranded. Under a hold order, milk or milk products shall be permitted to be suitably stored. It shall be unlawful for any person to remove or alter a hold order, notice, or tag placed on milk or milk products by the Regulatory Agency, and neither such milk or milk products nor the containers thereof shall be relabeled, repacked, reprocessed, altered, disposed of, or destroyed without permission of the Regulatory Agency, except on order by a court of competent jurisdiction.

When the freezing point of milk and milk products, other than cultured products, is greater than -0.525°H (-0.507°C), the farm or plant owner or manager shall be notified that apparently the milk or milk product contains added water. If a second violation of this freezing point standard occurs within two (2) years, an observed milking or operation of processing shall be conducted and samples analyzed. The freezing point obtained from milk collected during the observation shall be used to determine a definite freezing point from the individual farm or plant. A violation of the determined freezing point for a specific operation by over three (3) percent within two (2) years of setting the standard shall call for a two (2) day permit suspension or equivalent.

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When milk is found to be adulterated by the presence of drugs, pesticides, herbicides, or other poisonous substances, it shall be impounded and additional samples analyzed. Milk found to be adulterated shall be disposed of until analysis shows the product not to be adulterated. If testing reveals milk positive for drug residues, the milk shall be disposed of in a manner that removes it from the human or animal food chain, except where acceptably reconditioned under FDA Compliance Policy Guide (CPG 7126.20). The Regulatory Agency shall determine the producer(s) responsible for the drug residue violation and immediately suspend the producer's Grade "A" permit or equally effective measures shall be taken to prevent the sale of milk containing drug residues and a penalty shall be imposed. Future pick-ups are prohibited until subsequent testing reveals the milk is free of drug residue. The penalty shall be for the value of all milk on the contaminated load plus any costs associated with the disposition of the contaminated load. The Regulatory Agency may accept certification from the violative producer's milk marketing cooperative or purchaser of milk as satisfying the penalty requirements. The Grade "A" producer's permit may be reinstated, or other action taken, to allow the sale of milk for human food, when a representative sample taken from the producer's milk, prior to commingling with any other milk, is no longer positive for drug residue. Whenever a drug residue test is positive, an investigation shall be made to determine the cause. The farm inspection is completed by The Regulatory Agency to determine the cause of the residue and actions taken to prevent future violations including:

On-farm changes in procedures necessary to prevent future occurrences as recommended by the Regulatory Agency.

Discussion and education on the Drug Residue Avoidance Control measures outlined in Appendix C. of the PMO.

When pasteurized milk or milk products are found to be adulterated by drugs, pesticides, herbicides, or other poisonous substances, the adulterated products shall be removed from the market, disposed of, and sale stopped until analysis proves the product to be free from adulteration.

b. The following applies in addition to the Administrative Procedures part of Section 2:

When two (2) of the last four (4) samples of a pasteurized product are in violation of the milkfat or milk solids not fat standard for that product a warning letter shall be issued by the Department. When three (3) of the last five (5) samples are in violation, the Department shall suspend the permit.

3. Section 3. Permits applies with the following exceptions:

a. The second paragraph on page 16 of the PMO, 2013 Revision shall not apply.

b. The following replaces the entire Administrative Procedures part of Section 3:

ISSUANCE OF PERMITS: Every milk producer, milk distributor, bulk milk hauler/sampler, milk tank truck⁵, milk transportation company and each milk plant, receiving station, transfer station, milk tank truck cleaning facility operator shall hold a valid permit. The permit for a milk tank truck(s) may be issued to the milk transportation company. Milk producers who transport milk or milk products only from their own dairy farms; employees of a milk distributor or milk plant operator who possesses a valid permit; and employees of a milk transportation company that possesses a valid permit and transports milk or milk products from a milk plant, receiving station or transfer station shall not be required to possess a bulk milk hauler/sampler's permit. Grocery stores, restaurants, soda fountains and similar establishments where milk and milk products are served or sold at retail, but not processed, may be exempt from the requirements of this Section.

While compliance with the requirements for Grade "A" condensed and dry milk products is necessary to receive and retain a permit for these products, it is not the intent of this Ordinance to limit the production of a milk plant that condenses and/or dries milk or milk products, to Grade "A" products.

The manufacture of ungraded products for other uses in milk plants operating under a permit for the manufacture of Grade "A" condensed and dry milk products is allowed under conditions specified in Section 7 of this Ordinance and whereby such products are processed, packaged, and stored separately. In such cases, a second permit is required, which is issued with the understanding that ungraded products shall be handled in such a manner so as to avoid confusion with the Grade "A" production.

Either or both permits may be temporarily suspended for the violation of any applicable provision of this Ordinance, or revoked for a serious or repeated violation. Suspension of permits for violation of sanitation Items of Section 7 is provided for in Section 5. In addition, the Regulatory Agency may, at any time, institute court action under the provisions of Section 6. There is no specific frequency for the issuance of permits. This should be in accordance with the policies of the Regulatory Agency and in agreement with those employed for the issuance of permits under this Ordinance.

SUSPENSION OF PERMIT: When any requirement(s) of this *Ordinance* is violated, the permit holder is subject to the suspension of their permit.

When the permit suspension is due to violations other than bacterial, coliform, somatic cell, cooling temperature, or drug residue test standards, the permit holder, manager or other authorized representative shall be notified by certified mail or hand delivery of the intent to suspend the permit in thirty days unless a written request for a hearing is filed with the Regulatory Agency. If no request is made in thirty (30) days, the permits shall be suspended until the violations are corrected.

The Department may without warning, notice, or hearing suspend a permit when an imminent health hazard exists. An imminent health hazard includes, but is not limited to, violations of bacterial, coliform, somatic cell, cooling temperature, or drug residue test standards. Following permit suspension, all manufacturing operations shall immediately cease.

REINSTATEMENT OF PERMITS: Any permit holder whose permit has been suspended may make written application for the reinstatement of their permit.

When the permit suspension has been due to a violation of any of the bacterial, coliform or cooling temperature standards, the Regulatory Agency, within one (1) week after the receipt of notification for reinstatement of permit, shall issue a temporary permit after determining by an inspection of the facilities and operating methods that the conditions responsible for the violation have been corrected. When a permit suspension has been due to a violation of the somatic cell count standard, the Regulatory Agency may issue a temporary permit whenever a resampling of the herd's milk supply indicates the milk supply to be within acceptable limits as prescribed in Section 7. Samples shall then be taken at the rate of not more than two (2) per week on separate days within a three (3) week period. This accelerated sampling applies to bacteria, coliform, somatic cell count and temperature. The Regulatory Agency shall reinstate the permit upon compliance with the appropriate standard as determined in accordance with Section 6 of this Ordinance.

Whenever the permit suspension has been due to a violation of a requirement other than bacteriological, coliform, somatic cell count, drug residue test or cooling-temperature standards, the notification shall indicate that the violation(s) has been corrected. Within one (1) week of the receipt of such notification, the Regulatory Agency shall make an inspection/audit of the applicant's facility, and as many additional inspections/audits thereafter as are deemed necessary, to determine that the applicant's facility is complying with the requirements. When the findings justify, the permit shall be reinstated.

When a permit suspension has been due to a positive drug residue, the permit shall be reinstated in accordance with the provisions of Appendix N.

4. Section 5. Inspection Of Dairy Farms And Milk Plants applies with the replacement of language in the fifth paragraph on page 22 in the PMO, 2013 Revision with:

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One (1) copy of the inspection/audit report shall be provided to the operator, or other responsible person or be posted in a conspicuous place on an inside wall of the establishment. Said inspection/audit report shall not be defaced and shall be made available to the Regulatory Agency upon request.

5. Section 15. Enforcement applies with the addition of the following:

This Regulation is adopted and enforced under the authority of S.C. Code Section 44-1-140.

6. The following replaces the language of Section 16. Penalty in its entirety:

Violations shall be punishable in accordance with S.C. Code Section 44-1-150. Each day of continued violation shall be a separate offense.

7. Section 17. Repeal And Date Of Effect of the PMO, 2013 Revision shall not apply.

Fiscal Impact Statement:

There are no anticipated new costs associated with the implementation of this regulation to the State or its political subdivisions.

Statement of Need and Reasonableness:

The Statement of Need and Reasonableness was determined by staff analysis pursuant to 1976 S.C. Code Section 1-23-115(C) (1)-(3) and (9)-(11):

DESCRIPTION OF REGULATION:

Purpose: The intent of R.61-34.1, *Pasteurized Milk and Milk Products*, is to ensure consumers are receiving safe, high quality Grade "A" milk and milk products and proper sanitation requirements are being met by the dairy industry. The regulation governs the manufacturing of pasteurized milk and milk products in South Carolina. The amendment of R.61-34.1 will meet the current standards of the most recent edition of the United States Public Health Service, United States Food and Drug Administration (FDA) *Grade "A" Pasteurized Milk Ordinance (PMO), 2013 Revision*, inclusive of its associated documents.

In accordance with the FDA Cooperative Milk Safety Program and a Memorandum of Understanding (MOU) established on August 5, 1977 between the FDA and the National Conference on Interstate Milk Shipments (NCIMS), a state's dairy regulation must be at least as stringent as the FDA *Grade "A" Pasteurized Milk Ordinance* to meet requirements for interstate commerce of pasteurized milk and milk products. South Carolina is a participant in the NCIMS. The amendment will bring R.61-34.1 into compliance with the most up to date procedures of the NCIMS, specifically Sections VI and VII of the *Procedures Governing the Cooperative State - Public Health Service, Food and Drug Administration Program of the National Conference on Interstate Milk Shipments* and the *Grade "A" Pasteurized Milk Ordinance, 2013 Revision*.

Legal Authority: The legal authority for R.61-34.1 is 1976 S.C. Code Section 44-1-140.

Plan for Implementation: This amendment will take effect upon approval of the S.C. General Assembly and publication as a final regulation in the South Carolina State Register. A copy of the amended regulation will be available electronically on the Department's website under the Environmental Health Services Category at <http://www.scdhec.gov/Agency/RegulationsAndUpdates/LawsAndRegulations/> and subsequently in the Code of Regulations of the South Carolina Code of Laws. As these are federal amendments, both the regulated industry and the regulatory community are already familiar with and are implementing the requirements.

DETERMINATION OF NEED AND REASONABLENESS OF THE REGULATION BASED ON ALL FACTORS HEREIN AND EXPECTED BENEFITS:

R.61-34.1, *Pasteurized Milk and Milk Products*, was last amended in 2005. Since that amendment, there have been changes in the milk and milk products industry, and numerous revisions to the FDA *Grade "A" Pasteurized Milk Ordinance (PMO)*, on which R.61-34.1 is based. The revision of R.61-34.1 represents an update and recognition of technological advances, milk plant environment changes, drug residue controls for food processing animals, and changes in production and processing equipment.

The revision of R.61-34.1 will bring South Carolina into conformance with the PMO requirement adopted by other states, thereby permitting the movement of milk and milk products across state lines and to federal institutions. The incorporation and adoption of the PMO, 2013 Revision, into R.61-34.1 translates new knowledge, technology and methodologies into effective and practicable public health practices.

In the most recent FDA Grade "A" Interstate Milk Shippers (IMS) Program Triennial State Evaluation (FY 2011-2013) report on the South Carolina Dairy Program, the current version of R.61-34.1 was determined to be out of date and to not meet the minimum Grade "A" IMS Program requirements. FDA Memorandum of Information (M-I-03-2012 - Supplement 1), requires that a State must have adopted the *Grade "A" Pasteurized Milk Ordinance (PMO)* or have an equivalent regulation no more than six (6) years behind the current National Conference on Interstate Milk Shipments and the PMO. In order for South Carolina milk producers and processors to continue the shipment of milk and milk products in interstate commerce and market their milk and milk products as Grade "A," it is essential to keep R.61-34.1 updated to comply with the current edition of the *FDA Grade "A" Pasteurized Milk Ordinance*.

The South Carolina Dairy Program's continued participation at the NCIMS depends on compliance with the PMO. The amendment will bring R.61-34.1 into compliance with the most up to date procedures of the NCIMS; specifically, in accordance with Sections VI and VII of the *Procedures Governing the Cooperative State - Public Health Service, Food and Drug Administration Program of the National Conference on Interstate Milk Shipments and the FDA Pasteurized Milk Ordinance, 2013 Revision*.

The Grade "A" PMO, Procedures, and Methods serve as the official documents setting forth the sanitation requirements governing the interstate shipment of milk and milk products to and from other states and to federal institutions. Failure to keep South Carolina's milk regulation current and in conformance with other states' requirements could result in South Carolina milk processors and producers not being allowed to ship milk and milk products in interstate commerce or to federal institutions.

DETERMINATION OF COSTS AND BENEFITS:

There are no anticipated new costs associated with the implementation of this regulation. There is anticipated benefit to South Carolina's environment and the health of its citizens as the intent of this regulation is to ensure consumers continue to receive safe, high quality Grade "A" milk and milk products based on the latest science. The amendment of Regulation 61-34.1 to the most recent edition of the *FDA Grade "A" Pasteurized Milk Ordinance* will allow the regulation to conform to the current national standard. For the milk and dairy industry, the current edition of the *FDA Grade "A" Pasteurized Milk Ordinance* provides uniformity and consistency with pasteurized milk and milk products regulations nationally for interstate commerce.

UNCERTAINTIES OF ESTIMATES:

None.

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EFFECT ON ENVIRONMENT AND PUBLIC HEALTH:

Implementation of the regulation should not compromise the protection of the environment or the public health. The regulation seeks to help ensure consumers are receiving safe, high quality Grade "A" pasteurized milk and milk products. The amendment of R.61-34.1 to conform to the most recent edition of the FDA *Grade "A" Pasteurized Milk Ordinance* also seeks to provide effective means of reducing the risks of foodborne illnesses, thus protecting consumers and industry from potentially devastating public health consequences and financial losses.

DETRIMENTAL EFFECT ON THE ENVIRONMENT AND PUBLIC HEALTH IF THE REGULATION IS NOT IMPLEMENTED:

There is no anticipated adverse effect on the environment if the regulation is not implemented. Not implementing the amendment to R.61-34.1 will prevent the implementation of the latest sanitary standards for Grade "A" pasteurized milk and milk products in manufacturing and processing facilities, and will not provide the comprehensive approach to pasteurized milk and milk products safety required by the most recent edition of the FDA *Grade "A" Pasteurized Milk Ordinance*. Any decrease in sanitary standards may have a detrimental effect on the health of South Carolina's citizens and visitors. Any delays in revising South Carolina's regulation governing pasteurized milk and milk products will also likely result in penalties imposed on the program by FDA and NCIMS. These penalties would include removal of South Carolina's milk and milk product producers and processors from the Interstate Milk Shipments (IMS) listing and the exclusion of South Carolina's regulatory dairy program from participation and voting at the National Conference on Interstate Milk Shipments. This could have a negative economic impact on South Carolina's milk producers and manufacturers.

Statement of Rationale:

The determination to amend this regulation was in response to FDA's FY2011-2013 Triennial State Evaluation report of South Carolina's Grade "A" Interstate Milk Shipments Program dated January 15, 2014. In FDA's FY2011-2013 report as well as in the previous FY2008-2010 report it was noted that South Carolina should adopt into law or by reference the most current edition of the FDA *Grade "A" Pasteurized Milk Ordinance (PMO)* and associated documents. The FDA *Grade "A" Pasteurized Milk Ordinance* is used as the sanitary regulation for pasteurized milk and milk products served on interstate carriers and is recognized by the Public Health Agencies, the milk industry, and many others as the national standard for milk sanitation. The FDA *Grade "A" Pasteurized Milk Ordinance* and its associated guidance documents for *Procedures and Methods*, adopted and uniformly applied, will continue to provide effective public health protection without being unduly burdensome to either the Department or the dairy industry. It represents a consensus of current knowledge and experience and thus represents a practical and equitable milk sanitation standard for the nation.

Document No. 4466

DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL CHAPTER 61

Statutory Authority: 1976 Code Sections 1-23-500, 1-23-600, 44-1-50, and 44-1-60

61-72. Procedures for Contested Cases

Synopsis:

Adjudicatory hearings as prescribed in R.61-72 no longer occur due to the statutory creation of the Administrative Law Court ("ALC") and 1976 Code Section 44-1-60 providing for ALC review of final agency decisions. As such, R.61-72 has no legal effect and is no longer needed.

A Notice of Drafting for this proposed repeal was published in the *State Register* on April 25, 2014.

Instructions:

Repeal R.61-72 in the S.C. Code of State Regulations.

Text:

61-72. [Repealed]

Fiscal Impact Statement:

The State will not incur costs as a result of the repeal of R.61-72, as the regulation currently has no legal effect due to the creation of the Administrative Law Court and its authority to review contested cases.

Statement of Need and Reasonableness:

The following is based on an analysis of the factors listed in 1976 Code Section 1-23-115(C)(1)-(3) and (9) through (11):

DESCRIPTION OF REGULATION:

Purpose: With the statutory creation of the Administrative Law Court and its authority to review contested cases, adjudicatory hearings as prescribed in R.61-72 no longer occur. The Department instead follows appeal procedures put forth in 1976 Code Section 44-1-60, which provides for appeal of final agency decisions to the Administrative Law Court. The requirements and procedures of R.61-72 no longer apply. As such, the Department is repealing R.61-72.

Legal Authority: 1976 Code Sections 1-23-500, 1-23-600, 44-1-50, and 44-1-60.

Plan for Implementation: Upon approval of this repeal by the S.C. General Assembly and publication as a final regulation repeal in the State Register, this regulation is repealed. Regulation 61-72 will be repealed in Chapter 61 of the Code of Regulations of the S.C. Code of Laws.

DETERMINATION OF NEED AND REASONABLENESS OF THE REGULATION AND REPEAL AND EXPECTED BENEFITS:

This repeal is needed in order to align the Department's regulations with governing statutory authority, residing at 1976 Code Sections 1-23-500, 1-23-600, 44-1-50, and 44-1-60. The repeal is reasonable because it does not advance beyond the scope of that authority. There are no issues with costs, as R.61-72 has been ineffective since statutory authority placed review authority in the Administrative Law Court of contested cases. There is no effect on the environment or public health. Expected benefits of the repeal include prevention of any confusion on the part of the public due to the presence of a regulation that has no legal effect.

DETERMINATION OF COSTS AND BENEFITS:

There are no issues with costs, as R.61-72 has been ineffective since statutory authority placed review authority in the Administrative Law Court of contested cases. Expected benefits of the repeal include prevention of any confusion on the part of the public due to the presence of a regulation that has no legal effect.

UNCERTAINTIES OF ESTIMATES:

There are no estimate uncertainties associated with this repeal.

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EFFECT ON ENVIRONMENT AND PUBLIC HEALTH:

There are no effects on the environment or public health associated with this repeal.

DETRIMENTAL EFFECT ON THE ENVIRONMENT AND PUBLIC HEALTH IF THE REGULATION IS NOT IMPLEMENTED:

There are no effects on the environment or public health associated with this repeal.

Statement of Rationale:

This repeal was necessary in order to align the Department's regulations with governing statutory authority. With the creation of the Administrative Law Court and its authority to review contested cases, adjudicatory hearings as prescribed in R.61-72 no longer occur. There are no scientific or technical aspects of this repeal.

Document No. 4483

DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL
CHAPTER 61

Statutory Authority: 1976 Code Section 44-1-140

61-47. Shellfish

Synopsis:

Regulation R.61-47 was last substantively amended on June 27, 2008. The regulation contains requirements for the safe and sanitary harvesting, storing, processing, handling and transportation of molluscan shellfish (oysters and clams) to protect the health of consumers of shellfish. For South Carolina shellfish to be acceptable for interstate and international commerce, the regulation must be consistent with the requirements of the National Shellfish Sanitation Program (NSSP), as determined by the US Food and Drug Administration (FDA).

The purpose of this amendment is to improve R.61-47 and update the regulation to be consistent with the latest version of the NSSP Guide for the Control of Molluscan Shellfish (2013). The amendments include the following changes:

- (1) Times allowed from harvest to mechanical refrigeration will be modified to limit the growth of pathogens after the harvest of shellfish,
- (2) A tempering plan for the gradual temperature reduction of harvested clams will be allowed to facilitate the summer harvest of clams,
- (3) The frequency of confirmed Vibro-related illnesses needed to trigger further temperature control measures will be modified,
- (4) Certified reshipping facilities no longer will be required to add additional labels to shellfish containers prior to further distribution,
- (5) Certified shippers will be required to receive annual training for the safe and sanitary handling of shellfish,
- (6) Time-temperature recording device will be required when shipping shellfish from one certified shipper to another certified shipper for shipments lasting greater than 4 hours, and
- (7) Stylistic changes are made including corrections for spelling, clarity, readability, grammar, and codification for overall improvement of the text of the regulation.

A Notice of Drafting for this regulation was published in the *State Register* on April 25, 2014.

Section-by-Section Discussion of Amendments

The statutory authority for this regulation is added in the text under the title of the regulation and before the table of contents for consistency with other agency regulations.

61-47.A. General Provisions

Section 61-47.A.2.a(6) - Grammatical correction - the word “which” is deleted.

61-47.A. General Provisions

Section 61-47.A.2(II) is changed to reference the latest version of the document.

61-47.B. Growing Area Survey and Classification

Section 61-47.B.7(e)(4) - A computer transcription error was found in the current text whereas the superscript was published incorrectly. This subitem is being changed to write out in text form the correct mathematical expression to avoid future computer software wordprocessing conversion problems in electronic publications of this regulation.

61-47.C. Harvesting, Handling, and Transportation of Shellfish

Section 61-47.C.1(e) is added to be consistent with the 2013 National Shellfish Sanitation Program Guide for the Control of Molluscan Shellfish and requires certified shippers to receive annual training for the safe and sanitary handling of shellfish.

61-47.C. Harvesting, Handling, and Transportation of Shellfish

Section 61-47.C.2(c) introductory paragraph, the word “environmental” is being replaced by “internal” to clarify that the “internal” temperature of the shellstock is the measurement criteria being addressed in this section.

61-47.C. Harvesting, Handling, and Transportation of Shellfish

Section 61-47.C.2(c)(1) is being changed to be consistent with the 2013 National Shellfish Sanitation Program Guide for the Control of Molluscan Shellfish. The change is a modification to the time from harvest to mechanical refrigeration as determined by environmental conditions at the time of harvest and allows for a tempering plan to facilitate the summer harvest of clams.

61-47.C. Harvesting, Handling, and Transportation of Shellfish

Sections 61-47.C.2(c)(2) and (3) are being changed to be consistent with the 2013 National Shellfish Sanitation Program Guide for the Control of Molluscan Shellfish. The change is a modification to the frequency of confirmed Vibrio-related illnesses needed to trigger reductions in the time allowed from harvest to mechanical refrigeration. Clarification is provided regarding the handling of shellfish that do not meet times and temperature controls. Changes are made for grammar, spelling, clarity and consistency.

61-47.C. Harvesting, Handling, and Transportation of Shellfish

Section 61-47.C.2(c)(4) is deleted because control measures for *Vibrio parahaemolyticus* now will be based on confirmed illnesses, not a risk evaluation as described in this section.

61-47.C. Harvesting, Handling, and Transportation of Shellfish

Section 61-47.C.2(d)(1) is changed to remove the retagging requirement for a certified reshipper.

61-47.C. Harvesting, Handling, and Transportation of Shellfish

Section 61-47.C.3(c)(3)(b)(5) is added to be consistent with the 2013 National Shellfish Sanitation Program Guide for the Control of Molluscan Shellfish. This change requires that shellfish shipments that exceed a shipping time of greater than four (4) hours must include a time-temperature recording device when shipments are from one certified shipper to another certified shipper.

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61-47.D.Special Shellstock Handling

61-47.D.3(d)(3)(j)(iv) revised the word “disinfections” to “disinfection.”

61-47.F.Laboratory Procedures

61-47.F.4(b) corrects the spelling of the word “bioassy” to “bioassay.”

Instructions: Amend R.61-47 pursuant to each individual instruction provided with the text of the regulations below.

Text:

Add statutory authority for 61-47 under the title of the regulation and before the table of contents.

Statutory Authority: 1976 Code Section 44-1-140

Revise 61-47.A.2(a)(6) to read:

Shellfish that contain any added substance, unless the substance is authorized by the Department or the United States Food and Drug Administration;

Revise 61-47.A.2(II) to read:

A. GENERAL PROVISIONS.

2. Definitions. For the purpose of this regulation:

(II) National Shellfish Sanitation Program Guide for the Control of Molluscan Shellfish means the 2013 version of the United States Food and Drug Administration document with that title that consists of a Model Ordinance, supporting guidance documents, recommended forms, and other related materials associated with the National Shellfish Sanitation Program. Portions of the document are incorporated by reference herein and such referenced sections shall have effect as if fully recited within the text of this regulation. Copies can be obtained through the U.S. Food and Drug Administration or the S.C. Department of Health and Environmental Control, 2600 Bull Street, Columbia, SC 29201.

Revise 61-47.B.7(e)(4) to read:

(4) A rate of discharge of 2×10 to the ninth power fecal coliform per day;

Add new subitem 61-47.C.1(e) to read:

(e) Prior to licensing each certified shipper shall obtain Department approved training annually.

Revise 61-47.C.2(c) introductory paragraph to read:

2. **Handling.**

(c) Shellstock Temperature Control. For purposes of initial processing, shellstock temperature control shall be defined as the management of the internal temperature of shellstock by means of ice, mechanical refrigeration or other approved means which is capable of lowering the temperature of the shellstock and will maintain it at fifty (50) degrees Fahrenheit [ten (10) degrees Centigrade] or less. Shellstock shall:

Revise 61-47.2(c)(1) to read:

(1) Be placed under temperature control by the receiving certified shipper within eighteen (18) hours from the time of harvest during months when additional controls are not required. Shellfish harvested during months that do require additional controls must be placed under temperature controls within twelve (12) hours from the time of harvest. Clams harvested during these control months may be tempered using a Department approved tempering plan.

Revise 61-47.2(c)(2) and (3) to read:

(2) In the event a growing area or portion of a growing area is confirmed as the original source of product associated with two (2) or more *Vibrio vulnificus* illnesses within the past (10) years, the maximum hours to temperature control for shellfish shall, upon notice provided by the Department, be in accordance with the National Shellfish Sanitation Program Guide for the Control of Molluscan Shellfish Model Ordinance, VIII. Control of Shellfish Harvesting. Shellfish not meeting times and temperature controls may, with Department approval, be diverted to post-harvest processing as defined in this regulation or be deemed adulterated.

(3) In the event a growing area or portion of a growing area is confirmed as the original source of product associated with two (2) or more *Vibrio parahaemolyticus* illnesses within the past five (5) years, the maximum hours to temperature control for shellfish shall, upon notice provided by the Department, be in accordance with the National Shellfish Sanitation Program Guide for the Control of Molluscan Shellfish Model Ordinance, VIII. Control of Shellfish Harvesting. Shellfish not meeting times and temperature controls may, with Department approval, be diverted to post-harvest processing as defined in this regulation or be deemed adulterated.

Delete 61-47.2(c)(4).**Revise 61-47.2(d)(1) to read:**

(d) Identification of Shellstock in the Marketplace.

(1) When at the facilities of a certified shipper, unless certified as a reshipper (RS), shellstock shall be tagged in accordance with the provisions of item C.1.(c) or item C.2.(d)(2) at all times.

Add new subsection item 61-47.C.3(c)(3)(b)(5) to read:

(5) Shipments must include a time-temperature recording device when shipping from one certified shipper to another certified shipper.

Revise 61-47.D.3(d)(3)(j)(iv) to read:

(iv) When multiple tube ultra-violet treatment with redundant capacity is used as a water disinfectant, each time a bulb change is required to replace a burned out bulb, or for periodic servicing, new ultra-violet bulbs shall be installed and old bulbs discarded. When a single tube ultra-violet treatment unit or a multi tube unit without redundancy is utilized, each time a bulb change is required either to replace a burned out bulb or for periodic servicing, new ultra-violet bulbs shall be installed and old bulbs discarded, a set of three (3) samples of disinfected water and one sample of the source water prior to disinfection shall be collected within a twenty four (24) hour period to reaffirm the ability of the system to produce water free from the coliform group. Ultra-violet systems using either a single tube or multiple-tube unit with no redundancy as their disinfection system may utilize an approved ultra-violet wavelength intensity monitoring unit to demonstrate bulb integrity.

Revise 61-47.F.4(b) to read:

(b) The current APHA method used in the bioassay for *Karenia brevis* toxins.

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Fiscal Impact Statement:

The regulations will have no substantial fiscal or economic impact on the State or its political subdivisions. Implementation of this regulation will not require additional resources beyond those allowed. There is no anticipated additional cost by the Department or State government due to any inherent requirements of this regulation.

Statement of Need and Reasonableness:

The following is based on an analysis of the factors listed in 1976 Code Section 1-23-115(C)(1)-(3) and (9) through (11):

DESCRIPTION OF REGULATION: 61-47, Shellfish.

Purpose: The purpose of these amendments is to update R.61-47 to be consistent with the latest version of the National Shellfish Sanitation Program Guide for the Control of Molluscan Shellfish (2013). The amendments include changes to certain control measures intended to limit the growth of pathogens after the harvest of shellfish, a simplification of the retagging requirements for certified reshippers, a requirement for certified shippers to receive annual training for the safe and sanitary handling of shellfish, and stylistic changes are made including corrections for spelling, clarity, readability, grammar, and codification for overall improvement of the text of the regulation.

Legal Authority: 1976 Code Section 44-1-140.

Plan for Implementation: Upon approval by the General Assembly and publication in the State Register as final regulations, a copy of R.61-47, to include these amendments, will be available electronically on the Department's internet site at <http://www.scdhec.gov/Agency/RegulationsAndUpdates/LawsAndRegulations/Water/> under the Water category and subsequently in the Code of Regulations of the S.C. Code of Regulations. Printed copies will be available for a fee from the Department's Freedom of Information Office.

DETERMINATION OF NEED AND REASONABLENESS OF THE REGULATION BASED ON ALL FACTORS HEREIN AND EXPECTED BENEFITS:

The amendments are needed and reasonable because they will incorporate National Shellfish Sanitation Program minimum guidance criteria that have been implemented since the last revision of this regulation. Regulatory adoption of National Shellfish Sanitation Program minimum guidance criteria and standards are necessary to ensure a high degree of public health protection for consumers of shellfish. State and industry compliance with these minimum criteria and standards ensures that South Carolina shellfish are acceptable for interstate and international commerce.

DETERMINATION OF COSTS AND BENEFITS:

Internal Costs: Implementation of these amendments will not require additional resources. There is no anticipated additional cost by the Department or State government due to any inherent requirements of these amendments.

External Costs: There are minimal external costs for implementing the amendments to this regulation.

External Benefits: These amendments will affect consumers, harvesters, processors and transporters of molluscan shellfish. The amended regulation seeks to benefit consumers of shellfish, because the amendments include requirements for the safe and sanitary harvesting, storing, processing, handling and transportation of molluscan shellfish to protect the health of consumers of shellfish. The regulation seeks to benefit the Shellfish industry (harvesters, processors and transporters) by incorporating National Shellfish Sanitation Program

minimum guidance criteria that have been implemented since the last revision of this regulation. The regulation must be consistent with the requirements of the National Shellfish Sanitation Program, as determined by the US Food and Drug Administration, for South Carolina molluscan shellfish to be acceptable for interstate and international commerce.

UNCERTAINTIES OF ESTIMATES:

None.

EFFECT ON ENVIRONMENT AND PUBLIC HEALTH:

The amendments will have no effect on the environment.

The amendments seek to benefit human health including requirements for the safe and sanitary harvesting, storing, processing, handling and transportation of molluscan shellfish to protect the health of consumers of shellfish.

DETRIMENTAL EFFECT ON THE ENVIRONMENT AND PUBLIC HEALTH IF THE REGULATION IS NOT IMPLEMENTED:

There would not be a detrimental effect on the environment.

If the amendments are not implemented, consumers of shellfish will not realize potential benefit from new or revised requirements for the safe and sanitary harvesting, storing, processing, handling and transportation of molluscan shellfish.

Statement of Rationale:

The Department is amending this regulation to be consistent with the latest version of the National Shellfish Sanitation Program Guide for the Control of Molluscan Shellfish (2013). The regulation prescribes requirements for producers, processors, harvesters, and transporters of shellfish and is intended to protect the health of consumers of molluscan shellfish (oysters and clams).

The regulation closely follows the requirements in the National Shellfish Sanitation Program (NSSP), Guide for the Control of Molluscan Shellfish. This document was developed and is routinely updated by the Interstate Shellfish Sanitation Conference (ISSC), which includes representatives from the shellfish industry, academia, and state and federal government agencies. Department staff in the shellfish program represent South Carolina on the ISSC. The U.S. Food and Drug Administration (FDA) is the federal government agency that oversees national and international compliance with the substantive requirements of the NSSP, Guide for the Control of Molluscan Shellfish. The Department and shellfish industry in South Carolina must meet these requirements, as determined by the FDA, for South Carolina shellfish to be acceptable for interstate and international commerce. The FDA expects states to implement and enforce the latest additions and modifications to NSSP, Guide for the Control of Molluscan Shellfish as adopted by the ISSC. To implement and enforce many of the latest additions and modifications to NSSP, Guide for the Control of Molluscan Shellfish, R.61-47 must be amended as is the case with these amendments to the regulation.

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Document No. 4542

DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL

CHAPTER 61

Statutory Authority: 1976 Code Sections 44-96-10 et seq.

61-107.3. Solid Waste Management: Waste Tires

Synopsis:

The South Carolina Solid Waste Policy and Management Act (Act), Section 44-96-10 et seq., S.C. Code of Laws, 1976, as amended, requires the Department to promulgate regulations establishing standards for the management of waste tires. In 1993, to satisfy the requirements of the Act, the Department promulgated R.61-107.3, Solid Waste Management: Waste Tires. The regulation has not been amended since it became effective in 1993.

This amendment will support the Department's goal of protecting the health of the public and environment. The revisions ensure waste tires are properly managed so as to reduce the incidences of illegal waste tire dumping. This amendment expands and clarifies definitions applicable to waste tire management; expands and clarifies the operational, permitting and registration requirements for haulers, collectors and processors of waste tires; and establishes bonding requirements for certain waste tire haulers. The amendment removes a section referencing disposal facilities, as tire disposal is addressed in R.61-107.19 SWM: Solid Waste Landfills and Structural Fill. The amendment expands and clarifies exemptions to the regulation; clarifies reporting and recordkeeping; clarifies penalties for violations; and provides corrections for consistency, clarity, and formatting to improve the overall text of Regulation 61-107.3.

The Notice of Drafting for amendment of R.61-107.3 was published in the *State Register* on May 23, 2014.

Section-by-Section Discussion of Amendments

61-107.3. Solid Waste Management: Waste Tires.

Revision Overview:

The regulation was reorganized for clarity and divided into five separate parts: General Provisions, Waste Tire Hauler Requirements, Collection Facility Requirements, Waste Tire Processing Requirements, and Financial Assurance and Closure Procedures for Permitted Facilities.

The revision clarifies and updates manifesting and record keeping requirements for the transport of waste tires.

The revision clarifies registration requirements for waste tire haulers and establishes a requirement that waste tire haulers secure financial assurance.

The regulation removes references to waste tire disposal facilities. The revision addresses only waste tire recycling or processing prior to disposal. Disposal of waste tires and processed tires is addressed in R.61-107.19 Solid Waste Management: Solid Waste Landfills and Structural Fill.

Part I. General Provisions

Exemptions for agricultural purposes and for tire manufacturers were moved to the applicability section.

The Definitions section added the following definitions:

“Local government” means a county, any municipality located wholly or partly within the county, and any other political subdivision located wholly or partly within the county when such political subdivision provides solid waste management services.

“Tire derived product” means processed tire material which has been sold and removed from the processing facility.

The Definitions section revised the following definitions:

“Processed tire” means a waste tire that has been cut, shredded, burned or otherwise altered so that it is no longer whole; or tires that have been baled or compacted. The term does not include tire products as described in the waste tire processing permit application and approved by the Department in the permit.

“Quantity” means either volume as measured by cubic yard, weight as measured in tons or pounds, or actual number of tires.

“Waste tire collection site” is changed to “Waste tire collection facility” and defined as meaning a permitted facility, or a facility exempted from the permit requirement, used for the temporary storage of waste tires prior to treatment or recycling.

“Waste tire hauler” means a person engaged in the transportation of greater than fifteen (15) waste tires at one time for the purpose of storage, processing, or disposal.

“Waste tire processing facility” means a site where equipment is used to recapture reusable by-products from waste tires or to cut, burn, or otherwise alter whole waste tires so that they are no longer whole. The term includes mobile waste tire processing equipment, waste tire pyrolysis units, and waste tire baling or compacting equipment.

“Wetlands” means those areas that are inundated or saturated by surface or groundwater at a frequency and duration sufficient to support, and under normal circumstances do support, a prevalence of vegetation typically adapted for life in saturated soil conditions. Wetlands generally include swamps, marshes, bogs, and similar areas.

The Definition section removes the following definitions because they are not used in the regulation:

“Service area”

“Waste tire disposal facility”

“Waste tire site”

The definition of “motor vehicle” was removed from the regulation for clarity.

Part I clarifies and updates manifesting requirements for the transport of waste tires and processed tires. The revision requires manifesting for transportation of more than 15 tires at any one time, and stipulates that a manifest be signed by the waste tire generator, the waste tire hauler, and the facility to which the waste tires are delivered. The section describes the recordkeeping requirements for manifesting. The section adds an exemption from manifesting for local governments when waste tires are hauled from designated residential recycling/convenience centers to the local government consolidation point. This Part also adds language to clarify how violations, penalties and variances to the regulation will be addressed.

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Part II. Waste Tire Hauler Requirements

Part II updates the registration requirements for waste tire haulers, and clarifies that certain entities are exempted from registration requirements. The section stipulates that persons who haul more than 15 waste or processed waste tires must register with the Department, and includes an existing exemption for retreading companies.

The section outlines deadlines for application renewals and addresses annual reporting requirements.

The section adds a requirement that any person hauling waste tires for compensation by others, secure financial assurance in the amount of \$10,000 to cover any necessary corrective action. The section describes allowable financial assurance mechanisms as surety bonds, irrevocable letters of credit, insurance, trust funds, and corporate financial test or other mechanisms approved by the Department.

Part III. Collection Facility Requirements

Section III outlines the permitting requirements for waste tire collection facilities. The section retains exemptions from the existing regulation for tire retailers, tire retreading companies, businesses that remove tires from motor vehicles, and permitted solid waste facilities. The regulation clarifies exemptions for businesses that store tire derived products, and adds exemptions for local government collection facilities. The section includes location, design, and operating requirements for collection facilities, and establishes new buffers to property lines and wells in order to be more protective of the environment and public health. The section includes record keeping and annual reporting requirements.

Part IV. Waste Tire Processing Facility Requirements

Part IV updates requirements for waste tire processors. It addresses permit application procedures and references the location, design, and operating requirements included in Part III. The section clarifies the tire processing permit exemption for permitted solid waste management facilities, which is addressed in Section D of the current regulation. The section addresses record keeping and annual reporting requirements.

Part V. Financial Assurance and Closure for Permitted Facilities

Part V addresses financial assurance coverage requirements for permitted facilities. Financial assurance is required for permitted facilities in an amount sufficient for third party costs to remove, recycle and/or dispose of all tires, processed tires and residuals, and for closure of the facility in accordance with the regulation. The section outlines acceptable financial assurance mechanisms, and exempts local governments from those requirements.

The regulation stipulates requirements for noticing and site preparation of facilities seeking to close, and establishes standards for inspection and verification by Department staff prior to release of remaining financial assurance.

Part V. K Closure of Non-Permitted Sites is removed in the revision. Section K addressed closure of non-permitted facilities in existence at the time of the original regulation in 1993. The revision removes any special consideration given to existing non-permitted sites. Non-permitted sites would be considered in the revised regulation to be collection facilities operating without a permit, unless specifically exempted.

Instructions: Replace R.61-107.3 in its entirety with this amendment.

Text:**61-107.3 Solid Waste Management: Waste Tires.**

Part I. General Provisions.

A. Applicability.

1. The requirements of this regulation apply to waste tire haulers, collectors, processors and disposers, except as specifically exempted.

2. The requirements of this regulation do not apply to a person using waste tires for agricultural purposes provided the tires are maintained so as to prevent and control mosquitoes and other public health nuisances as determined by the Department.

3. The requirements of this regulation do not apply to a tire manufacturer as related to the disposal only of tires generated in the course of its scientific research and development activities, so long as the waste tires are buried on the facility's own land or that of its affiliates or subsidiaries and the disposal facility is in compliance with all applicable regulations.

B. Definitions.

1. "Department" means the South Carolina Department of Health and Environmental Control.

2. "Local government" means a county, any municipality located wholly or partly within the county, and any other political subdivision located wholly or partly within the county when such political subdivision provides solid waste management services.

3. "Person" means an individual, corporation, company, association, partnership, unit of local government, state agency, federal agency, or other legal entity.

4. "Processed tire" means a waste tire that has been cut, shredded, burned, or otherwise altered so that it is no longer whole; or waste tires that have been baled or compacted. The term does not include tire products as described in the waste tire processing permit application and approved by the Department in the permit.

5. "Quantity" means either volume as measured by cubic yard, weight as measured in tons or pounds, or actual number of tires by type.

6. "Residual" means any liquid, sludge, metal, fabric, or by-product resulting from the processing or storage of tires. Residual does not include processed tires held for recycling or disposal.

7. "Solid waste management facility" means any solid waste disposal area, volume reduction plant, transfer station, or other facility, the purpose of which is the storage, collection, transportation, treatment, utilization, processing, recycling, or disposal, or any combination thereof, of solid waste. The term does not include a recovered materials processing facility or facilities which use or ship recovered materials, except that portion of the facility that is managing solid waste.

8. "Tire" means a continuous solid or pneumatic rubber covering encircling the wheel of a motor vehicle, trailer, or motorcycle, as defined in S. C. Code Section 56-3-20(2), (4), and (13). It does not include an industrial press-on tire, with a metal or solid compound rim, which may be retooled.

9. "Tire derived product" means processed tire material that has been sold and removed from the processing facility.

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10. "Tire disposal" means to deposit, dump, spill, or place any waste tire, processed tire, or residuals into or upon any land or water.

11. "Tire recycling" means any process by which waste tires, processed tires, or residuals are reused or returned to use in the form of products or raw materials.

12. "Waste tire" means a whole tire that is no longer suitable for its originally intended purpose because of wear, damage, or defect.

13. "Waste tires for agricultural purposes" means waste tires that are generated during the normal production of plants and livestock, and which are kept on-site for beneficial re-use.

14. "Waste tire collection facility" means a permitted facility or a facility exempted from the permit requirement, used for the temporary storage of waste tires.

15. "Waste tire generator" means any person whose action or process produces a waste tire, or whose action first causes a waste tire to become subject to regulation.

16. "Waste tire hauler" means a person engaged in the transportation of greater than fifteen (15) waste tires at one (1) time for the purpose of storage, processing, or disposal.

17. "Waste tire processing facility" means a site where equipment is used to recapture reusable by-products from waste tires or to cut, burn, or otherwise alter whole waste tires so that they are no longer whole. The term includes mobile waste tire processing equipment, waste tire pyrolysis units, and waste tire baling or compacting equipment.

18. "Wetlands" means those areas that are inundated or saturated by surface or groundwater at a frequency and duration sufficient to support, and under normal circumstances do support, a prevalence of vegetation typically adapted for life in saturated soil conditions. Wetlands generally include swamps, marshes, bogs, and similar areas.

C. Manifesting.

1. Any person who transports more than fifteen (15) tires at a time, shall document the transport of the tires using a South Carolina Waste Tire Manifest, or other document approved by the Department.

2. The manifest shall be used to track and certify the movement of waste tires from the point of origination to a permitted waste tire collection facility, a permitted solid waste management facility, or a permitted, or approved, waste tire processing facility.

3. The waste tire hauler shall sign the manifest and secure the signatures of both the waste tire generator and a representative of the waste tire collection, processing, or disposal facility to which the tires are delivered.

4. The manifest shall document the following:

a. The quantity of waste tires or processed tires collected;

b. The name, address, and contact information of the waste tire generator of the waste tires or processed tires;

c. The name, address, and contact information for the location to which the waste tires or processed tires were delivered;

- d. The number of tires that were sorted for reuse; and,
- e. The quantity of waste tires or processed tires that were delivered to the collection, processing or disposal facility.

5. Within thirty (30) days of collecting waste tires from a location, a waste tire hauler shall provide a completed, final manifest to the waste tire generator, documenting delivery to a waste tire collection, processing or disposal facility.

6. A waste tire hauler shall record and maintain a copy of the completed manifest for three (3) years. Manifests shall be available for inspection by Department personnel during normal business hours.

7. A waste tire collection, processing, or disposal facility shall retain a copy of the completed manifest for three (3) years, and shall make manifests available for inspection by Department personnel during normal business hours.

8. Local governments and their agents that haul waste tires only from designated residential recycling/convenience centers to the local government consolidation point, are exempt from the manifest requirements of this Part.

D. Penalties.

1. The Department may impose civil penalties not to exceed ten thousand dollars (\$10,000), for each day of violation, for violations of the regulation.

2. A person who willfully violates this regulation is guilty of a misdemeanor and, upon conviction, must be fined not more than ten thousand dollars (\$10,000) for each day of violation, or imprisoned for not more than one (1) year, or both.

3. If the conviction is for a second or subsequent offense, the punishment must be a fine not to exceed twenty-five thousand dollars (\$25,000) for each day of violation, or imprisonment not to exceed two (2) years, or both.

E. Violations. Each day of noncompliance with an order issued pursuant to this section or noncompliance with a permit, regulation, standard, order, or requirement established under Section 44-96-170 of the South Carolina Solid Waste Policy and Management Act constitutes a separate violation.

F. Variances. Any request for a change to the adherence to a provision or provisions of this regulation, or to a permit issued pursuant to or in accordance with this regulation, shall be made in writing to the Department. The Department shall provide a written response to such a request. Variances will be granted at the discretion of the Department.

Part II. Waste Tire Hauler Requirements.

A. Applicability and Conditions.

1. The requirements of this section apply to haulers of waste tires and processed tires who haul more than fifteen (15) waste tires or passenger tire equivalents at any one (1) time.

2. Persons who use company-owned or company-leased vehicles to transport tire casings for the purposes of retreading between company-owned or company-franchised retail tire outlets and retread facilities owned or franchised by the same company are not considered waste tire haulers unless they also transport waste tires.

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3. Local governments, that haul waste tires only from residential curbside collection programs or designated recycling/convenience centers to the local government consolidation point, are exempt from the hauler registration requirements of Part II of this regulation.

4. Waste tires shall be transported under such conditions and circumstances so as to control mosquitoes and prevent their spread.

5. A waste tire hauler shall deposit waste tires and processed tires at a permitted waste tire processing facility, permitted waste tire collection facility, permitted solid waste management facility, or at another site approved by the Department.

B. Registration.

1. No waste tire hauler may transport waste tires unless registered with the Department and issued a registration number.

2. Waste tire hauler registrations shall have an annual expiration date of March 1.

3. A new application for registration shall be submitted at least thirty (30) days before the hauler intends to begin transporting waste tires.

4. Renewal applications shall be submitted at least thirty (30) days before the expiration date of the existing registration.

5. The application shall be on a form provided by the Department, and shall contain at a minimum the following information:

a. The name and address of the hauling company and the names and addresses of the officers or owners of the hauling company;

b. Information on the locations in South Carolina or elsewhere to which the waste tires will be transported for storage, processing, or disposal;

c. Documentation that the applicant has secured financial assurance in accordance with Part II.D of this regulation; and,

d. For renewal applications, the annual report required in Part II.C of this regulation.

6. A person may submit one (1) application for registration of a fleet of multiple vehicles.

C. Annual Report.

1. Waste tire haulers shall submit to the Department, on a form to be provided by the Department, a completed annual report to reflect the information collected under Part I.C.

2. This report shall be submitted to the Department annually by March 1 of each year to reflect the previous calendar year.

D. Financial Assurance for Waste Tire Haulers.

1. Waste tire haulers that haul tires for compensation by other persons shall be required to provide financial assurance to pay for corrective action.

2. Waste tire haulers shall provide financial assurance in the amount of ten thousand dollars (\$10,000).

3. The financial assurance shall be issued in favor of the Department and shall consist of one (1) or more of the following mechanisms: surety bond, irrevocable letter of credit, insurance, trust fund, corporate financial test, or other evidence of financial responsibility assurance approved by the Department.

4. The Department shall use the financial assurance when necessary to pay for clean-up or corrective action. Any money remaining after completion of clean-up and/or corrective action shall be returned to the person who posted the financial assurance.

5. Financial assurance requirements of Part II.D of this regulation do not apply to a local government that hauls waste tires.

Part III. Waste Tire Collection Facility Requirements.

A. General Requirements for Waste Tire Collection Facilities.

1. No person shall store more than one hundred twenty (120) waste tires or processed tires unless the waste tires or processed tires are:

- a. Collected and stored at a permitted waste tire collection facility, in accordance with this regulation;
- b. Collected and stored at a permitted solid waste management facility before processing and recycling or disposal in accordance with this regulation; or,
- c. Managed as otherwise exempted by this regulation.

2. The operator of a waste tire collection facility shall not accept waste tires in excess of the storage limit defined in the facility permit. Each tire stored in excess of the permitted storage limit may be considered a separate violation of this regulation.

3. At least seventy-five (75) percent of the waste tires and processed tires that are both stored at the facility at the beginning of each calendar quarter, and delivered to the facility during each quarter, shall be removed from the facility during the quarter.

4. All waste tire collection facilities must comply with the requirements of this regulation, unless otherwise exempted or approved by the Department.

5. The owner or operator of a waste tire collection facility shall control mosquitoes and rodents so as to protect the public health and welfare and to prevent public health nuisances on or sourced from the facility. The owner or operator shall implement such mosquito control measures or other pest control measures as may be required by the Department and/or local mosquito control program. Records shall be kept of all mosquito control activities and made available upon request.

B. Exemptions. The following activities do not require a collection facility permit if the designated waste tire sites are maintained so as to prevent and control mosquitoes or other public health nuisances as determined by the Department:

1. A tire retailing business storing less than one thousand (1,000) waste tires on the business premises; tires managed for resale do not count toward this limit provided they are segregated from waste tires and stored by size in a rack or stack not more than two rows wide, in such a manner as to allow the inspection of each individual tire;

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2. A tire retreading business storing less than two thousand five hundred (2,500) waste tires on the business premises, or a tire retreading facility that is owned or operated by a person manufacturing tires in this state or a parent company or its subsidiaries manufacturing tires in this state;

3. A business that in the ordinary course of business, removes tires from motor vehicles, if less than one thousand (1000) of these tires are being stored on the business premises; or

4. A permitted solid waste management facility with less than two thousand five hundred (2500) waste tires temporarily stored on the business premises.

C. Location and Design Criteria.

1. All facilities shall comply with the minimum buffers listed below, as they exist at the time the permit application is received by the Department:

a. A minimum two hundred (200)-foot buffer shall be required from residences, schools, day-care centers, churches, hospitals, and publicly owned recreational park areas;

b. A minimum fifty (50)-foot buffer shall be required from property lines;

c. A minimum two hundred (200)-foot buffer shall be required from any body of water or any wetlands area; and,

d. A minimum two hundred (200)-foot buffer shall be required from public or private drinking water wells.

2. The Department may approve, with documented consent of all property owners within the buffer, less stringent buffers than those listed in this regulation.

3. The Department reserves the right to require more stringent buffers if it is determined, based on the location or operations, that more stringent buffers are necessary to protect health and the environment.

4. The Department's permit decision does not supersede, affect, or prevent the enforcement of a zoning regulation or ordinance within the jurisdiction of an incorporated municipality or county, or by an agency or department of this state.

5. Local governments may require siting criteria and buffer distances that are more stringent than the state regulations.

6. The Department may issue a variance to operate with less restrictive buffers with documented consent of all property owners within the buffer, or when the technology and practices of the operation justify the reduction. The request shall be made in writing to the Department.

7. Permitted facilities operating on the effective date of this regulation shall not be subject to the location criteria.

8. The facility shall be managed so that stormwater or floodwater is diverted around and away from the storage piles.

9. Access to the facility shall be controlled through the use of fences, gates, natural barriers, or other means approved by the Department.

10. The facility shall be bermed or given other adequate protection deemed necessary by the Department to keep liquid runoff from a potential tire fire from entering a body of water.

D. Operating Criteria.

1. A waste tire pile or processed tire pile shall have no greater than the following maximum dimensions:
 - a. Width: fifty (50) feet;
 - b. Area: ten thousand (10,000) square feet; and,
 - c. Height: fifteen (15) feet.
2. A fire lane fifty (50) feet wide shall be placed around the perimeter of each waste tire pile. Access to the fire lane for emergency vehicles must be unobstructed at all times.
3. The owner or operator of a waste tire facility shall control mosquitoes and rodents to protect public health and welfare. The owner or operator shall implement such mosquito control measures or other pest control measures as may be required by the Department and/or local mosquito control program. Records shall be kept of all mosquito control activities and/or preventive measures and shall be made available upon request.
4. If the facility receives tires from persons other than the operator of the facility, a sign shall be posted at the entrance of the facility that states operating hours, permit number, and emergency contacts.
5. No operations involving the use of open flames shall be conducted within fifty (50) feet of a waste tire pile.
6. An approach and access road to the waste tire facility shall be kept passable for emergency vehicles at all times.
7. An attendant shall be present when the waste tire facility is open for business and the facility shall be secured from public access when closed.
8. Fire protection services for the facility shall be assured through arrangements with local fire protection authorities. Documentation of these arrangements must be provided to the Department and made available upon request.
9. Communication equipment shall be maintained in working order at the waste tire facility to ensure that the site operator and other employees can contact local fire protection authorities in the event of an emergency.
10. The waste tire storage areas of the facility shall be kept free of grass, underbrush, and other potentially flammable material at all times.
11. The operator of the facility shall prepare and keep at the facility an emergency preparedness manual. The manual shall be updated at least once a year. The manual shall contain, at a minimum, the following elements:
 - a. A list of names and telephone numbers of persons to be contacted in the event of a fire, flood, or other emergency;
 - b. A list of the emergency response equipment at the facility, with the location of the equipment clearly shown on a facility map, and instructions for its use in the event of a fire or other emergency; and,
 - c. A description of the procedures to be followed in the event of a fire, including, but not limited to, procedures to contain and dispose of the oily material generated by the combustion of a large numbers of tires.
12. Upon becoming aware of a fire or an emergency that has potential off-site effects, the facility personnel shall immediately notify the Department. If the emergency occurs after normal business hours, the facility shall

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contact the Department through the Department's 24-Hour Emergency Response Number. Within two (2) weeks of any emergency involving potential off-site impact, the operator of the site shall submit to the Department a written report summarizing the emergency. This report shall describe the origins of the emergency, the actions that were taken to remediate the emergency, the results of the actions that were taken, and an analysis of the success or failure of the actions.

13. The operator of the facility shall maintain records of the quantity of waste tires and processed tires received at the site, stored at the site, and shipped from the site.

14. Waste tires stored indoors shall meet the same storage criteria as tires stored outdoors unless otherwise specified by the Department.

15. The storage of processed tires shall meet all of the storage criteria as stated in this Section.

16. The temperature of any above-ground piles of compacted, processed tires over one thousand (1,000) cubic yards in size shall be monitored to ensure that the temperature of the tires does not exceed 302 degrees Fahrenheit (150 degrees Celsius). Temperature control measures shall be instituted so that pile temperatures do not exceed 302 degrees Fahrenheit (150 degrees Celsius).

17. Any residuals from waste tire processing shall be managed so that the residuals are contained on-site; the residuals shall be stored temporarily and be controlled and disposed in a permitted solid waste management facility or properly recycled.

E. Application Requirements for Waste Tire Collection Facility Permits.

1. The application for a waste tire collection facility shall be on a form provided by the Department.

2. The application shall contain at a minimum the following:

a. Proof of ownership of the property upon which the waste tires are collected;

b. Site maps or other documents detailing the location and design criteria requirements of Part III.C;

c. An operational plan outlining the operational requirements of Part III.D;

d. A closure plan which shall include at a minimum the following:

(1) Schedule for removal of all waste, waste tires, or processed tires and residuals; and,

(2) Certification that all waste or processed tires remaining on site will be transported to a permitted processing or disposal facility and that closure shall be performed in accordance with Part V of this regulation; and

e. Documentation that the applicant has secured financial assurance in accordance with Part V of this regulation.

F. Record Keeping and Annual Reports.

1. The owner or operator of a waste tire collection facility shall record and maintain for three (3) years the following information regarding its activities:

a. For all waste tires and processed tires shipped from the facility, the name and waste tire hauler, registration number of the waste tire hauler who accepted the waste or processed tires for transport, the quantity

of waste tires or processed tires shipped with that hauler, and the place where the waste or processed tires were deposited;

b. For all waste tires and processed tires received at the facility, the name and waste tire hauler registration number of the hauler who delivered the waste or processed tires to the facility, and the quantity of waste or processed tires received from that hauler; and,

c. For all waste tires removed for recapping, the quantity and type removed, and the name and location of the recapping facility receiving the tires.

2. The above records shall be available at the facility for inspection by Department personnel during normal business hours.

3. Owners and operators of waste tire collection facilities shall submit to the Department an annual report, by March 1, that reflects the information collected under Section F.1 above, and the information outlined below:

a. The facility name, address and permit number;

b. The calendar year covered by the report;

c. The total quantity and type of waste tires and processed tires received at the facility during the year covered by the report;

d. The total quantity and type of waste tires and processed tires shipped from the facility during the year covered by the report;

e. The general disposition of waste tires and processed tires; and,

f. The total quantity and type of waste tires and processed tires located at the facility on the first day of the calendar year.

Part IV. Waste Tire Processing Facility Requirements.

A. General Requirements for Waste Tire Processing Facilities.

1. No person shall operate a waste tire processing facility without a permit issued by the Department.

2. All waste tire processing facilities shall be operated in accordance with this regulation.

3. A waste tire processing facility shall not accept any waste tires for processing in excess of its permitted storage limit. The maximum allowable storage limit for processing facilities is thirty (30) times the daily through-put of the processing equipment used. Each waste tire or processed tire stored in excess of the permitted storage limit may be considered a separate violation of this regulation.

4. At least seventy-five (75) percent of the waste tires and processed tires that are both stored at the facility at the start of a calendar year, and are delivered to the facility during the year, shall be processed and removed from the facility during the calendar year.

5. All waste tire processing facilities shall comply with the location, design, and operational standards of this regulation unless otherwise exempted or approved by the Department.

6. A permitted solid waste management facility with less than two thousand five hundred (2500) waste tires temporarily stored on the facility premises is not required to obtain a waste tire processing permit prior to

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disposal, provided the waste tires are maintained in a manner that will prevent and control mosquitoes or other public health nuisances.

B. Location, Design and Operating Criteria.

1. All waste tire processing facilities shall comply with the location and design criteria of Part III.C of this regulation.

2. All waste tire processing facilities shall comply with the operating criteria of Part III.D of this regulation, unless otherwise exempted or approved by the Department.

C. Permit Requirements for Waste Tire Processing Facilities.

1. All applications for permits required by this regulation shall be submitted to the Department on forms provided by the Department. No construction of a proposed facility or equipment shall begin until all permits required by the Department are final.

2. The application for a waste tire processing facility shall be on a form provided by the Department, and shall contain at a minimum the following:

- a. Proof of ownership of the property upon which the waste tire processing facility will be located;
- b. Site maps or other documentation detailing the location and site design requirements of Part III.C of this regulation;
- c. A plan outlining the operational requirements of Part III.D of this regulation;
- d. A description of the tire processing equipment, including manufacturer's information, for determination of throughput;
- e. A closure plan, which shall include at a minimum the following:
 - (1) A schedule for removal of all waste or processed tires and residuals; and,
 - (2) Certification that all waste or processed tires remaining on site will be transported to a permitted processing or disposal facility and that closure shall be performed in accordance with Part V of this regulation; and,
- f. Documentation that the applicant has secured financial assurance in accordance with Part V of this regulation.

D. Record Keeping and Annual Reporting.

1. The owner or operator of a waste tire processing facility shall record and maintain for three (3) calendar years the following information regarding its activities:

- a. For all waste tires and processed tires shipped from the facility, the name and waste tire hauler registration number of the waste tire hauler who accepted the waste tires or processed tires for transport, the quantity of waste tires or processed tires shipped with that hauler, and the place where the waste tires or processed tires were deposited;

b. For all waste tires and processed tires received at the facility, the name and waste tire hauler registration number of the hauler who delivered the waste tires or processed tires to the facility, and the quantity of waste tires or processed tires received from that hauler; and,

c. For all waste tires removed for recapping, the quantity and type removed, and the name and location of the recapping facility receiving the tires.

2. The above-referenced records shall be available at the site for inspection by Department personnel during normal business hours and made available by request.

3. Owners and operators of waste tire processing facilities shall submit to the Department a completed annual report, by March 1, on a form provided by the Department, that includes the information collected under Part IV. D.1 above, and the information outlined below:

a. The facility name, address and permit number;

b. The calendar year covered by the report;

c. The total quantity and type of waste tires and processed tires received at the facility during the calendar year covered by the report;

d. The total quantity and type of waste tires and processed tires shipped from the facility during the calendar year covered by the report;

e. The general disposition of waste tires and processed tires; and,

f. The total quantity and type of waste tires and processed tires located at the facility on the first day of the calendar year.

Part V. Financial Assurance and Closure Procedures for Permitted Facilities.

A. Financial Assurance Requirements.

1. Permitted waste tire facilities shall fund a financial assurance mechanism acceptable to the Department for completing final closure prior to accepting waste tires.

2. A final closure cost estimate, based on third party costs to complete closure by disposing of the maximum quantity of waste and processed tires at a permitted facility, shall be performed annually and adjusted annually, if necessary.

3. The financial responsibility requirements shall not apply to any local government or region comprised of local governments that owns and operates a municipal solid waste management facility, unless and until such time as federal regulations require such local governments and regions to demonstrate financial responsibility for such facilities.

4. The financial assurance shall be issued in favor of the Department and may consist of one (1) or more of the following mechanisms: surety bond, irrevocable letter of credit, insurance, trust fund, corporate financial test, or other evidence of financial responsibility assurance that is approved by the Department.

B. Closure Procedures. Waste tire collection and processing facilities shall close in accordance with the following procedures:

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1. At least sixty (60) days prior to closure, written notice of intent to close and a proposed closure date shall be submitted to the Department;
2. Upon closing, immediately post closure signs at the facility;
3. All waste tires, processed tires, residuals, and any other waste at a facility shall be removed to a permitted processing or disposal facility and the waste handling areas shall be cleaned within ten (10) days of closure;
4. Within ten (10) days of closure, a Department inspection and approval of closure shall be requested; and,
5. Within sixty (60) days of closure, grade land to promote positive drainage and seed with native vegetation to prevent erosion.

C. Release of Financial Assurance. The Department shall release any remaining financial assurance upon verification by the Department that closure has been satisfactorily completed in accordance with this regulation.

Fiscal Impact Statement:

Additional costs to state government are not anticipated. There are no direct costs to local governments that can be attributed to this regulation.

Statement of Need and Reasonableness:

This Statement of Need and Reasonableness was determined by staff analysis pursuant to S.C. Code Section 1-23-115(C)(1)-(3) and (9)-(11).

DESCRIPTION OF REGULATION:

Purpose: The amendment will support the Department's goal of promoting and protecting the health of the public and the environment, by ensuring waste tires are managed properly. This amendment expands and clarifies definitions applicable to waste tire management; expands and clarifies the operational, permitting and registration requirements for haulers, collectors and processors of waste tires; and establishes bonding requirements for certain waste tire haulers. The amendment expands and clarifies exemptions to the regulation; clarifies reporting and record keeping; clarifies penalties for violations; and provides corrections for consistency, clarity, and formatting to improve the overall text of Regulation 61-107.3.

Legal Authority: 1976 Code Sections 44-96-10 *et seq.* Legislative review is required.

Plan for Implementation: Upon approval of the General Assembly and publication in the South Carolina State Register, a copy of the revised regulation will be available electronically on the Department's website on the Department's Laws and Regulations website under the Land and Waste Management category at: <http://www.scdhec.gov/Agency/RegulationsAndUpdates/LawsAndRegulations/> . Subsequently, a copy of the regulation will be published in the S.C. Code of Regulations on the S.C. Legislature Online website. Printed copies will be available for a fee from the Department's Freedom of Information Office. Staff will notify parties that have expressed interest in the regulation amendment process, and will communicate with affected parties on the requirements of the amended regulation. No additional positions or personnel should be needed to enforce the regulation.

DETERMINATION OF NEED AND REASONABLENESS OF THE REGULATION BASED ON ALL FACTORS HEREIN AND EXPECTED BENEFITS:

The current regulation was promulgated in 1993 and has never been amended. Although the Department has overseen the removal of numerous illegal waste tire stockpiles that were in existence when the regulation was

promulgated, staff has continued to identify new illegal dumps. The amendment is designed to reduce incidences of illegal dumping, to help identify illegal dumpers, and to satisfy tire generators, local governments and waste tire processors who have requested that the Department expand regulatory requirements for waste tire hauling. The amendment adds financial assurance requirements for haulers, and expands manifesting requirements. These changes are needed and reasonable because they will clarify standards for managing tires, and enable the Department to better identify those who are not managing tires appropriately.

DETERMINATION OF COSTS AND BENEFITS:

Internal costs and benefits: There should be no increased cost to the State or its political subdivision resulting from this revision. The amendment seeks to benefit the environment by preventing illegally dumped tires, thereby reducing locations where mosquitoes breed. A decrease in illegal dumping would result in a cost savings to the Department and to local governments due to a decrease in the need for waste tire stockpile removals. This cost savings should increase the funds available for grants to local governments for the purchase of products made from recycled tires, such as playground material and walking trails. Recycled product grants should benefit residents of local governments receiving the grants, and the businesses that recycle waste tires and sell products made from the recycled material.

External costs and benefits: The revisions seek to benefit tire retailers or other generators of waste tires by helping ensure that the haulers they hire will deliver tires to appropriate locations. There will be some limited external costs for implementing the manifesting requirements of the regulation, but these costs are anticipated to be minimal, and are related primarily to record keeping. There will be added external costs to waste tire haulers for implementation of the financial assurance requirements, but these costs are felt to be minimal relative to the benefits to local governments, residents, waste tire generators and private property owners. Added benefits should be derived by waste tire processors because proper tire management should provide them additional rubber feedstock for recycling and for sale as new tire-derived products.

UNCERTAINTIES OF ESTIMATES:

There are no foreseeable uncertainties of estimates relative to the cost to the State or its political subdivisions.

EFFECT ON ENVIRONMENT AND PUBLIC HEALTH:

While there are many positive impacts anticipated as a result of these revisions, the primary intention is to decrease the likelihood of illegal dumping, collection and storage of waste tires. Illegally stored tires attract vermin and increase production of mosquitoes, resulting in public health nuisances and the promotion of diseases in humans and animals. Illegally dumped tires pose a fire hazard, with tire fires resulting in both toxic fumes and harmful runoff. The anticipated result of these revisions is that tires will be managed properly, protecting both public health and the environment.

DETRIMENTAL EFFECT ON THE ENVIRONMENT AND PUBLIC HEALTH IF THE REGULATIONS ARE NOT IMPLEMENTED:

Without the regulation revisions, the Department would continue to struggle to prevent the illegal dumping of waste tires. The impact on the environment and public health would include mosquito and vector nuisances, as well as the potential increase in illness and diseases to humans and animals.

Statement of Rationale:

The South Carolina Solid Waste Policy and Management Act of 1991 directed the Department to develop regulations to promote the recycling and proper management of waste tires. The resulting regulation was promulgated in 1993, but has been identified by the Department and by various members of the tire management community as being in need of updating.

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A stakeholder workgroup developed the criteria on which the regulation revision is based. The workgroup included private sector representatives including tire manufacturers, tire retailers, waste tire haulers, waste tire processors, and representatives of the waste management industry. Input was solicited from representatives of environmental organizations and the South Carolina Retail Association. Public sector representation was provided by federal, state, county and municipal government representatives; state and local mosquito control officials; the South Carolina Association of Counties; the South Carolina Municipal Association; the South Carolina Department of Commerce; and Department staff.

The Department conducted a stakeholder meeting and circulated multiple versions of the drafted revisions for comment from the stakeholder members. Comments received during the stakeholder process were considered as revisions were developed.

Document No. 4471
DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL
CHAPTER 61
Statutory Authority: 1976 Code Section 44-7-260

61-91. Standards for Licensing Ambulatory Surgical Facilities.

Synopsis:

The amendments to R.61-91, *Standards for Licensing Ambulatory Surgical Facilities*, will support the Department's goal of promoting and protecting the health of the public in a more efficient and effective manner. The amendments clarify and expand the definitions, particularly the definition of "same day," revise the codes for fire and life safety and for design and construction. In addition, corrections have been made for clarity and readability, grammar, references, codification and overall improvement to the text of the regulation.

A Notice of Drafting was published in the *State Register* on March 28, 2014.

Changes made at the request of the
Senate Medical Affairs Committee
by letter dated May 6, 2015:

Section 61-91.501, General (II), was revised that a facility shall be fully staffed and trained as required by this Section at all times a patient is in the facility or the facility is open to accept patients.

Section-by-Section Discussion of Amendments submitted by
the Department of Health and Environmental Control
on January 13, 2015 for legislative review:

Correct statutory authority under the title of the regulation in the text.

TABLE OF CONTENTS

The table was revised to reflect the proposed amendments.

61-91.101 Definitions

The definitions 61-91.101.I Certified Nursing Assistant and 61-91.101.VV Surgical Technologist have been added. The definitions 61-91.101.B Administering Medication, 61-91.101.E Ambulatory Surgical Facility, 61-91.101.L (formerly 61-91.101.K) Consultation, 61-91.101.T (formerly 61-91.101.S) Inspection, 61-91.101.U (formerly 61-91.101.T) Investigation, 61-91.101.Y (formerly 61-91.101.X) License, 61-91.101.EE (formerly 61.91.101.DD) Nonlegend Medication, and 61-91.101.RR Same Day have been amended. The definition 61-

91.101.NN, Registered Nurse Anesthetist has been deleted. The remaining definitions were renumbered to adjust the codification.

61-91.102 References

Section 61-91.102.B was amended to delete a reference that is no longer applicable.

61-91.103 Licensure Requirements

Section 61-91.103.A was amended to ensure a license is required to provide care, treatment, procedures, surgery, and/or services to patients. 61-91.103.C was amended to allow an already licensed facility is in compliance with construction codes. Section 61-91.103.D was deleted to ease the economic burden of code requirements for an established ambulatory surgical facility. Section 61-91.103.H was amended to inform the licensee they may be charged for an inspection fee. Section 61-91.103.L.3 (formally 61-91.103.M.3) was amended to reflect the adjusted codification. The remaining sections were renumbered to adjust the codification.

61-91.202 Inspections/Investigations

Section 61-91.202.A was amended to add two (2) more associations as deemed status to determine the appropriateness of Department inspections.

61-91.501 Staff

Sections 61-91.501.A and 61-91.501.B were amended to clarify staffing requirements.

61-91.504 Medical Staff

Section 61-91.504.E was amended to delete the word local.

61-91.508 Health Status

Section 61-91.508.A was amended to a correct reference. Section 61-91.508.B was amended to add a new reference.

61-91.601 Accidents/Incidents

Section 61-91.601.A and 61-91.601.B were amended to the current standards of accident/incident reporting. Section 61-91.601.B.15 was revised to clarify an anesthesia apparatus malfunction.

61-91.602 Fire/Disasters

Sections 61-91.602.A and 61-91.602.B were amended to clarify reporting a fire to the Department within seventy-two hours. Section 61-91.602.C was added to clarify the fire watch requirement.

61-91.604 Administrator Change

Section 61-91.604 was amended regarding references to the “Division of Health Licensing” changed to “The Department.”

61-91.607 Facility Closure

Section 61-91.607.A and 61-91.607.B were amended regarding references to the “Division of Health Licensing” changed to “The Department.”

61-91.608 Zero Census

Section 61-91.608 was amended to clarify application and payment requirements even though a facility may have zero census.

61-91.702 Authentication

Section 61-91.702 was amended to clarify authentication requirements.

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61-91.703 Record Maintenance

Sections 61-91.703.F and 61-91.703.G were amended regarding references to the “Division of Health Licensing” changed to “The Department.”

61-91.802 Physical Examination

Section 61-91.802.A was revised to include a legally authorized healthcare provider which includes, but not limited to, a physician assistant to perform a physical examination.

61-91.803 Surgical Services

Section 61-91.803.A was amended to clarify surgical services requirements. Section 61-91.803.B was deleted as the data is no longer collected.

61-91.804 Anesthesia Services

Section 61-91.804.A.4 was deleted as the term Registered Nurse Anesthetist is no longer acceptable.

61-91.901 General (Rights and Assurances)

Section 61-91.901.C was amended regarding references to the “Division of Health Licensing” changed to “The Department.”

61-91.1000 Medication Management

Section 61-91.1001.D.5 was amended regarding references to the “Division of Health Licensing” changed to “The Department.”

61-91.1006 Medication Storage

Section 61-91.1006.C was amended to correct a spelling error. Sections 61-91.1006.E and 61-91.1006.F were amended regarding references to the “Division of Health Licensing” changed to “The Department.”

61-91.1007 Disposition of Medication

Section 61-91.1007.A.2 was amended to include the reference for Controlled Substances. Section 61-91.1007.B was amended regarding references to the “Division of Health Licensing” changed to “The Department.”

61-91.1101 General (Meal Service)

Section 61-91.1101.A was amended regarding references to the “Division of Health Licensing” changed to “The Department.”

61-91.1105 Equipment

Section 61-91.1105.B was amended to clarify the handwash sink requirements.

61-91.1303 Fire Response Training

Section 61-91.1303.A.5 was amended to correct a grammatical error.

61-91.1401 General (Maintenance)

Section 61-91.1401.B was amended to clarify the facility shall keep its component parts in good repair and operating condition and documented.

61-91.1402 Equipment

Section 61-91.1402.B.2 was amended regarding references to the “Division of Health Licensing” changed to “The Department.”

61-91.1403 Preventive Maintenance of Life Support Equipment

Section 61-91.1403.A.3 was amended to correct a grammatical error.

61-91.1505 Tuberculosis Risk Assessment and 61-91.1506 Staff Tuberculosis Screening

Sections 61-91.1505 and 61-91.1506 were amended to current Tuberculosis screening standards. The remaining sections were renumbered to adjust the codification.

61-91.1702 Local and State Codes and Standards

Sections 61-91.1702.B and 61-91.1702.C were deleted.

61-91.1703 Applicable Code Editions

Section 61-91.1703.A was amended to clarify the applicable construction codes with the South Carolina Building Codes Council and the South Carolina State Fire Marshall. Section 61-91.1703.B was amended to clarify compliance with construction codes. Sections 61-91.1703.C and 61-91.1703.D were deleted. The remaining section was renumbered to adjust the codification.

61-91.1704 Submission of Plans and Specifications

Section 61-91.1704 was amended to clarify the requirements for submitting plans and specifications to the Department for review.

61-91.1705 Construction Inspections

Section 61-91.1705 was added to clarify the required permits are necessary in order for the Department to conduct inspections.

61-91.1800 General Construction Requirements

Section 61-91.1800 was deleted in its entirety as this section is addressed in the revised required codes in Section 61-91.1700.

61-91.1900 Hazardous Elements of Construction

Section 61-91.1900 was deleted in its entirety as this section is addressed in the revised required codes in Section 61-91.1700.

61-91.2000 Exits

Section 61-91.2000 was deleted in its entirety as this section is addressed in the revised required codes in Section 61-91.1700.

61-91.1800 (formally Section 61-91.2100) Fire Protection Equipment and Systems

Section 61-91.2100 was renumbered to Section 61-91.1800 to adjust codifications. Sections 61-91.2101 Firefighting Equipment, 61-91.2103 Smoke Detectors, and 61-91.2104 Flammable Liquids were deleted as these sections are addressed in the revised required codes in Section 61-91.1700.

61-91.1801 (formally Section 61-91.2102) Fire Alarms

Sections 61-91.1801.A, 61-91.1801.B, and 61-91.1801.C were amended for clarity regarding the required fire alarm codes. Section 61-91.1801.B revised the language to include a pull station at each required exit. Sections 61-91.1801.D, 61-91.1801.E, 61-91.1801.F, 61-91.1801.G, and 61-91.1801.H were deleted as these sections are addressed in the revised required codes in Section 61-91.1700.

61-91.1802 (formally Section 61-91.2105) Gases

Sections 61-91.1802.A and 61-91.1802.B were deleted as these sections are addressed in the revised required codes in Section 61-91.1700. Section 61-91.1802.C was renumbered to adjust for codification.

61-91.2200 Water Supply/Hygiene

Section 61-91.2200 was deleted in its entirety as these sections are addressed in the revised required codes in Section 61-91.1700, with the exception of 61-91.2203 Temperature as this section was relocated to Section 61-91.2000 (formally 61-91.2500) Physical Plant.

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61-91.1900 (formally 61-91.2300) Electrical

Section 61-91.2300 was renumbered to Section 61-91.1900 to adjust codifications. Sections 61-91.2301 General, 61-91.2304 Receptacles, 61-91.2305 Ground Fault Protection, and 61-91.2306 Exit Signs were deleted as these sections are addressed in the revised required codes Section 61-91.1700. Sections 61-91.2302 Panelboards and 61-91.2303 Lighting were deleted as these sections are relocated in Section 61-91.2000 (formally 61-91.2500) Physical Plant. Section 61-91.1901 Emergency Generator Service was renumbered to adjust codifications and renamed from Emergency Electric Service. Section 61-91.1901 was amended to clarify the requirements for Emergency Generator Service. Section 61-91.1902.B was revised to clarify the HVAC equipment serving the patient areas need to be on the emergency generator service.

61-91.2400 Heating, Ventilation, and Air Conditioning (HVAC)

Section 61-91.2400 was deleted in its entirety as this section is addressed in the revised required codes in Section 61-91.1700, with the exception of 61-91.2402 Heating, Ventilation, and Air Conditioning as this section was relocated to Section 61-91.2000 (formally 61-91.2500) Physical Plant.

61-91.2000 (formally 61-91.2500) Physical Plant

Section 61-91.2500 was renumbered to Section 61-91.2000 to adjust codifications. Sections 61-91.2501 Administrative Areas, 61-91.2503 Clinical Facilities, 61-91.2504 Doors, 61-91.2506 Ramps, 61-91.2507 Landings, and 61-91.2510 Sinks and Handwashing Fixtures were deleted as these sections are addressed in the revised required codes Section 61-91.1700. Sections 61-91.2002 Soiled Utility Rooms, 61-91.2003 Clean Utility Rooms, 61-91.2012 Incinerators, 61-91.2013 Furnishings/Equipment, 61-91.2014 Water Requirements, 61-91.2015 Panelboards, 61-91.2016 Lighting, and 61-91.2017 Heating, Ventilation, and Air Conditioning were relocated to their respective sections from a previous area in the regulation. Sections 61-91.2001 (formerly 61-91.2502) Surgical Suites, 61-91.2004 (formerly 61-91.2505) Corridors, 61-91.2005 (formerly 61-91.2508) Handrails/Guardrails, 61-91.2006 (formerly 61-91.2509) Restrooms, 61-91.2007 (formerly 61-91.2511) Janitor's Closets, 61-91.2008 (formerly 61-91.2512) Storage Areas, and 61-91.2009 (formerly 61-91.2513) were amended to clarify the requirements for their respective areas. The remaining sections were renumbered to adjust the codification.

61-91.2100 (formally 61-91.2600) Severability

Section 61-91.2600 was renumbered to Section 61-91.2100 to adjust codifications.

61-91.2200 (formally 61-91.2700) General

Section 61-91.2700 was renumbered to Section 61-91.2200 to adjust codifications.

Instructions: Due to numerous proposed amendments, replace R.61-91 in its entirety.

Text:

61-91. Standards for Licensing Ambulatory Surgical Facilities.

Statutory Authority: 1976 Code Section 44-7-260

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SECTION 100 - DEFINITIONS, REFERENCES, AND LICENSE REQUIREMENTS

101. Definitions

For the purpose of these standards, the following definitions shall apply:

A. Administrator. The individual designated by the facility licensee to have the authority and responsibility to manage the facility.

B. Administering Medication. The direct application of a single dose or multi-dose of medication to the body of a patient by injection, ingestion, or any other means.

C. Advance Directive. A written statement such as a living will, a durable power of attorney for health care, or a do-not-resuscitate order relating to the provision of health care when the individual is incapacitated. The exercise by a patient of self-determination that encompasses making choices regarding life-sustaining treatment (including resuscitative services).

D. Advanced Practice Registered Nurse. An individual who has official recognition as such by the S.C. State Board of Nursing.

E. Ambulatory Surgical Facility. A facility organized and administered for the purpose of performing surgical procedures and/or endoscopy for which patients are scheduled to arrive, receive surgery, and be discharged on the same day.

1. The owner or operator shall make the facility available to other providers who comprise an organized professional staff, *i.e.*, an open medical staff (see Section 101.BB).

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2. This definition does not apply to any facility used as an office or clinic for the private practice of licensed healthcare professionals (see Section 101.JJ).

F. Anesthesiologist's Assistant. An individual currently licensed as such by the S.C. Board of Medical Examiners.

G. Anesthesiologist. A physician who has completed a residency in anesthesiology.

H. Anesthetic Agent. Any drug or combination of drugs administered parenterally or inhaled with the purpose of creating conscious or deep sedation.

I. Certified Nursing Assistant. A person whose duties are assigned by a licensed nurse and who has successfully completed a state-approved training program or course with a curriculum prescribed by the South Carolina Department of Health and Human Services, holds a certificate of training from that program or course and is listed on the South Carolina Registry of Certified Nurse Aides.

J. Certified Registered Nurse Anesthetist. A registered nurse who is authorized to practice as a certified registered nurse anesthetist by the S. C. State Board of Nursing.

K. Controlled Substance. A medication or other substance included in Schedule I, II, III, IV, and V of the Federal Controlled Substances Act and the S.C. Controlled Substances Act.

L. Consultation. A visit by Department representatives who will provide information to the licensee in order to facilitate compliance with these regulations.

M. Dentist. An individual currently licensed by the S.C. Board of Dentistry to practice dentistry.

N. Department. The S.C. Department of Health and Environmental Control (DHEC).

O. Direct Care Staff Member. An individual who provides care, treatment, surgery, and/or services, or performs procedures for a patient.

P. Endoscopy. Visual inspection of any cavity of the body by means of an endoscope.

Q. Existing Facility. A facility that was in operation and/or one that began the construction or renovation of a building, for the purpose of operating the facility, prior to the promulgation of this regulation. The licensing standards governing new facilities apply if and when an existing facility is not continuously operated and licensed under this regulation.

R. Facility. An ambulatory surgical facility licensed by the Department.

S. Health Assessment. An evaluation of the health status of a staff member or volunteer by a physician, physician assistant, or advanced practice registered nurse, or by a registered nurse, pursuant to standing orders approved by a physician, as evidenced by the physician's signature in accordance with facility policy.

T. Inspection. A visit by Department representative(s) for the purpose of determining compliance with this regulation.

U. Investigation. A visit by Department representative(s) to a licensed or unlicensed entity for the purpose of determining the validity of allegations received by the Department relating to this regulation.

V. Initial License. A license granted to a new facility.

W. Legally Authorized Healthcare Provider. An individual authorized by law and currently licensed in S.C. to provide specific medical care, treatment, procedures, surgery, and/or services to patients. Examples of individuals who may be authorized by law to provide the aforementioned care, treatment, procedures, surgery, and/or services may include, but are not limited to, advanced practice registered nurses, and physician assistants.

X. Legend Drug.

1. A drug required by federal law to be labeled with any of the following statements prior to being dispensed or delivered:

a. "Caution: Federal law prohibits dispensing without prescription";

b. "Rx only."

2. A drug required by federal or state law to be dispensed pursuant to a prescription drug order or restricted to use by practitioners only;

3. Any drug products designated by the S.C. Board of Pharmacy to be a public health threat; or

4. Any prescribed compounded prescription within the meaning of the Pharmacy Act.

Y. License. A certificate issued by the Department to an Ambulatory Surgical Facility to provide care, treatment, procedures, surgery, and/or services.

Z. Licensed Nurse. An individual currently licensed by the S.C. State Board of Nursing as a registered nurse or licensed practical nurse.

AA. Licensee. The individual, corporation, organization, or public entity that has received a license to provide care, treatment, procedures, surgery, and/or services at a facility and with whom rests the ultimate responsibility for compliance with this regulation.

BB. New Facility. All buildings or portions of buildings, new and existing, that are:

1. Being licensed for the first time;

2. Providing a different service that requires a change in the type of license;

3. Being licensed after the previous licensee's license has been revoked, suspended, or after the previous licensee has voluntarily surrendered the license and the facility has not continuously operated.

CC. Open Medical Staff. Members of the medical staff, which includes physicians, dentists, or podiatrists, of an ambulatory surgical facility, that have individually submitted application to the facility, and subsequently been approved to perform surgery/procedures in accordance with criteria established by the facility for approving qualified applicants.

DD. Operating Room. A room in which surgery is performed.

EE. Nonlegend Medication. A medication that may be sold without a prescription and that is labeled for use by the consumer in accordance with the requirements of the laws of this State and the Federal government.

FF. Pharmacist. An individual currently registered as such by the S.C. Board of Pharmacy.

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GG. Physical Examination. An examination of a patient by a physician or physician assistant that addresses those issues identified in Section 802 of this regulation.

HH. Physician. An individual currently licensed as such by the S.C. Board of Medical Examiners.

II. Physician Assistant. An individual currently licensed as such by the S.C. Board of Medical Examiners.

JJ. Podiatrist. An individual currently licensed as such by the S.C. Board of Podiatry Examiners.

KK. Private Practice. An individually-licensed physician or group of licensed physicians who practice together at a certain location/address in a legally-constituted professional corporation, association, or partnership; patient encounters in the office or clinic are for the purpose of diagnosis and treatment, and not limited primarily to the performance of surgery and related care, treatment, procedures, and/or services.

LL. Procedure Room. A room where procedures not requiring general anesthesia can be safely performed.

MM. Quality Improvement Program. The process used by a facility to examine its methods and practices of providing care, treatment, procedures, surgery, and/or services, identify the ways to improve its performance, and take actions that result in higher quality of care, treatment, procedures, surgery, and/or services for the facility's patients.

NN. Recovery Area. An area used for the recovery of patients.

OO. Repeat Violation. The recurrence of a violation cited under the same section of the regulation within a 36-month period. The time-period determinant of repeat violation status is not interrupted by ownership changes.

PP. Responsible Party. A person who is authorized by law to make decisions on behalf of a patient, including, but not limited to, a court-appointed guardian or conservator, or person with a health care power of attorney or other durable power of attorney.

QQ. Revocation of License. An action by the Department to cancel or annul a license by recalling, withdrawing, or rescinding its authority to operate.

RR. Same Day. A period of time not to exceed twenty-four (24) hours after admission.

SS. Staff Member. An adult who is a compensated employee of the facility on either a full or part-time basis.

TT. Surgery. Treatment of conditions by operative means involving incision, whether with a scalpel or a laser, followed by removal or repair of an organ or other tissue.

UU. Surgical Suite. An area that includes one or more operating rooms and a recovery area.

VV. Surgical Technologist. An individual who meets one of the requirements listed in 1976 Code Section 44-7-380(B)(1)(a) – (d) to practice surgical technology in South Carolina.

WW. Suspension of License. An action by the Department requiring a facility to cease operation for a period of time or to require a facility to cease admitting patients until such time as the Department rescinds that restriction.

102. References

The following publications/standards are referenced in this regulation:

A. Departmental:

1. R.61-4, *Controlled Substances*;
2. R.61-12, *Standards for Licensing Abortion Clinics*;
3. R.61-16, *Standards for Licensing Hospitals and Institutional General Infirmaries*;
4. R.61-20, *Communicable Diseases*;
5. R.61-25, *Retail Food Establishments*;
6. R.61-58, *State Primary Drinking Water Regulations*;
7. R.61-63, *Title A, Rules and Regulations for Radioactive Materials*;
8. R.61-64, *X-Rays, (Title B)*;
9. R.61-67, *Standards for Wastewater Facility Construction*;
10. R.61-105, *Infectious Waste Management Regulations*;
11. Guidelines for Prevention and Control of Antibiotic Resistant Organisms in Health Care Settings.

B. Non-Departmental:

1. American Association of Blood Banks;
2. American National Standards Institute (ANSI);
3. American Society of Heating, Refrigeration, and Air Conditioning Engineers (ASHRAE);
4. Bloodborne Pathogens Standards, Occupational Safety and Health Act (OSHA) of 1970;
5. Civil Rights Act of 1964;
6. Centers for Disease Control and Prevention (CDC);
7. International Building Code (IBC);
8. National Fire Protection Association (NFPA);

103. License Requirements (II)

A. License. No person, private or public organization, political subdivision, or governmental agency shall establish, operate, maintain, or represent itself (advertise/market) as an ambulatory surgical facility in S.C. without first obtaining a license from the Department. No such party shall provide care, treatment, procedures, surgery, and/or services to patients prior to the effective date of licensure. Upon the Department's determination that such party provides care, treatment, procedures, surgery, and/or services without a Department-issued license, the party shall cease operation immediately and ensure safety, health, and well-being of the patients. Current or previous violations of the S.C. Code and/or Department regulations may jeopardize the issuance of a license or licensing of another facility or addition to an existing facility owned or operated by the violating licensee. (I)

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B. Compliance. An initial license shall not be issued to a proposed facility that has not been previously and continuously licensed under Department regulations until the licensee has demonstrated to the Department that the proposed facility is in substantial compliance with the licensing standards. In the event a licensee who already has a facility/activity licensed by the Department makes application for another facility or increase in licensed capacity, the currently licensed facility/activity shall be in substantial compliance with the applicable standards prior to the Department issuing a license to the proposed facility or an amended license to the existing facility. A copy of the licensing standards shall be maintained at the facility and accessible to all staff members. Facilities shall comply with applicable local, state, and federal laws, codes, and regulations.

C. Compliance with Structural Standards. Facilities possessing a license issued prior to January 1, 2016 are considered in compliance with Section 1703 without modification of its licensed structure.

D. Licensed Capacity. No facility that has been licensed for a set number of operating rooms or procedure rooms shall exceed that number of operating or procedure rooms or establish new care, treatment, procedures, surgery, and/or services without first obtaining authorization from the Department. (I)

E. Issuance and Terms of License.

1. A license is issued by the Department and shall be posted in a conspicuous place in a public area within the facility.

2. The issuance of a license does not guarantee adequacy of individual care, treatment, procedures, surgery, and/or services, personal safety, fire safety, or the well-being of any patient or occupant of a facility.

3. A license is not assignable or transferable and is subject to revocation at any time by the Department for the licensee's failure to comply with the laws and regulations of this State.

4. A license shall be effective for a specified facility, at a specific location(s), for a specified period following the date of issue as determined by the Department. A license shall remain in effect until the Department notifies the licensee of a change in that status.

5. Facilities owned by the same entity but not located on the same adjoining or contiguous property shall be separately licensed. Roads or local streets, except limited access, *e.g.*, interstate highways, shall not be considered as dividing otherwise adjoining or contiguous property.

6. Separate licenses are not required, but may be issued, for separate buildings on the same or adjoining grounds where a single level or type of care is provided.

7. Multiple types of facilities on the same premises shall be licensed separately even though owned by the same entity.

8. A facility shall provide only the care, treatment, procedures, surgery, and/or services of which it is capable and equipped to provide, and has been authorized by the Department to provide pursuant to the definition in Section 101.E of this regulation.

9. Abortions shall not be performed in an ambulatory surgical facility unless it is also licensed as an abortion clinic pursuant to R.61-12.

F. Facility Name. No proposed facility shall be named nor shall any existing facility have its name changed to the same or similar name as any other facility licensed in S.C. The Department shall determine if names are similar. If the facility is part of a "chain operation" it shall then have the geographic area in which it is located as part of its name.

G. Application. Applicants for a license shall submit to the Department a completed application on a form prescribed and furnished by the Department prior to initial licensing and periodically thereafter at intervals determined by the Department. The application includes the applicant's oath, assuring that the contents of the application are accurate and true, and that the applicant will comply with this regulation. The application shall be signed by the owner(s) if an individual or partnership; in the case of a corporation, by two of its officers; or in the case of a governmental unit, by the head of the governmental department having jurisdiction. The application shall set forth the full name and address of the facility for which the license is sought and of the owner in the event his or her address is different from that of the facility, and the names of the persons in control of the facility. The Department may require additional information, including affirmative evidence of the applicant's ability to comply with these regulations. Corporations or partnerships shall be registered with the S.C. Office of the Secretary of State.

H. Fees. The initial and annual license fee shall be \$150.00 per operating/procedure room or \$600.00, whichever is greater. Such fee shall be made payable by check or money order to the Department and is not refundable. The Department may charge a fee for plan reviews, construction inspections and licensing inspections.

I. Late Fee. Failure to submit a renewal application after the license expiration date may result in a late fee of 25% of the licensing fee amount, in addition to the licensing fee. Continual failure to submit completed and accurate renewal applications and/or fees by the time-period specified by the Department may result in an enforcement action.

J. License Renewal. To renew a license, an applicant shall file an application with the Department and pay a license fee. If the license renewal is delayed due to enforcement action, the renewal license shall be issued only when the matter has been resolved satisfactorily by the Department or when the adjudicatory process is completed, whichever is applicable. If an application is denied, a portion of the fee shall be refunded based upon the remaining months of the licensure year.

K. Change of License.

1. A facility shall request issuance of an amended license by application to the Department prior to any of the following circumstances:

- a. Change of ownership;
- b. Reallocation of types of operating or procedure rooms as shown on the license;
- c. Change of facility location from one geographic site to another;

d. The addition or replacement of a surgical suite or any part thereof, or the deletion of operating or procedure rooms.

2. Changes in facility name or address (as notified by the post office) shall be accomplished by application or by letter from the licensee.

L. An ambulatory surgical facility license shall not be required for, nor shall such a license be issued to:

- 1. Facilities operated by the federal government;
- 2. Ambulatory surgical services or procedures provided in licensed hospitals (such services remain within the purview of R.61-16);
- 3. Private practices (see Section 101.JJ).

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M. Exceptions to Licensing Standards. The Department has the authority to make exceptions to these standards where it is determined that the health, safety, and well-being of the patients are not compromised, and provided the standard is not specifically required by statute.

SECTION 200 - ENFORCING REGULATIONS

201. General

The Department shall utilize inspections, investigations, consultations, and other pertinent documentation regarding a proposed or licensed facility in order to enforce this regulation.

202. Inspections/Investigations

A. An inspection shall be conducted prior to initial licensing of a facility and subsequent inspections conducted as deemed appropriate by the Department. Other regulatory-related inspections may be considered in determining the appropriateness of Department inspections, e.g., Joint Commission on Accreditation of Health Care Organizations (JCAHO), Accreditation Association for Ambulatory Health Care (AAAHC), American Osteopathic Association (AOA), American Association for Accreditation of Ambulatory Surgery Facilities (AAAASF) inspections.

B. All facilities are subject to inspection or investigation at any time without prior notice by individuals authorized by the Department.

C. Individuals authorized by the Department shall be granted access to all properties and areas, objects, and records, and have the authority to require the facility to make photocopies of those documents required in the course of inspections or investigations. Photocopies shall be used for purposes of enforcement of regulations and confidentiality shall be maintained except to verify the identity of individuals in enforcement action proceedings. (II)

D. A facility found noncompliant with the standards of this regulation shall submit an acceptable written plan of correction to the Department that shall be signed by the administrator and returned by the date specified on the report of inspection or investigation. The written plan of correction shall describe: (II)

1. The actions taken to correct each cited deficiency;
2. The actions taken to prevent recurrences (actual and similar);
3. The actual or expected completion dates of those actions.

E. Reports of inspections or investigations conducted by the Department, including the facility response, shall be made available upon written request with the redaction of the names of those individuals in the report as provided by §44-7-310 and 315 of the S.C. Code Ann. (2002).

SECTION 300 - ENFORCEMENT ACTIONS

301. General

When the Department determines that a facility is in violation of any statutory provision, rule, or regulation relating to the operation or maintenance of such facility, the Department, upon proper notice to the licensee, may impose a monetary penalty and/or deny, suspend, and/or revoke its license.

302. Violation Classifications

Violations of standards in this regulation are classified as follows:

A. Class I violations are those that the Department determines to present an imminent danger to the health, safety, or well-being of the persons in the facility or a substantial probability that death or serious physical harm could result therefrom. A physical condition or one or more practices, means, methods or operations in use in a facility may constitute such a violation. The condition or practice constituting a Class I violation shall be abated or eliminated immediately unless a fixed period of time, as stipulated by the Department, is required for correction. Each day such violation exists after expiration of this time established by the Department may be considered a subsequent violation.

B. Class II violations are those, other than Class I violations, that the Department determines to have a negative impact on the health, safety, or well-being of persons in the facility. The citation of a Class II violation may specify the time within which the violation is required to be corrected. Each day such violation exists after expiration of this time may be considered a subsequent violation.

C. Class III violations are those that are not classified as Class I or II in these regulations or those that are against the best practices as interpreted by the Department. The citation of a Class III violation may specify the time within which the violation is required to be corrected. Each day such violation exists after expiration of this time may be considered a subsequent violation.

D. The notations “(I)” or “(II)”, placed within sections of this regulation, indicate that those standards are considered Class I or II violations, if they are not met, respectively. Standards not so annotated are considered Class III violations.

E. In arriving at a decision to take enforcement actions, the Department shall consider the following factors: specific conditions and their impact or potential impact on health, safety, or well-being of the patients; efforts by the facility to correct cited violations; behavior of the licensee that reflects negatively on the licensee’s character, such as illegal or illicit activities; overall conditions; history of compliance; and any other pertinent factors that may be applicable to current statutes and regulations.

F. When a decision is made to impose monetary penalties, the following schedule shall be used as a guide to determine the dollar amount:

**Frequency of violation
of standard within a
36-month period:**

MONETARY PENALTY RANGES

FREQUENCY	CLASS I	CLASS II	CLASS III
1st	\$ 500 - 1,500	\$ 300 - 800	\$ 100 - 300
2nd	1,000 - 3,000	500 - 1,500	300 - 800
3rd	2,000 - 5,000	1,000 - 3,000	500 - 1,500
4th	5,000	2,000 - 5,000	1,000 - 3,000
5th	7,500	5,000	2,000 - 5,000
6th	10,000	7,500	5,000

G. Any enforcement action taken by the Department may be appealed in a manner pursuant to the Administrative Procedures Act, 1976 Code Section 1-23-310, *et seq.*

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SECTION 400 - POLICIES AND PROCEDURES

401. General (II)

A. Policies and procedures addressing each section of this regulation regarding care, treatment, procedures, surgery, and/or services, rights, and the operation of the facility shall be developed and implemented, and revised as required in order to accurately reflect actual facility operation. The licensee shall establish a time-period for review of all policies and procedures. These policies and procedures shall be accessible in each facility at all times, either by hard copy or electronically.

B. Policies and procedures shall describe the means by which the facility shall assure that the standards described in this regulation that the licensee has agreed to meet, as confirmed by signature on the application for licensing, will be met (see Section 1601.B).

SECTION 500 - STAFF

501. General (II)

A. A facility shall be fully staffed in sufficient numbers and training as required by this Section at all times a patient is in the facility or the facility is open to accept patients, in order to:

1. Effectively meet the needs and condition of the patients, to include the demands of effective emergency on-site action that might arise;
2. Properly operate equipment in accordance with the equipment manufacturer's recommendations;
3. Adhere to current professional organizational standards;
4. Comply with all local, state, and federal laws.

B. The facility shall provide additional staff members if the Department determines that the facility staff on duty is inadequate to provide appropriate care, treatment, procedures, surgery, and/or services to the patients of a facility.

C. All staff members shall be assigned duties and responsibilities in accordance with the individual's capability that shall be in writing and be reviewed on an annual basis by the staff member and supervisor.

D. There shall be accurate current information maintained regarding all staff members of the facility, to include at least an address, phone number, and health and personal/work/training background. For those staff members who are licensed/certified, a copy of the license/certificate shall be available for review.

E. Direct care staff members of the facility shall not have a prior conviction or have pled no contest (*nolo contendere*) within the last 10 years for child or adult abuse, neglect, exploitation, or mistreatment, or for sexual assault or assault with a deadly weapon. Facilities may take certain considerations into account regarding criminal records when making hiring decisions, *i.e.*, discretion may be exercised regarding convictions/*nolo contendere* pleas occurring more than 10 years ago and may determine that an applicant, who would otherwise be disqualified, could be hired. (I)

F. A staff member shall not have an active dependency on a psychoactive substance(s) that would impair his or her ability to perform assigned duties. (I)

502. Administrator (II)

A. The facility shall have an administrator who shall be capable of meeting the responsibilities of operating the facility to ensure that it is in compliance with these regulations, and shall demonstrate adequate knowledge of these regulations. An administrator appointed subsequent to the promulgation of this regulation shall be a registered nurse or shall have a baccalaureate or associate degree with at least three years experience in a health-related field within the past five years.

B. A staff member shall be designated, by name or position, in writing, to act in the absence of the administrator.

503. Medical Director (II)

A. There shall be a medical director of the facility who is a physician.

B. The administrator and medical director may be the same individual.

504. Medical Staff (I)

A. Physicians, dentists, and podiatrists performing surgery and/or procedures shall be appropriately licensed to perform these functions as well as adequately trained in any special requirements that are necessary to perform such surgery/procedures.

B. Privileges for each physician, dentist, and podiatrist performing surgery/procedures shall be in accordance with criteria that the facility has established and approved.

C. There shall be a roster of medical staff having surgery, procedures, and anesthesia privileges at the facility, specifying the privileges and limitations of each and a current listing of all types of surgery and/or procedures offered by the facility.

D. A physician shall be physically present or available within 30 minutes until all patients have departed the premises.

E. There shall be at least one physician on staff who has admitting privileges at one or more hospitals.

505. Nursing Staff (I)

A. An adequate number of licensed nurses shall be on duty to meet the total nursing needs of patients.

B. At least one registered nurse shall be on duty whenever patients are present in the facility.

C. Nursing staff shall be assigned to duties consistent with their scope of practice as determined through their licensure and educational preparation.

506. Advanced Cardiac Life Support (I)

An individual who possesses a valid Advanced Cardiac Life Support credential shall be on duty in the facility whenever patients are present in the facility.

507. Inservice Training (II)

A. Training for the tasks each staff member performs shall be conducted in order to provide the care, treatment, procedures, surgery, and/or services delineated in Sections 501.A and 800.

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B. The following training shall be provided to staff members by appropriate resources, *e.g.*, licensed or registered persons, video tapes, books, *etc.*, to all staff members in context with their job duties and responsibilities, prior to patient contact and at a frequency determined by the facility, but at least annually:

1. Cause, effect, transmission, prevention, and elimination of infections, to include management and care of persons with contagious and/or communicable disease, *e.g.*, hepatitis, tuberculosis, HIV infection;

2. OSHA standards regarding bloodborne pathogens;

3. Confidentiality of patient information and records and the protection of patient rights;

4. Emergency procedures and disaster preparedness within 24 hours of their first day on the job in the facility (see Section 1200).

5. Fire response training within 24 hours of their first day on the job in the facility (see Section 1303);

6. Aseptic techniques such as handwashing and scrubbing practices, proper gowning and masking, dressing care techniques, disinfecting and sterilizing techniques, and the handling and storage of equipment and supplies.

C. All licensed nurses shall possess a valid cardio-pulmonary resuscitation (CPR) certificate within three months from the first day on the job in the facility; a staff member with a valid CPR certificate shall be on duty whenever patients are present in the facility.

D. All newly-hired staff members shall be oriented to acquaint them with the facility organization and physical plant, specific duties and responsibilities of staff members, and patients' needs.

508. Health Status (I)

A. All staff members who have contact with patients shall have, within 12 months prior to initial patient contact, a health assessment as defined in Section 101.R.

B. The health assessment shall include a tuberculin skin test as described in Sections 1505 and 1506.

C. If a staff member is working at multiple facilities operated by the same licensee, copies of records for tuberculin skin testing and the pre-employment health assessment shall be acceptable at each facility. (II)

SECTION 600 - REPORTING

601. Accidents/Incidents (II)

A. The licensee shall report a record of each accident and/or incident occurring at the facility to the Department within five (5) days of occurrence. Reports submitted to the Department shall contain only: facility name, license number, type of accident/incident, date of accident/incident occurred, number of patients directly injured or affected, patient medical record identification number, patient age and sex, number of staff directly injured or affected, number of visitors directly injured or affected, witness(es) name(s), identified cause of accident/incident, internal investigation results if cause unknown, a brief description of the accident/incident including location where occurred, and treatment of injuries. The report retained by the facility, in addition to the minimum reported to the Department, shall contain: names of patient(s), staff, and/or visitor(s), the injuries and treatment associated with each patient, staff, and/or visitor. Records of all accidents and incidents shall be retained by the facility for ten (10) years after the patient stops receiving services at the facility.

B. The licensee shall report each accident and/or incident resulting in unexpected death or serious injury to the next of kin of or party responsible for each affected individual at the earliest practicable hour, not exceeding twenty-four (24) hours. The licensee shall notify the Department immediately, not to exceed twenty-four (24) hours, via telephone, email or facsimile. The licensee shall submit a report of the licensee's investigation of the accident and/or incident to the Department within five (5) days. Accidents and/or incidents requiring reporting include, but are not limited to,:

1. Abuse, Neglect or Exploitation (Confirmed);
2. Abuse, Neglect or Exploitation (Suspected);
3. Criminal event against patient;
4. Death;
6. Fall resulting in fracture of bone or joint;
7. Hospitalization as a result of accident/incident;
9. Medication Error;
9. Procedures on wrong person;
10. Procedures on wrong site;
11. Severe burn;
12. Severe hematoma;
13. Severe laceration;
14. Attempted suicide; or
15. Anesthesia apparatus malfunction.

602. Fire/Disasters (II)

A. The Department shall be notified immediately via telephone, email or facsimile regarding any fire in the facility, and followed by a complete written report, to include fire department reports, if any, to be submitted within a time-period determined by the facility, but not to exceed seventy-two (72) hours from the occurrence of the fire.

B. Any natural disaster that requires displacement of the patients or jeopardizes or potentially jeopardizes the safety of the patients, shall be reported to the Department via telephone, email or facsimile immediately, with a complete written report submitted within a time-period as determined by the facility, but not to exceed seventy-two (72) hours.

C. Where a required fire protection system is out of service, the facility shall notify the fire department and the fire code official immediately, and where required by the fire code official, the building shall either be evacuated or the facility shall provide an approved fire watch for all occupants left unprotected by the shut down until the fire protection system has been returned to service, as applicable to Division of Health Facilities Construction (DHFC) Guidelines Manual.

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603. Communicable Diseases (I)

All cases of diseases that are required to be reported to the appropriate county health department shall be accomplished in accordance with R.61-20.

604. Administrator Change

The Department shall be notified in writing by the licensee within 10 days of any change in administrator. The notice shall include at a minimum the name of the newly-appointed individual, documented qualifications as required by Section 502, and the effective date of the appointment.

605. Joint Annual Report

Facilities shall complete and return a "Joint Annual Report" to the Department's Planning and Certificate of Need Division within the time-period specified by that division.

606. Accounting of Controlled Substances (I)

Any facility registered with the Department's Bureau of Drug Control and the federal Drug Enforcement Agency shall report any theft or loss of controlled substances to local law enforcement and to the Bureau of Drug Control within three working days of the discovery of the loss/theft. Any facility permitted by the S.C. Board of Pharmacy shall report the loss or theft of drugs or devices within three working days of the discovery of the loss/theft.

607. Facility Closure

A. Prior to the permanent closure of a facility, the Department shall be notified in writing of the intent to close and the effective closure date. Within 10 days of the closure, the facility shall notify the Department of the provisions for the maintenance of the records. On the date of closure, the current original license shall be returned to the Department.

B. In instances where a facility temporarily closes, the Department shall be given written notice within a reasonable time in advance of closure. At a minimum this notification shall include, but not be limited to: the reason for the temporary closure, the manner in which the records are being stored, and the anticipated date for reopening. The Department shall consider, upon appropriate review, the necessity of inspecting and determining the applicability of current construction standards to the facility prior to its reopening. If the facility is closed for a period longer than one year, and there is a desire to re-open, the facility shall re-apply to the Department and shall be subject to all licensing requirements at the time of that application, including construction-related requirements for a new facility.

608. Zero Census

In instances when there have been no patients in a facility for any reason, for a period of 90 days or more, the facility shall notify the Department in writing no later than the 100th day following the date of the last procedure/surgery performed. At the time of that notification, the Department shall consider, upon appropriate review of the situation, the necessity of inspecting the facility prior to any new and/or re-admissions to the facility. The facility shall still apply and pay the licensing fee to keep the license active despite being at zero census or temporarily closed. If the facility has no patients for a period longer than one year, and there is a desire to re-open, the facility shall re-apply to the Department and shall be subject to all licensing requirements at the time of that application, including construction-related requirements for a new facility.

SECTION 700 - PATIENT RECORDS**701. Content (II)**

A. The facility shall initiate and maintain an organized record for each patient. The record shall contain: sufficient documented information to identify the patient; the person responsible for each patient; the description of the diagnosis and the care, treatment, procedures, surgery, and/or services provided, to include the course of action taken and results; and the response and reaction to the care, treatment, procedures, surgery, and/or services provided. All entries shall be indelibly written, authenticated by the author, and dated.

B. Specific entries/documentation shall include at a minimum:

1. Consultations by physicians or other legally authorized healthcare providers;
2. Physical examination report, including pertinent medical history;
3. Orders and recommendations for all care, treatment, procedures, surgery, and/or services from physicians or other legally authorized healthcare providers, completed prior to, or at the time of patient arrival at the facility, and subsequently, as warranted;
4. Care, treatment, procedures, surgery, and/or services provided;
5. Record of administration of each dose of medication;
6. Medications administered and procedures followed if an error is made;
7. Special procedures and preventive measures performed, *e.g.*, isolation for symptoms of tuberculosis;
8. Notes of observation during recovery, to include vital signs pre- and post-operative;
9. Discharge summary, including condition at discharge or transfer, instructions for self-care and instructions for obtaining postoperative emergency care;
10. Special information, *e.g.*, allergies, *etc.* Documentation regarding organ donation shall be included in the record at the patient's request;
11. Signed informed consent;
12. If applicable, anesthesia records of pertinent preoperative and postoperative reports including pre-anesthesia evaluation, type of anesthesia, technique and dosage used, and post-anesthesia follow-up note;
13. Operative report (dictated or written into the record after surgery/procedure) to include at least:
 - a. Description of findings;
 - b. Techniques utilized to perform procedure/surgery;
 - c. Specimens removed, if applicable;
 - d. Primary surgeon and assistants.
14. Reports of all laboratory, radiological, and diagnostic procedures along with tests performed and the results appropriately authenticated.

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C. Except as required by law, patient records may contain written and interpretative findings and reports of diagnostic studies, tests, and procedures, *e.g.*, interpretations of imaging technology and video tapes without the medium itself.

702. Authentication

A. Each document generated by a user shall be separately authenticated.

B. Written signatures or initials and electronic signatures or computer-generated signature codes are acceptable as authentication.

C. In order for a facility to employ electronic signatures or computer-generated signature codes for authentication purposes, staff shall be identified who are authorized to authenticate patient records utilizing electronic or computer-generated signatures.

1. At a minimum, the facility shall provide authentication safeguards to ensure confidentiality, including, but not limited to, the following:

a. Each user shall be assigned a unique identifier that is generated through a confidential code;

b. The facility shall certify in writing that each identifier is kept strictly confidential. This certification shall include a user's commitment to terminate his or her use of an assigned identifier if it is found that the identifier has been misused, meaning that the user has allowed another person(s) to use his or her personally-assigned identifier, or that the identifier has otherwise been inappropriately utilized;

c. The user shall certify in writing that he or she is the only person with access to the identifier and the only person authorized to use the signature code.

2. The authentication system shall include a verification process to insure that the content of authenticated entries is accurate. The verification process shall include, at a minimum, the following provisions:

a. Blanks, gaps, obvious contradictory statements, or other documentation that require the attention of the authorized user shall be considered authenticated until reviewed and corrected by the user and a revised report issued;

b. Opportunity shall be provided for the user to verify that the document is accurate and that the signature has been properly recorded.

3. A user may terminate authorization for use of electronic or computer-generated signature upon written notice to the individual responsible for the maintenance of patient records.

D. The use of rubber stamp signature is acceptable under the following conditions:

1. The individual whose signature the rubber stamp represents shall be the only individual who has possession of and utilizes the stamp;

2. The individual places in the administrative offices of the facility a signed statement indicating that he or she is the only individual who has possession of and shall utilize the stamp;

3. Rubber stamp signatures are not permitted on orders for medications listed as "controlled substances" pursuant to R.61-4.

703. Record Maintenance

A. The licensee shall provide accommodations, space, supplies, and equipment adequate for the protection, security, and storage of patient records.

B. When a patient is transferred to an emergency facility, a transfer summary to include, at a minimum, the diagnosis and medication administration record, shall accompany the patient to the receiving facility at the time of transfer or forwarded immediately after the transfer. Documentation of the information forwarded shall be maintained in the facility's patient record. (I)

C. The patient record is confidential. Records containing protected or confidential health information shall be made available only to individuals granted access to that information, in accordance with state and federal laws. The facility shall have a written policy designating the persons allowed to access confidential patient information. (II)

D. Records generated by organizations or individuals contracted by the facility for care, treatment, procedures, surgery, and/or services shall be maintained by the facility that has admitted the patient. Appropriate information shall be provided to assure continuity of care.

E. The facility shall determine the medium in which information is stored. The information shall be readily retrievable and accessible by facility staff, as needed, and for regulatory compliance inspections.

F. Upon discharge of a patient, the record shall be completed within 60 days and filed in an inactive/closed file maintained by the licensee. Prior to the closing of a facility for any reason, the licensee shall arrange for preservation of records to ensure compliance with these regulations and other applicable law. The licensee shall notify the Department, in writing, describing these arrangements and the location of the records.

G. Records of patients shall be maintained for at least six years following the discharge of the patient. Other documents required by the regulation, *e.g.*, fire drills, shall be retained at least 12 months or until the next Department inspection, whichever is longer.

H. Patient records are the property of the facility; the original record shall not be removed without court order. (II)

SECTION 800 - CARE/TREATMENT/PROCEDURES/SURGERY/SERVICES**801. General (I)**

A. Care, treatment, procedures, surgery, and/or services shall be provided, given, or performed effectively and safely in accordance with orders from physicians or other legally authorized healthcare providers, and precautions shall be taken for patients with special conditions, *e.g.*, pacemakers, pregnancy, Alzheimer's disease, *etc.*, and/or for those who may be susceptible to deleterious effects as a result of the treatment.

B. The facility shall comply with all current federal, state, and local laws and regulations related to patient care, treatment, procedures, surgery, and/or services, and protection.

C. When a facility engages a source other than the facility to provide services normally provided by the facility, *e.g.*, staffing, training, food service, maintenance, housekeeping, there shall be a written agreement with the source that describes how and when the services are to be provided, the exact services to be provided, and a statement that these services are to be provided by qualified individuals. The source shall comply with this regulation in regard to patient care, treatment, procedures, surgery, and/or services, confidentiality, and rights. (II)

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802. Physical Examination (I)

A. A preoperative history and physical examination, pertaining to the procedure to be performed, shall be completed by a physician or legally authorized healthcare provider no earlier than 14 days prior to surgery/procedure, or 30 days prior to surgery/procedure with the condition that, on the day of surgery/procedure, the physician or legally authorized healthcare provider documents no notable changes in the original history and physical examination. If notable changes are discovered at that time, a history and physical examination shall be completed. A discharge summary from a health care facility that includes a history and physical examination may be acceptable as the preoperative history and physical examination, provided the summary is within the time requirements of this section, and is reviewed by the physician or legally authorized healthcare provider performing the surgery/procedure.

B. If a patient or potential patient has a communicable disease, a physician or other legally authorized healthcare provider shall insure that the facility has the capability to provide adequate care and prevent the spread of the disease, and that the staff members are adequately trained and qualified to manage the patient, or transfer the patient to an appropriate facility, if necessary.

803. Surgical Services

If surgical services are provided, a current listing of all types of surgical services offered by the facility shall be available.

804. Anesthesia Services (I)

A. Anesthesia shall be administered only by:

1. An anesthesiologist;
2. A physician, other than an anesthesiologist, or dentist, or podiatrist who is qualified to administer anesthesia pursuant to the S.C. Code of Laws;
3. A certified registered nurse anesthetist; or
4. An anesthesiologist's assistant.

B. After the administration of a general anesthetic, a patient shall be attended by a physician until the patient may be safely placed under post-operative/procedure supervision by the nursing staff who shall then attend the patient until he or she has regained full consciousness, or until the effects of the anesthetic have sufficiently subsided for the patient to be able to summon aid when needed.

805. Laboratory Services (II)

A. Each facility shall provide or make arrangements for obtaining laboratory services required in connection with the surgery/procedure to be performed.

B. Should the facility conduct tests that involve human specimens by utilizing any laboratory equipment such as finger-stick glucose, hemoglobin, monitoring devices, *etc.*, for the purpose of providing information for the diagnosis, prevention, or treatment of disease or impairment, or assessment of health, the facility shall obtain a Certificate of Waiver from the Clinical Laboratories Improvement Amendments (CLIA) Program through the Department's CLIA Program.

C. Laboratory supplies shall not be expired.

D. A pathologist shall examine all surgical specimens except for those types of specimens that the medical staff has determined and documented do not require examination.

806. Radiology Services (II)

A. Each facility shall have the capability of providing or obtaining diagnostic radiology services in connection with the surgery/procedure to be performed.

B. Those facilities where radiological equipment and materials are used shall be in compliance with R.61-63 and R.61-64.

807. Adverse Conditions (I)

Patients in whom any adverse condition exists or in whom a complication is known or suspected to have occurred during or after the performance of the operative procedure shall remain in the facility until the condition/complication is eliminated, as determined by the physician, and the patient is stabilized. Patients requiring care for periods in excess of those set forth in Section 101.RR shall be transferred to a hospital.

808. Patient Instruction (I)

Written instructions shall be issued to all patients upon discharge and shall include, at a minimum, the following:

A. Signs and symptoms of possible complications;

B. Telephone number of the facility or the attending physician or other knowledgeable professional staff member from the facility should any complication occur or question arise;

C. An emergency telephone number should any complication occur. It shall be the responsibility of the attending physician to arrange for needed care;

D. Limitations regarding activities, foods, *etc.*;

E. Date for follow-up or return visit, if applicable.

SECTION 900 - RIGHTS AND ASSURANCES

901. General (II)

A. The facility shall comply with all current federal, state, and local laws and regulations concerning patient care, treatment, procedures, surgery, and/or services, patient rights and protections, and privacy and disclosure requirements, *e.g.*, §44-81-10, *et seq.*, S.C. Code Ann. (2002).

B. The facility shall comply with all relevant federal, state, and local laws and regulations concerning discrimination, *e.g.*, Title VII, Section 601 of the Civil Rights Act of 1964, and insure that there is no discrimination with regard to source of payment in the recruitment, location of patient, acceptance or provision of services to patients or potential patients, provided that payment offered is not less than the cost of providing services.

C. The facility shall develop and post in a conspicuous place in a public area of the facility a grievance/complaint procedure to be exercised on behalf of the patients that includes the address and phone number of the Department and a provision prohibiting retaliation should the grievance right be exercised.

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D. Care, treatment, procedures, surgery, and/or services provided by the facility, and the charges for such, shall be delineated in writing. Patients shall be made aware of such charges and services, as verified by the signature of the patient or responsible party.

E. Patients shall be permitted to use the telephone and allowed privacy when making calls.

F. Adequate safeguards shall be provided for protection and storage of patients' personal belongings.

G. Patient rights shall be guaranteed, prominently displayed, and the facility shall inform the patient of these rights, to include, at a minimum:

1. The care, treatment, procedures, surgery, and/or services to be provided;

2. Informed consent for care, treatment, procedures, surgery, and/or services;

3. Respect for the patient's property;

4. Freedom from mental and physical abuse and exploitation;

5. Privacy while being treated and while receiving care;

6. Respect and dignity in receiving care, treatment, procedures, surgery, and/or services;

7. Refusal of treatment. The patient shall be informed of the consequences of refusal of treatment, and the reason shall be reported to the physician and documented in the patient record;

8. Refusal of experimental treatment and drugs. The patient's written consent for participation in research shall be obtained and retained in his or her patient record;

9. Confidentiality and privacy of records. Written consent by the patient shall be obtained prior to release of information except to persons authorized by law. If the patient is mentally incompetent, written consent is required from the patient's responsible party. The facility shall establish policies to govern access and duplication of the patient's record.

H. Except in emergencies, documentation regarding informed consent shall be properly executed prior to surgery/procedure.

SECTION 1000 - MEDICATION MANAGEMENT

1001. General (I)

A. Medications, including controlled substances, medical supplies, intravenous solutions, and those items necessary for the rendering of first aid shall be properly managed in accordance with local, state, and federal laws and regulations, to include the securing, storing, and administering of medications, medical supplies, first aid supplies, biologicals and their disposal when discontinued or expired, or at discharge, death, or transfer of a patient.

B. Non-legend medications that can be obtained without a prescription may be retained and labeled as stock in the facility for administration as ordered by a physician or other legally authorized healthcare provider.

C. If controlled substances are to be used, a controlled substances registration from the Department's Bureau of Drug Control and a controlled substance registration from the federal Drug Enforcement Administration (DEA) shall be obtained. The registration(s) shall be displayed in a conspicuous location within the facility.

D. Each facility shall maintain, upon the advice and written approval of the Medical Director or consultant pharmacist, an emergency kit/cart of lifesaving medicines and equipment for the use of physicians or other legally authorized healthcare providers in treating the emergency needs of patients.

1. The kit/cart shall be sealed and stored in such a manner as to prevent unauthorized access and to ensure a proper environment for preservation of the medications within, but in such a manner as to allow immediate access.

2. The exterior of each emergency medication kit/cart shall have displayed the following information:

a. "For Emergency Use Only";

b. Name, address, and telephone number of the consultant pharmacist.

3. Whenever the kit/cart is opened, it shall be restocked and resealed within a reasonable time to prevent risk of harm to a patient.

4. Medications used from the kit/cart shall be replaced pursuant to orders from a physician or other legally authorized healthcare provider according to facility policy.

5. Contents of each section of the kit/cart shall be listed and maintained on or in the kit/cart, and shall correspond to the list. Documentation of monthly checks of expiration dates of medications and supplies is to be retained by the facility for a period of two years or until the Department's next inspection, whichever is longer.

E. Medications shall not be expired.

F. Applicable reference materials published within the previous year shall be available at the facility in order to provide staff members with adequate information concerning medications.

1002. Medication Orders (I)

A. Medications, to include oxygen, shall be administered in the facility to patients only upon orders of a physician or other legally authorized healthcare provider.

B. All orders (including verbal) shall be received only by licensed nurses or authorized healthcare providers, and shall be authenticated and dated by a physician or other legally authorized healthcare provider pursuant to the facility's policies and procedures, but no later than 72 hours after the order is given. Verbal orders received shall include the time of receipt of the order, description of the order, and identification of the physician or other legally authorized healthcare provider and the individual receiving the order.

C. Medications and medical supplies ordered for a specific patient shall not be provided to or administered to any other patient.

1003. Administering Medication (I)

A. Each medication dose administered shall be properly recorded in the patient's record as the medication is administered. The medication administration record shall include the name of the medication, dosage, mode of administration, date, time, and the signature of the individual administering the medication. Initials may be utilized when recording administration, provided identification of the individual's initials is located within the record.

B. Expired medications shall not be administered to patients.

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1004. Pharmacy Services (I)

Facilities that maintain stocks of legend medications and biologicals for patient use within the facility shall obtain and maintain from the S.C. Board of Pharmacy a valid, current, nondispensing drug outlet permit, displayed in a conspicuous location in the facility, and have a consultant pharmacist on-call during facility operating hours.

1005. Medication Containers (I)

Medications for each patient shall be dispensed from their original container(s), to include unit dose systems. There shall be no transferring between containers or opening blister packs to remove medications for destruction or adding new medications for administration, except by direction of a pharmacist.

1006. Medication Storage (I)

A. Medications shall be stored under proper conditions of sanitation, temperature, light, moisture, ventilation, segregation, safety and security. Medications shall be stored in accordance with manufacturer's directions and in accordance with all applicable state and federal laws and regulations.

B. Medications shall be properly stored and safeguarded to prevent access by unauthorized persons. Expired or discontinued medications shall not be stored with current medications. Storage areas shall be of sufficient size for clean and orderly storage, and shall be locked when not under direct observation by a licensed healthcare provider. Storage areas shall not be located near sources of heat, humidity, or other hazards that may negatively impact medication effectiveness or shelf-life.

C. Medications requiring refrigeration shall be stored in a refrigerator at the temperature established by the U. S. Pharmacopeia (36 - 46 degrees F.). Food and drinks shall not be stored in the same refrigerator in which medications and biologicals are stored. Blood and blood products may be stored in the same refrigerator with medications and biologicals if stored in a separate compartment from the medications and biologicals.

D. Medications shall be stored:

1. Separately from poisonous substances, blood, or body fluids;
2. In a manner that provides for separation between oral and topical medications;
3. Separately from food.

E. Records shall be maintained of all stock controlled substances that indicate an accounting of all items received and/or administered in such a manner that the disposition of each dose of any particular item may be readily traced. Records shall be maintained for a minimum of two years or until the next inspection by the Department, whichever is longer.

F. Review of medication storage areas shall be conducted by the consultant pharmacist or his or her designee on at least a monthly basis. Records of such reviews shall be retained by the facility for at least two years or until the Department's next inspection, whichever is longer.

1007. Disposition of Medications (I)

A. Medications shall not be retained in stock after the expiration date on the label and no contaminated or deteriorated medications shall be maintained. Expired, damaged, or deteriorated medications and biologicals shall be disposed of in the following manner:

1. When noncontrolled legend medications are destroyed, the following shall be documented: date of destruction, medication name, strength, quantity, mode of destruction, and the names of the individual performing the destruction and a witness. (This shall not be applicable to partial unused doses of medications.) The medications may also be disposed of by returning them to the dispensing pharmacy and obtaining a receipt from the pharmacy.

2. The destruction of controlled substances shall be accomplished pursuant to the requirements of R.61-4.

B. Destruction records shall be retained by the facility for at least two years or until the Department's next inspection, whichever is longer.

SECTION 1100 - MEAL SERVICE

1101. General (II)

A. All facilities that prepare food on-site shall be approved by the Department, and shall be regulated, inspected, and graded pursuant to R.61-25.

B. When meals or snacks are catered to a facility, such meals shall be obtained from a food service establishment graded by the Department, pursuant to R.61-25, and there shall be a written executed contract with the food service establishment.

1102. Food Storage (II)

A. All food items shall be stored at a minimum of six inches above the floor on clean surfaces and in such a manner as to be protected from splash and other contamination.

B. Food stored in the refrigerator or freezer shall be covered, labeled, and dated. Prepared food shall not be stored in the refrigerator for more than 72 hours.

1103. Food Equipment and Utensils (II)

The equipment and utensils utilized, and the cleaning, sanitizing, and storage of such shall be in accordance with R.61-25.

1104. Ice and Drinking Water (II)

A. Ice from a water system that is in accordance with R.61-58, shall be available and precautions taken to prevent contamination. The ice scoop shall be stored in a sanitary manner outside of the ice container.

B. Potable drinking water shall be available and accessible to patients at all times.

C. The use of common drinking cups shall be prohibited.

D. Ice delivered to patient areas in bulk shall be in nonporous, covered containers that shall be cleaned after each use.

1105. Equipment (II)

A. Liquid or powder soap in dispensers and sanitary paper towels shall be available at each food service handwash lavatory.

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B. The facility shall include a separate handwash sink, convenient to serving, food preparation, and dishwashing areas.

C. All walk-in refrigerators and freezers shall be equipped with opening devices that will permit opening of the door from the inside at all times. (I)

1106. Refuse Storage and Disposal (II)

Refuse storage and disposal shall be in accordance with R.61-25.

SECTION 1200 - EMERGENCY PROCEDURES/DISASTER PREPAREDNESS

1201. Emergency Services (I)

A. Appropriate equipment and services shall be provided to render emergency resuscitative and life-support procedures pending transfer to a hospital.

B. The facility shall have the capability of obtaining blood and blood products to meet emergency situations.

1202. Disaster Preparedness (II)

A facility that participates in a community disaster plan shall establish plans, based on its capabilities, to meet its responsibilities for providing emergency care.

1203. Emergency Call Numbers (I)

Although the facility may have access to "911," emergency call data shall be immediately available and shall include, at a minimum, the telephone numbers of fire and police departments, ambulance service, and the Poison Control Center. Other emergency call information shall be available, to include the names, addresses, and telephone numbers of staff members to be notified in case of emergency.

1204. Continuity of Essential Services (II)

There shall be a written plan to be implemented to assure the continuation of essential patient support services for reasons such as power outage, water shortage, or in the event of the absence of any portion of the staff resulting from inclement weather or other causes.

SECTION 1300 - FIRE PREVENTION

1301. Arrangements for Fire Department Response/Protection (I)

A. Each facility shall develop, in coordination with its supporting fire department and/or disaster preparedness agency, suitable written plans for actions to be taken in the event of fire, *i.e.*, fire plan and evacuation plan.

B. Facilities located outside a service area or range of a public fire department shall arrange for the nearest fire department to respond in case of fire by written agreement with that fire department. A copy of the agreement shall be kept on file in the facility.

1302. Tests and Inspections (I)

A. Fire protection and suppression systems shall be maintained and tested in accordance with NFPA 10, 13, 14, 15, 25, 70, 72, and 96.

B. Fire alarm systems shall be maintained in a safe, operable condition in accordance with NFPA 70 and 99 and shall be inspected at least annually.

1303. Fire Response Training (I)

A. Each staff member shall receive training within 24 hours of his or her first day of employment in the facility and at least annually thereafter, addressing at a minimum, the following:

1. Fire plan;
2. Reporting a fire;
3. Use of the fire alarm system, if applicable;
4. Location and use of fire-fighting equipment;
5. Methods of fire containment; and
6. Specific responsibilities, tasks, or duties of each staff member.

B. A plan for the evacuation of patients, staff members, and visitors, to include evacuation routes and procedures in case of fire or other emergencies, shall be established and posted in conspicuous public areas throughout the facility.

1304. Fire Drills (I)

A. An unannounced fire drill shall be conducted at least quarterly for all shifts. Each staff member shall participate in a fire drill at least once each year. Records of drills shall be maintained at the facility, indicating the date, time, shift, description and evaluation of the drill, and the names of staff members directly involved in responding to the drill. If fire drill requirements are mandated by statute or regulation, the provisions of the statute or regulation shall be complied with and shall supersede the requirements of this section.

B. Drills shall be designed and conducted in consideration of and reflecting the content of the fire response training described in Section 1303 above.

SECTION 1400 - MAINTENANCE

1401. General (II)

A. The structure, including its component parts and equipment, shall be properly maintained to perform the functions for which it is designed.

B. The facility shall keep its component parts and all equipment in good repair and operating condition and documented.

1402. Equipment (II)

A. Equipment used in the provision of care, treatment, procedures, surgery, and/or services shall meet appropriate specifications and calibrations and shall be monitored and operated in accordance with the manufacturer’s guidelines and with local, State, and Federal laws.

B. If utilized, all equipment for the administration of anesthesia shall be readily available, clean or sterile, and operating properly.

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1. Anesthesia apparatus shall be equipped with a device to measure the oxygen component of the gas being inhaled by the patient. The device shall emit audible and visual alarms should the proportion of oxygen fall below a safe level. (I)

2. Inspections shall be made prior to each use of the anesthesia equipment, as well as a record of all service and repair performed on all anesthesia machines, vaporizers, and ventilators, shall be maintained and retained for a minimum of two years or until the next Department's inspection, whichever is longer.

1403. Preventive Maintenance of Life Support Equipment (II)

A. A written preventive maintenance program shall be developed and implemented for all life support equipment, to include, but not be limited to:

1. Patient monitoring equipment;
2. Isolated electrical systems;
3. Patient ground systems; and
4. Medical gas systems.

B. This equipment shall be calibrated, if applicable, and/or tested at periodic intervals, but not less than annually, to insure proper operation. After repairs and/or alterations are made to any equipment or system, thorough testing for proper operation shall be accomplished prior to returning it to service. (I)

C. Records shall be maintained on all life support equipment to indicate its history of testing and maintenance.

SECTION 1500 - INFECTION CONTROL AND ENVIRONMENT

1501. Staff Practices (I)

Staff and volunteer practices shall promote conditions that prevent the spread of infectious, contagious, or communicable diseases and provide for the proper disposal of toxic and hazardous substances. These preventive measures and practices shall be in compliance with applicable guidelines of the Bloodborne Pathogens Standard of the Occupational Safety and Health Act (OSHA) of 1970; the Centers for Disease Control and Prevention (CDC) Immunization of Health-Care Workers: Recommendations of the Advisory Committee on Immunization Practices and the Hospital Infection Control Practices Advisory Committee; the Department's *Guidelines For Prevention and Control of Antibiotic Resistant Organisms in Health Care Settings*, and R.61-105; and other applicable federal, state, and local laws and regulations.

1502. Vaccinations (I)

A. Hepatitis B.

1. All direct care staff who perform tasks involving contact with blood, blood-contaminated body fluids, other body fluids, or sharps shall have the hepatitis B vaccination series unless the vaccine is contraindicated or an individual is offered the series and declines. In either case the decision shall be documented.

2. Each staff member who elects vaccination shall have completed the initial dose of the three-dose series within 30 days of employment.

B. Influenza. All direct care staff shall have an annual influenza vaccination unless contraindicated or offered and declined. In either case the decision shall be documented.

C. MMR and Varicella. All direct care staff shall have been vaccinated or have evidence of immunity for measles, rubella, and varicella prior to patient contact unless contraindicated or offered and declined. In either case the decision shall be documented. Immunity to mumps is recommended.

1503. Live Animals

Live animals shall not be permitted in facilities.

EXCEPTION: This standard does not apply to patrol dogs accompanying security or police officers, guide dogs, or other service animals accompanying individuals with disabilities.

1504. Sterilization Procedures (I)

A. Sterilizing equipment of appropriate type shall be available and of adequate capacity to properly sterilize instruments and operating room materials as well as laboratory equipment and supplies. The sterilizing equipment shall have approved control and safety features. The accuracy of instrumentation and equipment shall be tested at least quarterly; periodic calibration and/or preventive maintenance shall be provided as necessary and a history of testing and service maintained.

B. The dates of sterilization and expiration shall be marked on all supplies sterilized in the facility.

EXCEPTION: Facilities may utilize “event-related” methodologies for determining sterile integrity in lieu of “time-related” methods provided there is an established policy and procedure.

C. The facility shall provide for appropriate storage and distribution of sterile supplies and equipment pursuant to facility policies and procedures.

D. Cleaning and disinfection, as needed, of equipment used and/or maintained in each area, appropriate to the area and the equipment’s purpose or use, shall be accomplished. A recognized method of monitoring disinfectant performance shall be employed. Disinfectants, *e.g.*, glutaraldehyde, Cidex, Sporox, hydrogen peroxide, shall be tested and maintained according to manufacturer’s instructions and shall include, at a minimum, a record of readings/testings and change dates of the disinfectant solution.

1505. Tuberculosis Risk Assessment (I)

A. All facilities shall conduct an annual tuberculosis risk assessment in accordance with CDC guidelines (See Section 102.B.6) to determine the appropriateness and frequency of tuberculosis screening and other tuberculosis related measures to be taken.

B. The risk classification, *i.e.*, low risk, medium risk, shall be used as part of the risk assessment to determine the need for an ongoing TB screening program for staff and patients and the frequency of screening. A risk classification shall be determined for the entire facility. In certain settings, *e.g.*, healthcare organizations that encompass multiple sites or types of services, specific areas defined by geography, functional units, patient population, job type, or location within the setting may have separate risk classifications.

1506. Staff Tuberculosis Screening (I)

A. Tuberculosis Status. Prior to date of hire or initial patient contact, the tuberculosis status of direct care staff shall be determined in the following manner in accordance with the applicable risk classification:

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B. Low Risk:

1. Baseline two-step Tuberculin Skin Test (TST) or a single Blood Assay for *Mycobacterium tuberculosis* (BAMT): All staff (within three (3) months prior to contact with patients) unless there is a documented TST or a BAMT result during the previous twelve (12) months. If a newly employed staff has had a documented negative TST or a BAMT result within the previous twelve (12) months, a single TST (or the single BAMT) can be administered to serve as the baseline.

2. Periodic TST or BAMT is not required.

3. Post-exposure TST or a BAMT for staff upon unprotected exposure to *M. tuberculosis*: Perform a contact investigation when unprotected exposure is identified.

Administer one (1) TST or a BAMT as soon as possible to all staff who have had unprotected exposure to an infectious TB case/suspect. If the TST or the BAMT result is negative, administer another TST or a BAMT eight to ten (8-10) weeks after that exposure to *M. tuberculosis* ended.

C. Medium Risk:

1. Baseline two-step TST or a single BAMT: All staff (within three (3) months prior to contact with patients) unless there is a documented TST or a BAMT result during the previous twelve (12) months. If a newly employed staff has had a documented negative TST or a BAMT result within the previous twelve (12) months, a single TST (or the single BAMT) can be administered to serve as the baseline.

2. Periodic testing (with TST or BAMT): Annually, of all staff who have risk of TB exposure and who have previous documented negative results. Instead of participating in periodic testing, staff with documented TB infection (positive TST or BAMT) shall receive a symptom screen annually. This screen shall be accomplished by educating the staff about symptoms of TB disease (including the staff and/or direct care volunteers responses), documenting the questioning of the staff about the presence of symptoms of TB disease, and instructing the staff to report any such symptoms immediately to the administrator or director of nursing. Treatment for latent TB infection (LTBI) shall be considered in accordance with CDC and Department guidelines and, if recommended, treatment completion shall be encouraged.

3. Post-exposure TST or a BAMT for staff upon unprotected exposure to *M. tuberculosis*: Perform a contact investigation when unprotected exposure is identified. Administer one (1) TST or a BAMT as soon as possible to all staff who have had unprotected exposure to an infectious TB case/suspect. If the TST or the BAMT result is negative, administer another TST or a BAMT eight to ten (8-10) weeks after that exposure to *M. tuberculosis* ended.

D. Baseline Positive or Newly Positive Test Result:

1. Staff with a baseline positive or newly positive test result for *M. tuberculosis* infection (*i.e.*, TST or BAMT) or documentation of treatment for latent TB infection (LTBI) or TB disease or signs or symptoms of tuberculosis, *e.g.*, cough, weight loss, night sweats, fever, shall have a chest radiograph performed immediately to exclude TB disease (or evaluate an interpretable copy taken within the previous three (3) months). These staff members will be evaluated for the need for treatment of TB disease or latent TB infection (LTBI) and will be encouraged to follow the recommendations made by a physician with TB expertise (*i.e.*, the Department's TB Control program).

2. Staff who are known or suspected to have TB disease shall be excluded from work, required to undergo evaluation by a physician or legally authorized healthcare provider, and permitted to return to work only with approval by the Department TB Control program. Repeat chest radiographs are not required unless symptoms or signs of TB disease develop or unless recommended by a physician or legally authorized healthcare provider.

1507. Housekeeping (II)

The facility and its grounds shall be uncluttered, clean, and free of vermin and offensive odors.

A. Interior housekeeping shall at a minimum include:

1. Cleaning each specific area of the facility (dry sweeping and dusting shall be prohibited in restricted areas as identified in facility policies and procedures);
2. Cleaning of operating/procedure rooms in accordance with established written procedures after each operation/procedure.

B. Exterior housekeeping shall at a minimum include:

1. Cleaning of all exterior areas, *e.g.*, porches and ramps, and removal of safety impediments such as snow and ice;
2. Keeping facility grounds free of weeds, rubbish, overgrown landscaping, and other potential breeding sources for vermin.

1508. Infectious Waste (I)

Accumulated waste, including all contaminated sharps, dressings, and/or similar infectious waste, shall be disposed of in a manner compliant with OSHA Bloodborne Pathogens Standard, the Department's Guidelines For Prevention and Control of Antibiotic Resistant Organisms in Health Care Settings, and R.61-105.

1509. Clean/Soiled Linen and Surgical Clothing (II)

A. A supply of clean, sanitary linen/surgical clothing shall be available at all times. In order to prevent the contamination of clean linen/surgical clothing by dust or other airborne particles or organisms, it shall be stored and transported in a sanitary manner, *i.e.*, enclosed and covered. Linen/Surgical clothing storage rooms shall be used only for the storage of linen/surgical clothing. Clean linen/Surgical clothing shall not be stored with other items.

B. Soiled linen/Surgical clothing.

1. Provisions shall be made for collecting, transporting, and storing soiled linen and surgical clothing;
2. Soiled linen/Surgical clothing shall be kept in enclosed/covered containers.

SECTION 1600 - QUALITY IMPROVEMENT PROGRAM**1601. General (II)**

A. There shall be a written, implemented quality improvement program that provides effective self-assessment and implementation of changes designed to improve the care, treatment, procedures, surgery, and/or services provided by the facility.

B. The quality improvement program, at a minimum, shall:

1. Establish desired outcomes and the criteria by which policy and procedure effectiveness is systematically, objectively, and regularly accomplished at a frequency as determined by the facility to ensure that policies and procedures and this regulation are met, but not less than every three months;

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2. Identify, evaluate, and determine the causes of any deviation from the desired outcomes;
3. Identify the action taken to correct deviations and prevent future deviation, and the person(s) responsible for implementation of these actions;
4. Establish ways to measure the quality of patient care and staff performance as well as the degree to which the policies and procedures are followed;
5. Analyze the necessity of care, treatment, procedures, surgery, and/or services rendered;
6. Analyze the effectiveness of the fire plan;
7. Analyze all serious incidents and accidents, to include all patient deaths and significant medication errors;
8. Analyze any other unusual occurrences that threaten the health, safety, or well-being of the patients;
9. At least every three months, review an established percentage of patient records to verify the accuracy and integrity of the system, and take corrective action as needed;
10. Establish a systematic method of obtaining feedback from patients and other interested persons, *e.g.*, family members and peer organizations, as expressed by the level of satisfaction with care, treatment, procedures, surgery, and/or services received.

SECTION 1700 - DESIGN AND CONSTRUCTION

1701. General (II)

A facility shall be planned, designed, and equipped to provide and promote the health, safety, and well-being of each patient.

1702. Local and State Codes and Standards (II)

Buildings shall comply with pertinent local and state laws, codes, ordinances, and standards with reference to design and construction. No facility shall be licensed unless the Department has assurance that responsible local officials (zoning and building) have approved the facility for code compliance.

1703. Applicable Code Editions (II)

A. Facility design and construction shall comply with provisions of the codes officially adopted by the South Carolina Building Codes Council and the South Carolina State Fire Marshal applicable to ambulatory surgical facilities.

B. Unless specifically required otherwise by the Department, all facilities shall comply with the construction codes and construction regulations applicable at the time its license was issued.

C. Any facility that closes, has its license revoked, or surrenders its license, and applies for re-licensure at the same site, shall be considered a new building and shall meet the current codes, regulations, and requirements for the building and its essential equipment and systems in effect at the time of application for re-licensing.

1704. Submission of Plans and Specifications

A. Plans and specifications shall be submitted to the Department for review and approval for new construction, additions or alterations to existing buildings, replacement of major equipment, buildings being licensed for the

first time, buildings changing license type, and for facilities increasing occupant load or licensed capacity. Final plans and specifications shall be prepared by an architect and/or engineer registered in South Carolina and shall bear their seals and signatures. Architectural plans shall also bear the seal of a South Carolina registered architectural corporation. Unless directed otherwise by the Department, submit plans at the schematic, design development, and final stages. All plans shall be drawn to scale with the title, stage of submission and date shown thereon. Any construction changes from the approved documents shall be approved by the Department. Construction work shall not commence until a plan approval has been received from the Department. During construction the owner shall employ a registered architect and/or engineer for observation and inspections. Upon approval of the Department, construction administration may be performed by an entity other than the architect. The Department shall conduct periodic inspections throughout each project.

B. Plans and specifications shall be submitted to the Department for review and approval for projects that have an effect on:

1. The function of a space;
2. The accessibility to or of an area;
3. The structural integrity of the facility;
4. The active and/or passive fire safety systems (including kitchen equipment such as exhaust hoods or equipment required to be under an exhaust hood);
5. Doors;
6. Walls;
7. Ceiling system assemblies;
8. Exit corridors;
9. Life safety systems; or
10. That increases the occupant load or licensed capacity of the facility.

C. All subsequent addenda, change orders, field orders, and documents altering the Department review must be submitted. Any substantial deviation from the accepted documents shall require written notification, review and re-approval from the Department.

D. Cosmetic changes utilizing paint, wall covering, floor covering, etc., that are required to have a flame-spread rating or other safety criteria shall be documented with copies of the documentation and certifications kept on file at the facility and made available to the Department.

E. Any construction work which violates codes or standards will be required to be brought into compliance. All projects shall obtain all required permits from the locality having jurisdiction. Construction without proper permitting shall not be inspected by Department.

1705. Construction Inspections

All projects shall obtain all required permits from the locality having jurisdiction. Construction without proper permitting shall not be inspected by Department.

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SECTION 1800 - FIRE PROTECTION EQUIPMENT AND SYSTEMS

1801. Fire Alarms (I)

A. A facility shall include a partial, manual, automatic, supervised fire alarm system. The system shall be arranged to transmit an alarm automatically to a third party by an approved method. The alarm system shall notify by audible and visual alarm all areas and floors of the building. The alarm system shall shut down central recirculating systems and outside air units that serve the area(s) of alarm origination as a minimum.

B. There must be a fire alarm pull station at each required exit and in or near each nurses station.

C. All fire, smoke, heat, sprinkler flow, or manual fire alarming devices or systems must be connected to the main fire alarm system and trigger the system when they are activated.

1802. Gases (I)

Safety precautions shall be taken against fire and other hazards when oxygen is dispensed, administered, or stored. "No Smoking" signs shall be posted conspicuously inside the facility and on oxygen cylinders. All cylinders shall be properly secured in place.

SECTION 1900 - ELECTRICAL

1901. Signal System

A. All facilities shall have a signal system consisting of a call button for each bed, bath, toilet and treatment/examination room. A light shall be at or over each patient room door visible from the corridor. There shall be an audio-visual master station in a location continuously monitored by staff.

B. Activation of signal system shall be by pull cord or electronic device. Pull cord shall hang to a maximum of four (4) inches above finished floor.

1902. Emergency Generator Service (I)

A. With concurrence of the local authority having jurisdiction, facilities shall have an emergency generator with a ten (10) second startup and six (6) hour run time based on the maximum load rating of the generator. As a minimum, emergency power shall be provided for but not limited to:

1. Emergency and Exit lighting;
2. Lighting for staff work areas;
3. All lighting and power at patient care areas;
4. Fire alarm telephone and signal systems;
5. At least one (1) elevator where required;
6. Fire pump and associated equipment;
7. Public toilet rooms;
8. All HVAC equipment serving patient areas; and

9. All patient life safety equipment;

EXCEPTION: In endoscopy facilities, an emergency power supply system is not required.

B. An Uninterruptible Power System (UPS) is not acceptable as an alternative to the generator system.

C. In the event of natural disaster or electrical power failure, no new surgery/procedures shall commence, and surgery/procedures in progress shall be concluded as soon as possible.

SECTION 2000 - PHYSICAL PLANT

2001. Surgical Suite(s)

The size and design of the surgical suite(s) shall be in accordance with individual programs and this regulation. The following basic elements, designed to ensure no flow of through traffic, shall be incorporated in all facilities:

A. Operating/Procedure Room(s).

1. The number shall depend on the projected caseload and types of procedures to be performed. Rooms shall have adequate space to accommodate necessary equipment and staff.

2. Each operating room shall have a minimum clear area of 180 square feet exclusive of fixed and movable cabinets and shelves. The minimum width shall be 12 feet.

3. Each procedure room shall have a minimum clear area of 140 square feet exclusive of fixed and movable cabinets and shelves. The minimum width shall be 10 feet.

4. Additional clear area may be required as described in the narrative program to accommodate special functions in one or more of these rooms.

5. The facility shall include an emergency communication system connecting with the surgical suite work station.

B. Surgery/Procedure and Recovery Equipment and Supplies

1. Each operating/procedure room shall be completely equipped and supplied for the types of procedures to be performed. (I)

2. The center's medical staff and governing body shall develop policies and procedures to specify the types of emergency equipment required for use in the Ambulatory Surgical Facility's operating room(s). The equipment must meet the following requirements: (I)

(a) Be immediately available for use during emergency situations;

(b) Be appropriate for the facility's patient population; and

(c) Be maintained by appropriate personnel.

C. Surgical/Procedure Service Areas. The facility shall include the following:

1. A work station located to permit visual surveillance of persons entering the surgical/procedure areas and the recovery area;

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2. Sterilizing equipment with autoclave(s) conveniently located to serve all operating rooms;

EXCEPTION: Sterilizing equipment is not required in endoscopy facilities; however, a high-level disinfection of equipment is required in such facilities.

3. A medication distribution station provided for storage and preparation of medication to be administered to patients;

4. Scrub facilities provided near the entrance to each operating room. Scrub facilities with foot or knee controls shall be arranged to minimize any incidental splatter on nearby staff or supply carts. At a minimum, the facility shall include the following:

- a. Scrub sink with knee, elbow, or foot controls;
- b. Soap dispenser.

EXCEPTION: For endoscopy facilities, in lieu of scrub facilities, there shall be a handwash sink in each procedure room that is equipped with valves that can be operated without the use of hands.

5. A soiled workroom for the exclusive use of the surgical suite staff. The soiled workroom shall contain a clinical sink or equivalent flushing type fixture, waste receptacle, and covered soiled receptacle, unless there is a separate soiled linen storage room;

EXCEPTION: In endoscopy facilities, a designated soiled work area will suffice in lieu of a soiled workroom.

6. A clean workroom when clean materials are assembled within the surgical suite prior to use. The workroom shall contain a work counter, a sink equipped for handwashing and space for clean and sterile supplies;

EXCEPTION: In endoscopy facilities, a designated clean work area will suffice in lieu of a clean workroom.

7. An area for cleaning, testing, and storing anesthesia equipment in accordance with accepted principles of aseptic technique.

EXCEPTION: An anesthesia area is not required in endoscopy facilities.

8. Staff change areas that shall contain adequate dressing space for changing of scrubs and shall contain lockers, showers, toilets, lavatories, and receptacles and facilities for the appropriate disposition of soiled scrubs; these areas shall be arranged to allow a restricted traffic pattern of authorized staff from outside the surgical suite to change into appropriate attire and enter the surgical suite;

EXCEPTION: Showers and areas for donning of scrub suits and boots are not required in endoscopy facilities.

9. Provisions for emergency eye-washing.

D. Recovery Area. The facility shall include the following:

1. An area for recovery of patients;
2. Handwashing facilities, secured medication storage space, clerical work space, and sufficient storage space for supplies and equipment;

3. At least four feet between beds or stretchers (two feet if next to a wall) and adequate space at the foot of the bed or stretcher as needed for work and staff circulation;
4. Partitions, walls and/or cubicle curtains (on built-in tracks) to afford visual privacy for each patient;
5. Recovery beds or reclining type of vinyl upholstered chairs or recovery stretchers;
6. Equipment for oxygen, resuscitation, and suction.

2002. Soiled Utility Room

Facilities shall have at least one soiled utility room per floor containing a clinical sink, work counter, waste receptacle and soiled linen receptacle.

2003. Clean Utility Room

Facilities shall have at least one clean utility room per floor containing a counter with handwashing sink and space for the storage and assembly of supplies for nursing procedures.

2004. Corridors (II)

A. Minimum public corridor width shall be five feet.

B. There shall be at least one corridor that is no less than eight feet clear width between doors from the recovery area and/or operating/procedure rooms and an exit door. In a one-story building or on the ground floor of a multi-story building, if there is less than eight feet clear width, the corridors shall be so arranged as to allow a stretcher to exit from the recovery area or operating rooms directly into the corridor without turning and move to the required exit without having to make a turn. Minimum width shall be five feet.

C. The location of items such as drinking fountains, telephone booths, vending machines, and portable equipment shall not restrict corridor traffic or reduce the required corridor width. (II)

2005. Handrails/Guardrails (II)

The facility shall have handrails on at least one side of each corridor/hallway, and on all stairways, ramps, and porches with two or more steps. Ends of all installed handrails shall return to the wall.

2006. Restrooms (II)

A. There shall be an appropriate number of restrooms in the facility, to accommodate patients, staff, and visitors.

B. The restrooms shall be accessible during all operating hours of the facility.

C. A restroom(s) shall be equipped with at least one toilet fixture, toilet paper installed in a holder, a lavatory supplied with hot and cold running water, liquid or granulated soap, single-use disposable paper towels or electric air dryer, and a covered waste receptacle.

D. The waiting/lobby area must have at least one restroom.

E. The facility shall have toilet fixtures in restrooms for patient use in ample number, located within or adjacent to the recovery area. The minimum requirement is one toilet fixture for every surgical and procedure room.

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F. All toilet fixtures used by patients shall have approved grab bars securely fastened in a usable fashion.

G. Privacy shall be provided at toilet fixtures and urinals.

2007. Janitor's Closets

A. The facility shall include at least one (1) lockable janitor's closet throughout the facility.

B. Each shall contain a floor receptor or service sink and storage space for housekeeping equipment and supplies, *e.g.*, mops.

2008. Storage Areas

A. Adequate general storage areas shall be provided for patient and staff/volunteer belongings, equipment, and supplies as well as clean linen, soiled linen, wheelchairs, and general supplies and equipment.

B. Soiled linen shall be stored in an enclosed room. This room may also be the soiled workroom.

C. Storage buildings on the premises shall meet the requirements of the current building code regarding distance from the licensed building. Storage in buildings other than on the facility premises shall be secure and accessible. An appropriate controlled environment shall be provided if necessary for storage of items requiring such an environment.

D. Supplies/Equipment shall not be stored directly on the floor. Supplies/Equipment susceptible to water damage/contamination shall not be stored under sinks or other areas with a propensity for water leakage.

E. Chemicals indicated as harmful on the product label, cleaning materials, and supplies shall be safely stored in cabinets or well-lighted closets/rooms.

2009. Elevators (II)

Elevators shall be inspected and tested upon installation, prior to first use, and annually thereafter by a certified elevator inspector.

2010. Telephone Service

At least one land-line telephone shall be available on each floor of the facility for use by patients and/or visitors for their private, discretionary use; pay phones for this purpose are acceptable

2011. Location

A. Transportation. The facility shall be served by roads that are passable at all times and are adequate for the volume of expected traffic.

B. Parking. The facility shall have a parking area to reasonably satisfy the needs of patients, staff members, and visitors.

C. Access to firefighting equipment. Facilities shall maintain adequate access to and around the building(s) for firefighting equipment. (I)

2012. Incinerators (I)

If the facility has an incinerator, it shall conform to the requirements of the Department.

2013. Furnishings/Equipment (I)

- A. The facility shall maintain the physical plant free of fire hazards and impediments to fire prevention.
- B. No portable electric or unvented fuel heaters shall be permitted in the facility except as permitted by the State Fire Marshal Regulations.
- C. Wastebaskets, window dressings, portable partitions, cubicle curtains, mattresses, and pillows shall be noncombustible, inherently flame-resistant, or treated or maintained flame-resistant in accordance with the applicable code in Section 1700.

2014. Water Requirements.

- A. The facility shall establish written policies and procedures to prevent waterborne microbial contamination within the water distribution system.
- B. The facility shall ensure the practice of hand hygiene to prevent the hand transfer of pathogens, and the use of barrier precautions (e.g. gloves) in accordance with established guidelines.
- C. The facility shall eliminate contaminated water or fluid from environmental reservoirs (e.g. in equipment or solutions) wherever possible.
- D. The facility shall not place decorative fountains and fish tanks in patient-care areas. If decorative fountains are used in separate public areas, the facility shall ensure they are disinfected in accordance with manufacturer’s instructions and safely maintained.
- E. The facility plumbing fixtures that require hot water and are accessible to patients shall be supplied with water which thermostatically controlled to a temperature of at least 100 degrees F. (37.8 degrees C) and not exceeding 125 degrees F. (51.7 degrees C.) at the fixture.
- F. The facility shall have a written plan to respond to disruptions in water supply. The plan must include a contingency plan to estimate water demands for the entire facility in advance of significant water disruptions (i.e., those expected to result in extensive and heavy microbial or chemical contamination of the potable water), sewage intrusion, or flooding.
- G. When a significant water disruption or an emergency occurs, the facility shall:
 - 1. Adhere to any advisory to boil water issued by the municipal water utility;
 - 2. Alert patients, families, employees, volunteers, students and visitors not to consume water from drinking fountains, ice, or drinks made from municipal tap water, while the advisory is in effect, unless the water has been disinfected;
 - 3. After the advisory is lifted, run faucets and drinking fountains at full flow for greater than 5 minutes, or use high-temperature water flushing or chlorination;
 - 4. All ice and drinks that may have been contaminated must be disposed and storage containers cleaned; and
 - 5. Decontaminate the hot water system as necessary after a disruption in service or a cross-connection with sewer lines has occurred.

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H. The facility shall follow appropriate recommendations to prevent cross connection and other sources of contamination of ice for human consumption and to prevent contamination of hydrotherapy equipment and medical equipment connected to water systems (e.g. automated endoscope reprocessors).

I. The facility shall maintain and implement policies and procedures addressing the management of failure of waste water systems.

J. Patient and staff handwashing lavatories and showers, if any, shall include hot and cold water at all times.

2015. Panelboards (II)

The directory shall be labeled to conform to the actual room designations. Clear access of stored materials shall be maintained to the panel. The panelboard directory shall be labeled to conform to the actual room numbers or designations.

2016. Lighting

A. Spaces occupied by persons, machinery, equipment within buildings, approaches to buildings, and parking lots shall be lighted. (II)

B. The facility shall have adequate artificial light to include sufficient illumination for reading, observation, and activities.

2017. Heating, Ventilation, and Air Conditioning (HVAC) (II)

A. The HVAC system shall be inspected at least once a year by a certified/licensed technician.

B. No HVAC supply or return grill shall be installed within three feet of a smoke detector. (I)

C. Intake air ducts shall be filtered and maintained to prevent the entrance of dust, dirt, and other contaminating materials.

D. Each bath/restroom shall have either operable windows or have approved mechanical ventilation.

SECTION 2100 - SEVERABILITY

2101. General

In the event that any portion of these regulations is construed by a court of competent jurisdiction to be invalid, or otherwise unenforceable, such determination shall in no manner affect the remaining portions of these regulations, and they shall remain in effect as if such invalid portions were not originally a part of these regulations.

SECTION 2200 - GENERAL

2201. General

Conditions that have not been addressed in these regulations shall be managed in accordance with the best practices as interpreted by the Department.

Fiscal Impact Statement:

Implementation of this regulation will not require additional resources. There is no anticipated additional cost by the Department or State government due to any inherent requirements of this regulation. There are no external costs anticipated.

Statement of Need and Reasonableness:

The Department's Bureau of Health Facilities Licensing formulated this statement determined by analysis pursuant to 1976 Code Section 1-23-115 C(1)-(3) and (9)-(11).

DESCRIPTION OF REGULATION: R.61-91, *Standards for Licensing Ambulatory Surgical Facilities*.

Purpose: The amendments to R.61-91, *Standards for Licensing Ambulatory Surgical Facilities* will support the Department's goal of promoting and protecting the health of the public in a more efficient and effective manner. The amendments clarify and expand the definitions, revise the codes for fire and life safety and for design and construction. In addition, corrections have been made for clarity and readability, grammar, references, codification and overall improvement to the text of the regulation.

Legal Authority: 1976 Code Section 44-7-260.

Plan for Implementation: Upon approval from the S.C. General Assembly and publication as a final regulation in the South Carolina State Register, a copy of R.61-91, that includes these amendments, will be available electronically on the Department's website under the Health Regulations Category at <http://www.scdhec.gov/Agency/RegulationsAndUpdates/LawsAndRegulations/> and subsequently in the Code of Regulations of the S.C. Code of Laws. Printed copies will be available for a fee from the Department's Freedom of Information Office. Staff will educate the regulated community on the provisions of the Act and the requirements of the regulation.

DETERMINATION OF NEED AND REASONABLENESS OF THE REGULATION BASED ON ALL FACTORS HEREIN AND EXPECTED BENEFITS:

The Department last amended R.61-91 June 27, 2003. 1976 Code Section 1-23-120(J) requires state agencies to perform a review of its regulations every five years and update them if necessary.

Issues found in the review, and the necessity for overall updates renders the proposed amendment needed and reasonable. The proposed amendments support the Department's goal of promoting and protecting the health of the public in a more efficient and effective manner. The amendments clarify and expand the definitions, revise the codes for fire and life safety and for design and construction. In addition, corrections have been made for clarity and readability, grammar, references, codification and overall improvement to the text of the regulation.

DETERMINATION OF COSTS AND BENEFITS:

Internal Costs: Implementation of this regulation should not require additional resources. There is no anticipated additional cost by the Department or State government due to any inherent requirements of this regulation.

External Costs: There are no external costs anticipated.

External Benefits: The amendments update standards of licensure, procedures, and construction requirements for ambulatory surgical facilities while maintaining the interests of patient health and safety and lessening provider burdens. The proposed amendments will benefit the regulated community by clarifying the regulations and increasing their ease of use.

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UNCERTAINTIES OF ESTIMATES:

None.

EFFECT ON THE ENVIRONMENT AND PUBLIC HEALTH:

Implementation of this regulation should not compromise the protection of the environment.

The amendments should reasonably simplify the construction requirements while providing clarification and streamlining standards in the interest of patient care and safety for the ambulatory surgical facilities.

DETRIMENTAL EFFECT ON THE ENVIRONMENT AND PUBLIC HEALTH IF THE REGULATION IS NOT IMPLEMENTED:

Implementation of this regulation should not compromise the protection of the environment.

If the revision is not implemented, unnecessary construction burdens may be experienced by ambulatory surgical facilities. Additionally, facilities would not realize benefits of the amendments, including improved construction requirements and streamlined the standards in the interest of patient care and safety.

Statement of Rationale:

The Department revises this regulation pursuant to the 1976 Code Section 1-23-120(J) requirement that state agencies perform a review of its regulations every five years and update them if necessary. The amendments support the Department's goal of promoting and protecting the health of the public in a more efficient and effective manner. The amendments clarify and expand the definitions, revise the codes for fire and life safety and for design and construction. In addition, corrections have been made for clarity and readability, grammar, references, codification and overall improvement to the text of the regulation.

Document No. 4484

DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL

CHAPTER 61

Statutory Authority: 1976 Code Section 44-7-260

61-84. Standards for Licensing Community Residential Care Facilities

Synopsis:

Regulation 61-84 was last amended on June 25, 2010. Community residential care facilities are facilities which offer room and board and which, unlike a boarding house, provide/coordinate a degree of personal care for a period of time in excess of 24 consecutive hours for two or more persons, 18 years old or older, not related to the licensee within the third degree of consanguinity. It is designed to accommodate residents' changing needs and preferences, maximize residents' dignity, autonomy, privacy, independence, and safety, and encourage family and community involvement. The new amendments herein include the Department's Bureau of Health Facilities Licensing's effort to incorporate provisions relating to statutory mandates, medication management, meal service, emergency procedures, design and construction, fire and life safety, and overall licensing requirements for community residential care facilities. In addition, corrections have been made for clarity and readability, grammar, references, codification and overall improvement to the text of the regulation.

A Notice of Drafting was published in the *State Register* on June 27, 2014.

Section-by-Section Discussion of Amendments

Statutory Authority: The statutory authority under the title of the regulation and before the table of contents was corrected.

Table of Contents

The table was revised to reflect the amendments.

61-84.101 Definitions

The definitions of 61-84.101.A Abuse, 61-84.101.U Exploitation, 61-84.101.II Neglect, 61-84.101.KK Nursing Home, and 61-84.101.CCC Self-Administration have been added. The definitions of 61-84.101.B (formerly 61-84.101.A) Activities of Daily Living (ADL), 61-84.101.C Administrator, 61-84.101.F (formerly 61-84.101.G) Alzheimer's Special Care Unit or Program, 61-84.101.I (formerly 61-84.101.K) Authorized Healthcare Provider, 61-84.101.O (formerly 61-84.101.Q) Consultation, 61-84.101.T (formerly 61-84.101.X) Dispensing Medication, 61-84.101.W (formerly 61-84.101.AA) Health Assessment, 61-84.101.Y (formerly 61-84.101.CC) Individual Care Plan (ICP), 61-84.101.Z (formerly 61-84.101.EE) Inspection, 61-84.101.AA (formerly 61-84.101.FF) Investigation, 61-84.101.CC (formerly 61-84.101.HH) Legend Drug, 61-84.101.EE (formerly 61-84.101.JJ) Licensed Nurse, 61-84.101.JJ (formerly 61-84.101.OO) Nonlegend Drug, 61-84.101.PP (formerly 61-84.101.VV) Physician Assistant, 61-84.101.VV (formerly 61-84.101.CCC) Resident, 61-84.101.XX (formerly 61-84.101.EEE) Respite Care, 61-84.101.ZZ (formerly 61-84.101.GGG) Restraint, and 61-84.101.FFF (formerly 61-84.101.LLL) Suspension of License have been amended. The definitions 61-84.101.B Administering Medication, 61-84.101.E Advanced Practice Registered Nurse, 61-84.101.I Architect, 61-84.101.Y Existing Facility, 61-84.101.NN New Facility, and 61-84.101.ZZ Ramp have been deleted. The remaining definitions were renumbered to adjust the codification.

61-84.102 References

Section 61-84.102.A was amended to current writing standards of listing publication in italics text. Section 61-84.102.B was amended to delete references that are no longer applicable.

61-84.103 License Requirements

Section 61-84.103.A was revised to ensure facilities do not admit residents prior to the effective license date and to reflect the new codification listed in Section 61-84.101 Definitions. Section 61-84.103.B was revised to correct a grammatical error. Section 61-81.103.C was amended to allow previously licensed facilities the ability to operate. Section 61-84.103.G.5 was amended to clarify separate licenses are not required for facilities owned by the same entity on the same or adjoining ground. Section 61-84.103.G.6 was deleted. Section 61-84.103.N was amended to improve the grammar.

61-84.202 Inspections/Investigations

Section 61-84.202.C was amended to allow the individuals authorized to enter the facility for the purpose of inspection and or investigation. Section 61-84.202.E was revised to update the language in conformity with other regulations. Section 61-84.202.F was added to inform the licensee he or she may be charged for an inspection fee in accordance with statutory authority.

61-84.302 Violation Classifications

Section 61-84.302.E was amended to clarify the violations of refusal to allow authorized individuals to enter the facility. Section 61-84.302.F was amended to current standards of quoting a statute. Section 61-84.302.G was deleted.

61-84.401 General (Policies and Procedures)

Section 61-84.401.A was amended to clarify that the reviews of the policies and procedures shall be documented. Section 61-84.401.B was revised to clarify when a facility engages in a source to provide services that source shall comply with the regulation.

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61-84.501 General (Staff/Training)

Sections 61-84.501.A was deleted. Section 61-84.501.A (formerly 61-84.501.B) was amended to ensure before being employed, staff members and direct care volunteers shall undergo a criminal background check. Section 61-84.501.D (formerly 61-84.501.E) was amended to add direct care volunteers. Section 61-84.501.E (formerly 61-84.501.F) was amended the information on file regarding staff members and volunteers is current. The remaining sections were renumbered to adjust the codification.

61-84.502 Administrator

Section 61-84.502.A deleted sections referencing applicable sections of the law. Section 61-84.502.B corrects the spelling of “judgment” and clarifies the capabilities of meeting the responsibilities of an administrator.

61-84.503 Staff

Section title has been revised from “Staffing” to “Staff”. Section 61-84.503.A was amended to clarify the staff member on duty was present at the facility. Section 61-84.503.B was amended to clarify the volunteers were “direct care” volunteers and to ensure those with direct care services had the proper qualifications for services rendered. Section 61-84.503.C was amended to have the facility maintain documentation for Sections 61-84.503.A and 61-84.503.B.

61-84.504. Inservice Training

Section 61-84.504.A was amended to add language to ensure staff members and direct care volunteers demonstrate a working knowledge of the training that was received. Sections 61-84.504.A.10 and 61-84.504.A.13 were added to clarify the staffs’ knowledge of the Bill of Rights for Long-Term Care Facilities. Section 61-84.504.B was deleted. 61-84.504.B (formerly 61-84.504.C) was amended to clarify that staff members and direct care volunteers should have their job orientation within twenty-four hours of their first day.

61-84.505 Health Status

Section 61-84.505.A was amended to add the language direct care volunteers.

61-84.506 Private Sitters

Section 61-84.506.A.3 was amended to ensure the private sitter had documented orientation to the facility. Section 61-84.506.A.4 (formerly Section 61-84.506.A.3) was renumbered to adjust to codification.

61-84.601 Accidents/Incidents

The Section 61-84.601 title was amended to include “Accidents.” Sections 61-84.601.A, 61-84.601.B and 61-84.601.C were amended to the current standards of accident/incident reporting. Sections 61-84.601.D, 61-84.601.E and 61-84.601.G were deleted. Section 61-84.601.E (formerly 61-84.601.H) was amended to clarify reporting injuries to the physician not to exceed twenty-four hours. Section 61-84.601.F (formerly 61-84.601.I) was amended to clarify abuse reporting requirements. The remaining sections were renumbered to adjust the codification.

61-84.602 Fire/Disasters

Sections 61-84.602.A and 61-84.602.B were amended to clarify reporting a fire to the Department within seventy-two hours.

61-84.604 Administrator Change

Section 61-84.604 was amended that the licensee shall notify the Department with seventy-two hours of any change in the administrator status.

61-84.606 Emergency Placement Notification

The Section 61-84.606 title was amended to include “Notification.” Section 61-84.606 was amended to clarify when the Department should be notified when a licensee has to have an emergency placement by the receiving facility.

61-84.607 Facility Closure

Section 61-84.607.A was revised regarding references to the “Division of Health Licensing” changed to “The Department.” Section 61-84.607.B was amended to clarify the reporting time to the Department to fifteen days and in the event of emergency closure to twenty-four hours.

61-84.608 Zero Census

Section 61-84.608 was amended to clarify application and payment requirements even though a facility may have zero census.

61-84.701 Content (Resident Records)

Section 61-84.701.A was amended to clarify the records need to be maintained on site and to allow electronic media as a means of maintaining records. Section 61-84.701.B was amended to clarify that verbal orders need to be documented, specific entries regarding circumstances and condition of discharge or death, and includes maintaining information for power of attorney or responsible party.

61-84.702 Assessment

Section 61-84.702 was amended to reflect the correct definition in Section 61-84.101 and to include documenting the date of the signature of the assessment.

61-84.703 Individual Care Plan

Section 61-84.703.A was amended to clarify the Individual Care Plan shall be developed with seven days of admission and include evidence by their signatures and date. Section 61-84.703.B was corrected with grammatical changes.

61-84.704 Record Maintenance

Section 61-84.704.B was amended to allow when a resident transfers from one facility to another to include the transfer of resident records and to be documented. Sections 61-84.704.F and 61-84.704.G were revised regarding references to the “Division of Health Licensing” changed to “The Department.” Section 61-84.704.H was amended to require the resident records must be maintained at the facility.

61-84.801 General (Admission/Retention)

Section 61-84.801.A was revised to correct a grammatical error. Section 61-84.801.C.5 was deleted and the remaining sections were renumbered to adjust the codification. Section 61-84.801.D was added to clarify the persons not eligible for retention. Section 61-84.801.C.5.b was relocated to Section 61-84.801.D.1. Section 61-84.801.C.5.k was relocated to Section 61-84.801.D.2. Section 61-84.801.C.4 was relocated to Section 61-84.801.D.3. Section 61-84.801.E (formerly 61-84.801.D) added the condition of hospitalization regarding changes in resident’s condition. The remaining sections were renumbered to adjust the codification.

61-84.901 General (Residential Care/Services)

Section 61-84.901.A was amended to clarify that prior to admission there shall be a written agreement between the resident and the facility, advance notice of not less than thirty days to change the fee amount and the date and amount a resident is to receive his/her personal needs allowance. Sections 61-84.901.B, 61-84.901.F and 61-81.901.g were corrected with grammatical changes. Section 61-84.901.C was amended to clarify to take precautions for residents with special conditions. Section 61-84.901.D was amended to add language to include examples of personal items. Section 61-84.901.G was revised to correct some grammatical errors.

61-84.903 Recreation

Section 61-84.903.C was amended to clarify that one staff person shall be responsible for recreational activities. Section 61-84.903.E was corrected with grammatical changes.

61-84.905 Safety Precautions/Restraints

Section 61-84.905.A was amended to include chemical restraints.

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61-84.1001 General (Rights and Assurances)

Section 61-84.1001.A and 61-84.1001.C were amended to correct the Federal and State references. Section 61-84.1001.G was amended to delete the exception requirement and allow for delayed egress locks. Section 61-84.1001.J was amended to add the requirement the ICP shall be authorized by the physician or other authorized healthcare provider. Section 61-84.1001.M was amended to include the statutory mandate that a facility may charge the resident no more than fourteen days of occupancy, if the resident fails to notify in writing the administrator of the intent to voluntarily relocate.

61-84.1101 General (Resident Physical Examination and TB Screening)

Section 61-84.1101.D.1 was amended to correct a grammatical error. Section 61-84.1101.G was amended regarding the transfer of resident TB information.

61-84.1201 General (Medication Management)

Section 61-84.1201.A was amended to correct the Federal and State references.

61-84.1203 Administering Medication/Treatments

Section 61-84.1203. A was amended to include language if the ordered dosage was given on a varying schedule. Section 61-84.1203.C was amended to clarify that specific written orders for medication shall be obtained on a semi-annual basis and that staff document the resident demonstration to self-administer medication.

61-84.1204 Pharmacy Services

Sections 61-84.1204.A and 61-84.1204.C were amended to correct the Federal and State references.

61-84.1205 Medication Containers

Section 61-84.1204.C was corrected with grammatical changes.

61-84.1206 Medication Storage

Section 61-84.1206.A was amended to clarify the storage of medication requiring refrigeration and the storage of narcotics. Section 61-84.1206.C was amended to clarify the medication requirements and to add language regarding controlled substances records.

61-84.1207 Disposition of Medications

Section 61-84.1207.A was amended to require a signature to document with the person receiving the unused medication. Sections 61-84.1207.B.2 and 61-84.1207.C were corrected with grammatical changes. Section 1207.D was amended to delete the requirement of returning controlled substances to the dispensing pharmacy.

61-84.1301 General (Meal Service)

Section 61-84.1301.A was amended regarding references to the “Division of Health Licensing” changed to “The Department” and changed the classification of “commercial kitchen” to “certified/classified equipment.” In addition, in Section 61-84.1301.A Exception was relocated from formal Section 1303. Section 61-84.1301.C was amended regarding references to the “Division of Health Licensing” changed to “The Department.” Section 61-84.1301.D was amended to clarify the language food preparation. Section 61-84.1301.E was relocated from formal Section 61-84.1309.A.

61-84.1302 Food and Food Storage

Sections 61-84.1302.A, 61-84.1302.C and 61-84.1302.E were deleted. The remaining sections were renumbered to adjust the codification.

61-84.1303 Food Equipment and Utensils

Section 61-84.1303 was deleted in its entirety.

61-84.1303 (Formerly 61-84.1304) Meals and Services

Section 61-84.1304 was renumbered to adjust the codification.

61-84.1304 (Formerly 61-84.1305) Meal Service Personnel

Sections 61-84.1305.A and 61-84.1305.C were deleted. The remaining sections were renumbered to adjust the codification.

61-84.1305 (Formerly 61-84.1306) Diets

Section 61-84.1305 was renumbered to adjust for codification.

61-84.1306 (Formerly 61-84.1307) Menus

Section 61-84.1306 was renumbered to adjust for codification.

61-84.1307 (Formerly 61-84.1308) Ice and Drinking Water

Section 61-84.1307 (formerly 61-84.1308) was renumbered to adjust for codification.

61-84.1309 Equipment

Section 61-84.1309 was deleted in its entirety.

61-84.1310 Refuse Storage and Disposal

Section 61-84.1310 was deleted in its entirety.

61-84.1401 Disaster Preparedness

Section 61-84.1401.A was amended to clarify the when the emergency evacuation plan needs to be updated and rehearsals to be performed. Section 61-84.1401.B was amended to include the emergency evacuation plan and to update the review of the sheltering facility, what is provided at the sheltering facility, accompanying the relocated residents, and transportation arrangements.

61-84.1501 Fire Prevention

Section 1501.B was amended regarding references to the “Division of Health Licensing” changed to “The Department.”

61-84.1502 Tests and Inspections

Section 1502.A was amended to the current codes adopted by the South Carolina Building Codes Council and the South Carolina State Fire Marshal. Section 61-84.1502.B was deleted.

61-84.1503 Fire Response Training

Section 61-84.1503.A was amended to clarify fire response training. Section 61-84.1503.B was amended to relocate the requirement of a copy of the evacuation diagram being issued to each resident or sponsor at the time of admission to Section 61-84.1503.D.

61-84.1504 Fire Drills

Section 61-84.1504. D was corrected with grammatical changes.

61-84.1601 General (Maintenance)

Section 61-84.1601.A was deleted. Section 61-84.1601.B was amended to include the facility to comply with the provisions of codes adopted by the South Carolina Building Codes Council and South Carolina State Fire Marshal.

61-84.1701 Staff Practices

Section 61-84.1701 was corrected with grammatical changes.

61-84.1702 Tuberculin Skin Testing

Sections 61-84.1702.B, 61-84.1702.D.2.e, 61-84.1702.D.3.d and 61-84.1702.E.1.b.2 were corrected to the appropriate referenced definition.

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61-84.1703 Housekeeping

Section 61-84.1703 was amended to clarify clean and free of vermin. Section 61-84.1703.B.3 was added to clarify the storage of chemicals.

61-84.1704 Infectious Waste

Section 61-84.1704 was corrected with grammatical changes.

61-84.1801 General (Quality Improvement Program)

Section 61-84.1801.A was amended to delete the requirement of the quality improvement program regarding measuring quality of the policies and procedure manuals and the effectiveness of the fire plan.

61-84.1901 General (Design and Construction)

Section 61-84.1901.A was amended to clarify the square feet per licensed bed. Sections 61-84.1901.B, 61-84.1901.C, and 61-84.1901.D were deleted.

61-84.1902 Codes and Standards

Section 61-84.1902 title was revised to delete “Local and State.” Sections 61-84.1902.A and 61-84.1902.B were amended to delete the previous language and revise to include the codes adopted by the South Carolina Building Code Council and the South Carolina State Fire Marshal. Section 61-84.1902.C was deleted.

61-84.1903 Submission of Plans

Section 61-84.1903 title was revised to delete “Construction/Systems” and add “Submission of Plans.” Sections 61-84.1903.A, 61-84.1903.B, 61-84.1903.C, and 61-84.1903.D were deleted regarding construction and systems and were written regarding the submission of plans requirements for construction. Section 61-84.1903.E was deleted.

61-84.1904 Inspections

Section 61-84.1904 title was revised to delete “Submission of Plans and Specifications” and add “Inspections.” Sections 61-84.1904.A and 61-84.1904.B were deleted regarding submission of plans and specifications and were written regarding construction inspections.

61-84.2000 Fire Protection, Prevention and Life Safety

Section 61-84.2000 title was revised to delete “General Construction Requirements” and add “Fire Protection, Prevention and Life Safety.” Section 61-84.2001 was titled “Alarms” and added Sections 61-84.2001.A and 61-84.2001.B regarding the type of fire alarms required in the facility. Sections 61-84.2002, 61-84.2003, 61-84.2004, 61-84.2005, and 61-84.2006 were deleted.

61-84.2100 General Construction Requirements

Section 61-84.2100 title was relocated from formerly known Section 61-84.2000. Sections 61-84.2101 (formerly 61-84.2007), 61-84.2102 (formerly 61-84.2008) and 61-84.2103 (formerly 61-84.2009) were renumbered to adjust the codification. Sections 61-84.2101 (formerly 61-84.2007) and 61-84.2102 (formerly 61-84.2008) were amended to the current building codes. Section 61-84.2103 (formerly 61-84.2009) was amended clarify the manner curtains and draperies shall be arranged. Former Section 61-84.2100 Hazardous Elements of Construction was deleted in its entirety. Former Section 61-84.2200 Fire Protection Equipment and Systems was deleted in its entirety.

61-84.2104 (formerly 61-84.2206) Gases

Section 61-84.2104.A regarding handling and storage of flammable and nonflammable gases was deleted. Section 61-84.2104.A (formerly 61-84.2206.B) was renumbered to adjust the codification. Section 61-84.2104.B was added regarding the designated smoking areas.

61-84.2105 (formerly 61-84.2207) Furnishings/Equipment

Section 61-84.2105.A (formerly 61-84.2207.A) was corrected for grammatical changes. Section 61-84.2105.D (formerly 61-84.2207.D) was amended to delete the building code reference. Section 61-84.2105.D (formerly 61-84.2207.D) Exception and Section 61-84.2105.E (formerly 61-84.2207.E) were deleted.

61-84.2200 (formerly 61-84.2300) Exits

Section 61-84. 2200 (formerly 61-84.2300) was renumbered to adjust the codification.

61-84.2201 (formerly 61-84.2301) Number and Locations of Exits

Former sections 61-84.2301.A, 61-84.2301.B, 61-84.2301.C, 61-84.2301.D, 61-84.2301.E and 61-84.2301.G were deleted. Section 61-84.2201.A (formerly 61-84.2301.F) was amended to require the facility maintain halls, corridors and other means of egress free of obstructions. Section 61-84.2201.B (formerly 61-84.2301.H) was renumbered to adjust the codification.

61-84.2300 (formerly 61-84.2400) Water Supply/Hygiene

Section 61-84.2300 (formerly 61-84.2400) was renumbered to adjust the codification.

61-84.2301 (formerly 61-84.2401) Design and Construction

Former sections 61-84.2401.A, 61-84.2401.B, 61-84.2401.C, and 61-84.2401.E were deleted. Section 61-84.2301.A (formerly 61-84.2401.D) was renumbered to adjust the codification.

61-84.2402 Disinfection of Water Lines

Former Section 61-84.2402 was deleted in its entirety.

61-84.2403 Temperature Control

Former Section 61-84.2403 title "Temperature Control" was deleted and the remaining sections were renumbered to adjust the codification to Section 61-84.2301 (formerly 61-84.2401). Section 61-84.2301.B (formerly 61-84.2403.A) was corrected with grammatical changes.

61-84.2404 Stop Valves

Former Section 61-84.2404 was deleted.

61-84.2302 (formerly 61-84.2405) Cross-Connections

Section 61-84.2302 (formerly 61-84.2405) was renumbered to adjust the codification.

61-84.2406 Design and Construction of Wastewater Systems

Former section 61-84.2406 was deleted in its entirety.

61-84.2400 (formerly 61-84.2500) Electrical

Section 61-84.2400 (formerly 61-84.2500) was renumbered to adjust the codification.

61-84.2501 General (Electrical)

Former section 61-84.2501 was deleted in its entirety.

61-84.2502 Panelboards

Former section 61-84.2502 was deleted in its entirety.

61-84.2503 Lighting

Former section 61-84.2503 was deleted in its entirety.

61-84.2401 (formerly 61-84.2504) Receptacles

Section 61-84.2401 (formerly 61-84.2504) was renumbered to adjust the codification. Section 61-84.2401.A (formerly 61-84.2504.A) was amended to delete the building code reference.

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61-84.2402 (formerly 61-84.2505) Ground Fault Protection

Section 61-84.2402 (formerly 61-84.2505) was renumbered to adjust the codification. Section 61-84.2402.A (formerly 61-84.2505.A) was amended to delete the building code reference. Section 61-84.2402.B (formerly 61-84.2505.B) was corrected with grammatical changes.

61-84.2403 (formerly 61-84.2506) Exit Signs

Section 61-84.2403 (formerly 61-84.2506) was renumbered to adjust the codification. Section 61-84.2403.A (formerly 61-84.2506.A) was amended to delete the requirement the letters need to be in red on a white background.

61-84.2404 (formerly 61-84.2507) Emergency Electric Service

Section 61-84.2404 (formerly 61-84.2507) was renumbered to adjust the codification.

61-84.2500 (formerly 61-84.2600) Heating, Ventilation, and Air Conditioning

Section 61-84.2500 (formerly 61-84.2600) was renumbered to adjust the codification.

61-84.2501 (formerly 61-84.2601) General (Heating, Ventilation, and Air Conditioning)

Section 61-84.2501 (formerly 61-84.2601) was renumbered to adjust the codification. Section 61-84.2501.A (formerly 61-84.2601.A) was deleted. The remaining sections were renumbered to adjust the codification.

61-84.2600 (formerly 61-84.2700) Physical Plant

Section 61-84.2600 (formerly 61-84.2700) was renumbered to adjust the codification.

61-84.2601 (formerly 61-84.2701) Facility Accommodations/Floor Area

Section 61-84.2601 (formerly 61-84.2701) was renumbered to adjust the codification. Section 61-84.2601.A (formerly 61-84.2701.A) was amended to clarify the language of homelike atmosphere.

61-84.2602 (formerly 61-84.2702) Resident Rooms

Section 61-84.2602 (formerly 61-84.2702) was renumbered to adjust the codification. Section 61-84.2602.F (formerly 61-84.2702.F) Exception was deleted. Section 61-84.2602.G (formerly 61-84.2702.G) was amended to clarify when needed bedpans, urinals, and hot water bottles shall be provided by the facility. Section 61-84.2602.J (formerly 61-84.2702.J) Exception was deleted.

61-84.2603 (formerly 61-84.2703) Resident Room Floor Area

Section 61-84.2603 (formerly 61-84.2703) was renumbered to adjust the codification. Section 61-84.2603.A (formerly 61-84.2703.A) was deleted. Section 61-84.2603.B (formerly 61-84.2703.B) was amended to clarify each resident room shall be an outside room with and outside window or door. Section 61-84.2603.C (formerly 61-84.2703.C) was amended to clarify the requirements regarding the sleeping room floor area. Section 61-84.2603.D (formerly 61-84.2603.D) was amended to accommodate separate beds in resident sleeping rooms. The remaining sections were renumbered to adjust the codification.

61-84.2604 (formerly 61-84.2704) Bathrooms/Restrooms

Section 61-84.2604 (formerly 61-84.2704) was renumbered to adjust the codification. Section 61-84.2604.A (formerly 61-84.2704.A) was amended to include a bathroom for public use. Section 61-84.2604.B (formerly 61-84.2704.B) was deleted. Section 61-84.2604.G (formerly 61-84.2704.H) was amended to clarify the location of the bathroom for kitchen employees and the doors to the toilet facilities located in the kitchen. Section 61-84.2604.H (formerly 61-84.2704.I) was amended to clarify the building code reference. The remaining sections were renumbered to adjust the codification.

61-84.2605 (formerly 61-84.2705) Doors

Section 61-84.2605 (formerly 61-84.2705) was renumbered to adjust the codification. Sections 61-84.2605.C (formerly 61-84.2705.C), 61-84.2605.D (formerly 61-84.2705.D), 61-84.2605.E (formerly 61-84.2705.E), and

61-84.2605.K (formerly 61-84.2705.K) were deleted. Sections 61-84.2605.C (formerly 61-84.2705.F) and 61-84.2605.D (formerly 61-84.2705.G) were amended to increase the door width requirement to 36 inches.

61-84.2706 Elevators

Former section 61-84.2706 was deleted in its entirety.

61-84.2707 Corridors

Former section 61-84.2707 was deleted in its entirety.

61-84.2606 (formerly 61-84.84.2708) Ramps

Section 61-84.2606 (formerly 61-84.84.2708) was renumbered to adjust the codification. Section 61-84.2606.D (formerly 61-84.84.2708.D) was deleted. Section 61-84.2606.E (formerly 61-84.84.2708.F) was amended to clarify ramps used for wheelchairs. The remaining sections were renumbered to adjust the codification.

61-84.2709 Landings

Former section 61-84.2709 was deleted in its entirety.

61-84.2607 (formerly 61-84.2710) Handrails/Guardrails

Section 61-84.2607 (formerly 61-84.2710) was renumbered to adjust the codification. Section 61-84.2607 (formerly 61-84.2710.A) was amended to clarify handrails are required in each corridor/hallway. Section 61-84.2710.B was deleted in its entirety.

61-84.2608 (formerly 61-84.2711) Screens

Section 61-84.2608 (formerly 61-84.2711) was renumbered to adjust the codification.

61-84.2609 (formerly 61-84.2712) Windows/Mirrors

Section 61-84.2609 (formerly 61-84.2712) was renumbered to adjust the codification. Section 61-84.2609.A (formerly 61-84.2712.A) was amended to clarify the building code reference. Sections 61-84.2609.B (formerly 61-84.2712.B) and Section 61-84.2609.C (formerly 61-84.2712.C) were deleted. The remaining sections were renumbered to adjust the codifications.

61-84.2610 (formerly 61-84.2713) Janitor's Closet

Section 61-84.2610 (formerly 61-84.2713) was renumbered to adjust the codification. Section 61-84.2610 (formerly 61-84.2713) was amended to clarify all facilities shall have a lockable janitor's closet.

61-84.2611 (formerly 61-84.2714) Storage Areas

Section 61-84.2611 (formerly 61-84.2714) was renumbered to adjust the codification. Sections 61-84.2611.B (formerly 61-84.2714.B), 61-84.2611.C (formerly 61-84.2714.C) and Section 61-84.2611.D (formerly 61-84.2714.D) were deleted. Section 61-84.2611.B (formerly 61-84.2714.E) was amended to clarify the building code requirements. The remaining sections were renumbered to adjust the codifications.

61-84.2612 (formerly 61-84.2715) Telephone Service

Section 61-84.2612 (formerly 61-84.2715) was renumbered to adjust the codification. Section 61-84.2612.B (formerly 61-84.2715.B) was amended to clarify the telephone shall be provided by the facility.

61-84.2613 (formerly 61-84.2716) Location

Section 61-84.2613 (formerly 61-84.2716) was renumbered to adjust the codification.

61-84.2614 (formerly 61-84.2717) Outdoor Area

Section 61-84.2614 (formerly 61-84.2717) was renumbered to adjust the codification. Section 61-84.2614.B (formerly 61-84.2717.B) was deleted. The remaining sections were renumbered to adjust the codifications.

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61-84.2700 (formerly 61-84.2800) Severability

Section 61-84.2700 (formerly 61-84.2800) was renumbered to adjust the codification.

61-84.2701 (formerly 61-84.2801) General (Severability)

Section 61-84.2701 (formerly 61-84.2801) was renumbered to adjust the codification.

61-84.2800 (formerly 61-84.2900) General

Section 61-84.2800 (formerly 61-84.2900) was renumbered to adjust the codification.

61-84.2801 (formerly 61-84.2901) General (General)

Section 61-84.2801 (formerly 61-84.2901) was renumbered to adjust the codification.

Instructions: Replace Regulation 61-84, Standards for Licensing Community Residential Care Facilities, in its entirety.

Text:

61-84. Standards for Licensing Community Residential Care Facilities.

Statutory Authority: 1976 Code Section 44-7-260

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SECTION 100--DEFINITIONS AND LICENSE REQUIREMENTS

- 101. Definitions.

For the purpose of this regulation, the following definitions shall apply:

A. Abuse. Physical abuse or psychological abuse.

1. Physical Abuse. The act of intentionally inflicting or allowing to be inflicted physical injury on a resident by an act or failure to act. Physical abuse includes, but is not limited to, slapping, hitting, kicking, biting, choking, pinching, burning, actual or attempted sexual battery, use of medication outside the standards of reasonable medical practice for the purpose of controlling behavior, and unreasonable confinement. Physical abuse also includes the use of a restrictive or physically intrusive procedure to control behavior for the purpose of punishment except that a therapeutic procedure prescribed by a licensed physician or other legally authorized healthcare professional or that is part of a written ICP by a physician or other legally authorized healthcare professional is not considered physical abuse. Physical abuse does not include altercations or acts of assault between residents.

2. Psychological Abuse. The deliberate use of any oral, written, or gestured language or depiction that includes disparaging or derogatory terms to a resident or within the resident's hearing distance, regardless of the resident's age, ability to comprehend, or disability, including threats or harassment or other forms of intimidating behavior causing fear, humiliation, degradation, agitation, confusion, or other forms of serious emotional distress.

B. Activities of Daily Living (ADL). Those personal functions performed by an individual in the course of a day that include, but are not limited to, walking; bathing; shaving; brushing teeth; combing hair; dressing; eating; getting in or getting out of bed; toileting; ambulating; doing laundry; cleaning room; managing money; shopping; using public transportation; making telephone calls; obtaining appointments; administration of medication; and other similar activities.

C. Administrator. The staff member designated by the licensee to have the authority and responsibility to manage the facility, is in charge of all functions and activities of the facility, and is appropriately licensed as a community residential care facility administrator by the S.C. State Board of Long Term Health Care Administrators.

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D. Adult. A person 18 years of age or older.

E. Airborne Infection Isolation (AII). A room designed to maintain Airborne Infection Isolation, formerly called a negative pressure isolation room. An Airborne Infection Isolation room is a single-occupancy resident care room used to isolate persons with suspected or confirmed infectious tuberculosis (TB) disease. Environmental factors are controlled in Airborne Infection Isolation rooms to minimize the transmission of infectious agents that are usually spread from person-to-person by droplet nuclei associated with coughing or aerosolization of contaminated fluids. Airborne Infection Isolation rooms may provide negative pressure in the room (so that air flows under the door gap into the room), an air flow rate of six to twelve (6 to 12) air changes per hour (ACH), and direct exhaust of air from the room to the outside of the building or recirculation of air through a high efficiency particulate air (HEPA) filter.

F. Alzheimer's Special Care Unit or Program. A facility or area within a facility providing a secure, special program or unit for residents with a diagnosis of probable Alzheimer's disease and/or related dementia to prevent or limit access by a resident outside the designated or separated areas, and that advertises, markets, or otherwise promotes the facility as providing specialized care/services for persons with Alzheimer's disease and/or related dementia or both.

G. Annual. A time period that requires an activity to be performed at least every twelve to thirteen (12 to 13) months.

H. Assessment. A procedure for determining the nature and extent of the problem(s) and needs of a resident/potential resident to ascertain if the facility can adequately address those problems, meet those needs, and to secure information for use in the development of the individual care plan. Included in the process are an evaluation of the physical, emotional, behavioral, social, spiritual, nutritional, recreational, and, when appropriate, vocational, educational, legal status/needs of a resident/potential resident. Consideration of each resident's needs, strengths, and weaknesses shall be included in the assessment.

I. Authorized Healthcare Provider. An individual authorized by law and currently licensed in South Carolina to provide specific treatments, care, or services to residents, e.g., advanced practice registered nurse, physician assistant.

J. Blood Assay for *Mycobacterium tuberculosis* (BAMT). A general term to refer to *in vitro* diagnostic tests that assess for the presence of tuberculosis (TB) infection with *M. tuberculosis*. This term includes, but is not limited to, IFN- γ release assays (IGRA).

K. Boarding House. A business/entity which provides room and board to an individual(s) and which does not provide a degree of personal care to more than one individual.

L. Community Residential Care Facility (CRCF). A facility which offers room and board and which, unlike a boarding house, provides/coordinates a degree of personal care for a period of time in excess of 24 consecutive hours for two or more persons, 18 years old or older, not related to the licensee within the third degree of consanguinity. It is designed to accommodate residents' changing needs and preferences, maximize residents' dignity, autonomy, privacy, independence, and safety, and encourage family and community involvement. Included in this definition is any facility (other than a hospital), which offers or represents to the public that it offers a beneficial or protected environment specifically for individuals who have mental illness or disabilities. These facilities may be referred to as "assisted living" provided they meet the above definition of community residential care facility.

M. Contact Investigation. Procedures that occur when a case of infectious TB is identified, including finding persons (contacts) exposed to the case, testing and evaluation of contacts to identify Latent TB Infection (LTBI) or TB disease, and treatment of these persons, as indicated.

N. Controlled Substance. A medication or other substance included in Schedule I, II, III, IV, and V of the Federal Controlled Substances Act and the South Carolina Controlled Substances Act.

O. Consultation. A visit by Department representative(s) who will provide information to the licensee with the goal of facilitating compliance with these regulations.

P. Department. The S.C. Department of Health and Environmental Control (DHEC).

Q. Designee. A staff member designated by the administrator to act on his/her behalf.

R. Direct Care Staff Member/Direct Care Volunteer. Those individuals who provide assistance with activities of daily living to residents.

S. Discharge. The point at which residence in a facility is terminated and the facility no longer maintains active responsibility for the care of the resident.

T. Dispensing Medication. The transfer or possession of one (1) or more doses of a medication or device by a licensed pharmacist or individual as permitted by law, to the ultimate consumer or his or her agent pursuant to a lawful order of a practitioner in a suitable container appropriately labeled for subsequent administration to, or use by a resident.

U. Exploitation. 1) Causing or requiring a resident to engage in an activity or labor that is improper, unlawful, or against the reasonable and rational wishes of a resident. Exploitation does not include requiring a resident to participate in an activity or labor that is a part of a written ICP or prescribed or authorized by the resident's attending physician; 2) an improper, unlawful, or unauthorized use of the funds, assets, property, power of attorney, guardianship, or conservatorship of a resident by an individual for the profit or advantage of that individual or another individual; or 3) causing a resident to purchase goods or services for the profit or advantage of the seller or another individual through undue influence, harassment, duress, force, coercion, or swindling by overreaching, cheating, or defrauding the resident through cunning arts or devices that delude the resident and cause him or her to lose money or other property.

V. Facility. A community residential care facility licensed by the Department.

W. Health Assessment. An evaluation of the health status of a staff member/volunteer by a physician, other authorized healthcare provider, or registered nurse, pursuant to written standing orders and/or protocol approved by a physician's signature. The standing orders/protocol shall be reviewed annually by the physician, with a copy maintained at the facility.

X. Incident. An unusual unexpected adverse event resulting in harm, injury, or death of staff or residents, accidents, *e.g.*, medication errors, adverse medication reactions, elopement of a resident.

Y. Individual Care Plan (ICP). A documented regimen of appropriate care/services or written action plan prepared by the facility for each resident based on resident's needs and preferences and which is to be implemented for the benefit of the resident.

Z. Inspection. A visit by a Department representative(s) for the purpose of determining compliance with this regulation.

AA. Investigation. A visit by a Department representative(s) to a licensed or unlicensed entity for the purpose of determining the validity of allegations received by the Department relating to this regulation.

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BB. Latent TB Infection (LTBI). Infection with *M. tuberculosis*. Persons with Latent TB Infection carry the organism that causes TB but do not have TB disease, are asymptomatic, and are noninfectious. Such persons usually have a positive reaction to the tuberculin skin test and/or positive BAMT.

CC. Legend Drug.

1. A drug when, under Federal law, is required, prior to being dispensed or delivered, to be labeled with any of the following statements:

- a. "Caution: Federal law prohibits dispensing without prescription";
- b. "Rx only" or;

2. A drug which is required by any applicable Federal or State law to be dispensed pursuant only to a prescription drug order or is restricted to use by practitioners only;

3. Any drug products considered to be a public health threat, after notice and public hearing as designated by the S.C. Board of Pharmacy; or

4. Any prescribed compounded prescription drug within the meaning of the Pharmacy Act.

DD. License. The authorization to operate a facility as defined in this regulation and as evidenced by a current certificate issued by the Department to a facility.

EE. Licensed Nurse. A person to whom the S.C. Board of Nursing has issued a license as a registered nurse or licensed practical nurse or an individual licensed as a registered nurse or licensed practical nurse who resides in another state that has been granted multi-state licensing privileges by the South Carolina Board of Nursing may practice nursing in any facility or activity licensed by the Department subject to the provisions and conditions as indicated in the Nurse Licensure Compact Act.

FF. Licensee. The individual, corporation, organization, or public entity that has received a license to provide care/services at a facility and with whom rests the ultimate responsibility for compliance with this regulation.

GG. Local Transportation. The maximum travel distance the facility shall undertake, at no cost to the resident, as addressed by the resident written agreement, to secure/provide health care for resident. Local transportation shall be based on a reasonable assessment of the proximity of customary health care resources in the region, *e.g.*, nearest hospitals, physicians and other health care providers, and appropriate consideration of resident preferences.

HH. Medication. A substance that has therapeutic effects, including, but not limited to, legend, nonlegend, herbal products, over-the counter, nonprescription, vitamins, and nutritional supplements, etc.

II. Neglect. The failure or omission of a direct care staff member or direct care volunteer to provide the care, goods, or services necessary to maintain the health or safety of a resident including, but not limited to, food, clothing, medicine, shelter, supervision, and medical services. Failure to provide adequate supervision resulting in harm to residents, including altercations or acts of assault between residents, may constitute neglect. Neglect may be repeated conduct or a single incident that has produced or could result in physical or psychological harm or substantial risk of death. Noncompliance with regulatory standards alone does not constitute neglect.

JJ. Nonlegend Drug. A drug which may be sold without a prescription and which is labeled for use by the consumer in accordance with the requirements of the laws of this State and the Federal government.

KK. Nursing Home. A facility with an organized nursing staff to maintain and operate organized facilities and services to accommodate two (2) or more unrelated individuals over a period exceeding twenty-four (24) hours which is operated either in connection with a hospital or as a freestanding facility for the express or implied purpose of providing intermediate or skilled care for persons who are not in need of hospital care.

LL. Peak Hours. Those hours from 7 a.m. to 7 p.m., or as otherwise approved in writing by the Department.

MM. Personal Care. The provision by the staff members/direct care volunteers of the facility of one or more of the following services, as required by the individual care plan or orders by the physician or other authorized healthcare provider or as reasonably requested by the resident, including:

1. Assisting and/or directing the resident with activities of daily living;
2. Being aware of the resident's general whereabouts, although the resident may travel independently in the community;
3. Monitoring of the activities of the resident while on the premises of the residence to ensure his/her health, safety, and well-being.

NN. Personal Monies. All monies which are available to the resident for his/her personal use, including family donations.

OO. Physical Examination. An examination of a resident by a physician or other authorized healthcare provider which addresses those issues identified in Section 1101 of this regulation.

PP. Physician. An individual currently licensed to practice medicine by the S.C. Board of Medical Examiners.

QQ. Physician Assistant. An individual currently licensed as such by the S.C. Board of Medical Examiners.

RR. Private Sitter. A private contractor not associated with or employed by the facility with whom the resident or the resident's responsible party contracts to provide sitter or companion services.

SS. Quality Improvement Program. The process used by a facility to examine its methods and practices of providing care/services, identify the ways to improve its performance, and take actions that result in higher quality of care/services for the facility's residents.

TT. Quarterly. A time period that requires an activity to be performed at least four (4) times a year within intervals ranging from eighty-one to ninety-nine (81 to 99) days.

UU. Related/Relative. This degree of kinship is considered "within the third degree of consanguinity," *e.g.*, a spouse, son, daughter, sister, brother, parent, aunt, uncle, niece, nephew, grandparent, great-grandparent, grandchild, or great-grandchild.

VV. Repeat Violation. The recurrence of a violation cited under the same section of the regulation within a 36-month period. The time-period determinant of repeat violation status is applicable in instances when there are ownership changes.

WW. Resident. Any individual, other than staff members/volunteers or owner and their family members, who resides in a facility.

XX. Resident Room. An area enclosed by four ceiling high walls that can house one or more residents of the facility.

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YY. Respite Care. Short-term care (a period of six weeks or less) provided to an individual to relieve the family members or other persons caring for the individual, but for not less than twenty-four (24) hours.

ZZ. Responsible Party. A person who is authorized by law to make decisions on behalf of a resident, to include, but not be limited to, a court-appointed guardian (or legal guardian as referred to in the Resident's Bill of Rights) or conservator, or health care or other durable power of attorney.

AAA. Restraint. Any means by which movement of a resident is inhibited, i.e., physical, mechanical, chemical. In addition, devices shall be considered a restraint if a resident is unable to easily release from the device.

BBB. Revocation of License. An action by the Department to cancel or annul a facility license by recalling, withdrawing, or rescinding its authority to operate.

CCC. Risk Assessment. An initial and ongoing evaluation of the risk for transmission of *M. tuberculosis* in a particular healthcare setting. To perform a risk assessment, the following factors shall be considered: the community rate of TB, number of TB patients encountered in the setting, and the speed with which patients with TB disease are suspected, isolated, and evaluated. The TB risk assessment determines the types of administrative and environmental controls and respiratory protection needed for a setting.

DDD. Self-Administration. A procedure by which any medication is taken orally, injected, inserted, or topically or otherwise administered by a resident to himself or herself without prompting. The procedure is performed without assistance and includes removing an individual dose from a previously dispensed and labeled container (including a unit dose container), verifying it with the directions on the label, taking it orally, injecting, inserting, or applying topically or otherwise administering the medication.

EEE. Sponsor. The public agency or individual involved in one or more of the following: protective custody authorized by law, placement, providing ongoing services, or assisting in providing services to a resident(s) consistent with the wishes of the resident or responsible party or specific administrative or court order.

FFF. Staff Member. An adult, to include the administrator, who is a compensated employee of the facility on either a full or part-time basis.

GGG. Suspension of License. An action by the Department requiring a facility to cease operations for a period of time or to require a facility to cease admitting residents, until such time as the Department rescinds that restriction.

HHH. Volunteer. An adult who performs tasks at the facility at the direction of the administrator without compensation.

102. References.

A. The following Departmental publications are referenced in these regulations:

1. R.61-20, *Communicable Diseases*;
2. R.61-25, *Retail Food Establishments*;
3. R.61-51, *Public Swimming Pools*;
4. R.61-58, *State Primary Drinking Water Regulations*;
5. R.61-67, *Standards for Wastewater Facility Construction*;

6. R.61-105, *South Carolina Infectious Waste Management Regulations*;

B. The following non-Departmental publications are referenced within this regulation:

1. Underwriters Laboratories--Fire Resistance Directory;
2. Underwriters Laboratories--Building Materials List;
3. Occupational Safety and Health Act of 1970 (OSHA);
4. Omnibus Adult Protection Act;
5. Alzheimer's Special Care Disclosure Act;
6. Food and Nutrition Board of the National Research Council, National Academy of Sciences;
7. National Sanitation Federation;
8. Guidelines for Preventing the Transmission of *Mycobacterium tuberculosis* in Health-Care Settings, December 30, 2005;
9. U.S. Pharmacopoeia.

C. The Department shall enforce new laws that may change the above-noted standards and at its discretion adopt revisions to the above noted references.

103. License Requirements (II).

A. License. No person, private or public organization, political subdivision, or governmental agency shall establish, operate, maintain, or represent itself (advertise/market) as a community residential care facility in S.C. without first obtaining a license from the Department. The facility shall not admit residents prior to the effective date of the license. When it has been determined by the Department that room, board, and a degree of personal care to two or more adults unrelated to the owner is being provided at a location, and the owner has not been issued a license from the Department to provide such care, the owner shall cease operation immediately and ensure the safety, health, and well-being of the occupants. Current/previous violations of the S.C. Code and/or Department regulations may jeopardize the issuance of a license for the facility or the licensing of any other facility, or addition to an existing facility which is owned/operated by the licensee. The facility shall provide only the care/services it is licensed to provide pursuant to the definitions in Sections 101.L and 101.LL of this regulation. (I)

B. Compliance. An initial license shall not be issued to a proposed facility that has not been previously and continuously licensed under Department regulations until the licensee has demonstrated to the Department that the proposed facility is in substantial compliance with the licensing standards. In the event a licensee who already has a facility/activity licensed by the Department makes application for another facility or increase in licensed bed capacity, the currently licensed facility/activity shall be in substantial compliance with the applicable standards prior to the Department issuing a license to the proposed facility or amended license to the existing facility. A copy of the licensing standards shall be maintained at the facility and accessible to all staff members/volunteers. Facilities shall comply with applicable local, State, and Federal laws, codes, and regulations.

C. Compliance with Structural Standards. Facilities licensed at the time of promulgation of this regulation, shall be allowed to continue utilizing the previously-licensed structure without modification.

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D. Licensed Bed Capacity. No facility that has been authorized to provide a set number of licensed beds, as identified on the face of the license, shall exceed the bed capacity. No facility shall establish new care/services or occupy additional beds or renovated space without first obtaining authorization from the Department. Beds for use of staff members/volunteers are not included in the licensed bed capacity number, provided such beds and locations are so identified and used exclusively by staff members/volunteers. (I)

E. Persons Received in Excess of Licensed Bed Capacity. No facility shall receive for care or services persons in excess of the licensed bed capacity, except in cases of justified emergencies. (I)

EXCEPTION: In the event that the facility temporarily provides shelter for evacuees who have been displaced due to a disaster, then for the duration of that emergency, provided the health, safety, and well-being of all residents are not compromised, it is permissible to temporarily exceed the licensed capacity for the facility in order to accommodate these individuals (See Section 606).

F. Living Quarters for Staff Members. In addition to residents, only staff members, volunteers, or owners of the facility and members of the owner's immediate family may reside in facilities licensed under this regulation. Resident rooms shall not be utilized by any individuals other than facility residents, nor shall bedrooms of staff members/family members of the owner or the licensee be utilized by residents. Staff members/family members of the owner or licensee/volunteers shall not use resident living rooms, recreational areas or dining rooms unless they are on duty.

G. Issuance and Terms of License.

1. A license is issued by the Department and shall be posted in a conspicuous place in a public area within the facility.

2. The issuance of a license does not guarantee adequacy of individual care, services, personal safety, fire safety, or the well-being of any resident or occupant of a facility.

3. A license is not assignable or transferable and is subject to revocation at any time by the Department for the licensee's failure to comply with the laws and regulations of this State.

4. A license shall be effective for a specified facility, at a specific location(s), for a specified period following the date of issue as determined by the Department. A license shall remain in effect until the Department notifies the licensee of a change in that status.

5. Facilities owned by the same entity but which are not located on the same adjoining or contiguous property shall be separately licensed. Roads or local streets, except limited access, *e.g.*, interstate highways, shall not be considered as dividing otherwise adjoining or contiguous property. Facilities owned by the same entity, separate licenses are not required for separate buildings on the same or adjoining grounds where a single level or type of care is provided.

6. Multiple types of facilities on the same premises shall be licensed separately even though owned by the same entity.

7. Facilities may furnish respite care provided compliance with the standards of this regulation are met.

H. Facility Name. No proposed facility shall be named nor shall any existing facility have its name changed to the same or similar name as any other facility licensed in S.C. The Department shall determine if names are similar. If the facility is part of a "chain operation" it shall then have the geographic area in which it is located as part of its name.

I. Application. Applicants for a license shall submit to the Department a complete and accurate application on a form prescribed and furnished by the Department prior to initial licensing and periodically thereafter at intervals determined by the Department. The application includes both the applicant's oath assuring that the contents of the application are accurate/true, and that the applicant will comply with this regulation. The application shall be signed by the owner(s) if an individual or partnership; in the case of a corporation, by two of its officers; or in the case of a governmental unit, by the head of the governmental department having jurisdiction. The application shall set forth the full name and address of the facility for which the license is sought and of the owner in the event his/her address is different from that of the facility, the names of the persons in control of the facility. The Department may require additional information, including affirmative evidence of the applicant's ability to comply with these regulations. Corporations or limited partnerships, limited liability companies or any other organized business entity must be registered with the S.C. Office of the Secretary of State if required to do so by S.C. state law.

J. Licensing Fees. The annual license fee shall be \$10.00 per licensed bed or \$75.00 whichever is greater. Such fee shall be made payable by check or credit card to the Department and is not refundable. Fees for additional beds shall be prorated based upon the remaining months of the licensure year. If the application is denied or withdrawn, a portion of the fee may be refunded based upon the remaining months of the licensure year, or \$75.00 whichever is lesser.

K. Late Fee. Failure to submit a renewal application or fee 30 days or more after the license expiration date may result in a late fee of \$75.00 or 25% of the licensing fee amount, whichever is greater, in addition to the licensing fee. Continual failure to submit completed and accurate renewal applications and/or fees by the time-period specified by the Department may result in an enforcement action.

L. License Renewal. For a license to be renewed, applicants shall file an application with the Department, pay a license fee, and shall not be undergoing enforcement actions by the Department. If the license renewal is delayed due to enforcement actions, the renewal license shall be issued only when the matter has been resolved satisfactorily by the Department, or when the adjudicatory process is completed, whichever is applicable.

M. Change of License.

1. A facility shall request issuance of an amended license by application to the Department prior to any of the following circumstances:

- a. Change of ownership;
- b. Change of licensed bed capacity;
- c. Change of facility location from one geographic site to another.

2. Changes in facility name or address (as notified by the post office) shall be accomplished by application or by letter from the licensee.

N. Exceptions to Licensing Standards. The Department has the authority to make exceptions to these standards where the Department determines the health, safety, and wellbeing of the residents are not compromised, and provided the standard is not specifically required by statute.

SECTION 200--ENFORCING REGULATIONS

201. General.

The Department shall utilize inspections, investigations, consultations, and other pertinent documentation regarding a proposed or licensed facility in order to enforce this regulation.

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202. Inspections/Investigations.

A. Inspections by the Department shall be conducted prior to initial licensing of a facility and subsequent inspections conducted as deemed appropriate by the Department. (I)

B. All facilities are subject to inspection/investigation at any time without prior notice by individuals authorized by S.C. Code of Laws. When staff members/volunteers/residents are absent, the facility shall provide information to those seeking legitimate access to the facility, including visitors, as to the expected return of staff members/volunteers/residents. (I)

C. Individuals authorized by S.C. law shall be allowed to enter the facility for the purpose of inspection and/or investigation and granted access to all properties and areas, objects, and records in a timely manner, and have the authority to require the facility to make photocopies of those documents required in the course of inspections or investigations. Photocopies shall be used only for purposes of enforcement of regulations and confidentiality shall be maintained except to verify the identity of individuals in enforcement action proceedings. Physical area of inspections shall be determined by the extent to which there is potential impact/affect upon residents as determined by the inspector, e.g., flammable liquids unsecured in a staff member's bedroom, attic, or basement. (I)

D. When there is noncompliance with the licensing standards, the facility shall submit an acceptable written plan of correction to the Department that shall be signed by the administrator and returned by the date specified on the report of inspection/investigation. The written plan of correction shall describe: (II)

1. The actions taken to correct each cited deficiency;
2. The actions taken to prevent recurrences (actual and similar);
3. The actual or expected completion dates of those actions.

E. Reports of inspections or investigations conducted by the Department, including the facility response, shall be provided to the public upon written request with the redaction of the names of those individuals in the report as provided by 1976 Code Sections 44-7-310 and 44-7-315.

F. In accordance with 1976 Code Section 44-7-270, the Department may charge a fee for plan inspections, construction inspections, and licensing inspections.

203. Consultations.

Consultations shall be provided by the Department as requested by the facility or as deemed appropriate by the Department.

SECTION 300--ENFORCEMENT ACTIONS

301. General.

When the Department determines that a facility is in violation of any statutory provision, rule, or regulation relating to the operation or maintenance of such facility, the Department, upon proper notice to the licensee, may impose a monetary penalty, deny, suspend, or revoke licenses.

302. Violation Classifications.

Violations of standards in this regulation are classified as follows:

A. Class I violations are those that the Department determines to present an imminent danger to the health, safety, or well-being of the persons in the facility or a substantial probability that death or serious physical harm could result therefrom. A physical condition or one or more practices, means, methods or operations in use in a facility may constitute such a violation. The condition or practice constituting a Class I violation shall be abated or eliminated immediately unless a fixed period of time, as stipulated by the Department, is required for correction. Each day such violation exists after expiration of the time established by the Department shall be considered a subsequent violation.

B. Class II violations are those, other than Class I violations, that the Department determines to have a negative impact on the health, safety or well-being of persons in the facility. The citation of a Class II violation shall specify the time within which the violation is required to be corrected. Each day such violation exists after expiration of this time shall be considered a subsequent violation.

C. Class III violations are those that are not classified as Class I or II in these regulations or those that are against the best practices as interpreted by the Department. The citation of a Class III violation shall specify the time within which the violation is required to be corrected. Each day such violation exists after expiration of this time shall be considered a subsequent violation.

D. The notations, “(I)” or “(II)” placed within sections of this regulation, indicate those standards are considered Class I or II violations if they are not met, respectively. Failure to meet standards not so annotated are considered Class III violations.

E. In determining an enforcement action the Department shall consider the following factors:

1. Specific conditions and their impact or potential impact on health, safety or well-being of the residents including, but not limited to: deficiencies in medication management, such as evidence that residents are not routinely receiving their prescribed medications; serious waste water problems, such as toilets not operating or open sewage covering the grounds; housekeeping/maintenance/fire and life safety-related problems that pose a health threat to the residents; power/water/gas or other utility and/or service outages; residents exposed to air temperature extremes that jeopardize their health; unsafe condition of the building/structure such as a roof in danger of collapse; indictment of an administrator for malfeasance or a felony, which by its nature, such as drug dealing, indicates a threat to the residents; direct evidence of abuse, neglect, or exploitation; lack of food or evidence that the residents are not being fed properly; no staff available at the facility with residents present; unsafe procedures/treatment being practiced by staff; (I)

2. Repeated failure of the licensee/facility to pay assessed charges for utilities and/or services resulting in repeated or ongoing threats to terminate the contracted utilities and/or services. (II)

3. Efforts by the facility to correct cited violations;

4. Overall conditions of the facility;

5. History of compliance; and

6. Any other pertinent conditions that may be applicable to current statutes and regulations.

F. When imposing a monetary penalty, the Department may invoke 1976 Code Section 44-7-320 (C) to determine the dollar amount or may utilize the following schedule:

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Frequency of violation of standard within a 36-month period:

MONETARY PENALTY RANGES

FREQUENCY	CLASS I	CLASS II	CLASS III
1st	\$500-1,500	\$300-800	\$100-300
2nd	1000-3000	500-1500	300-800
3rd	2000-5000	1000-3000	500-1500
4th	5000	2000-5000	1000-3000
5th	5000	5000	2000-5000
6th	5000	5000	5000

SECTION 400--POLICIES AND PROCEDURES

401. General (II).

Written policies and procedures addressing each section of this regulation regarding resident care, rights, and the operation of the facility shall be developed and implemented, and revised as required in order to accurately reflect actual facility operation. The policies and procedures shall address the provision of any special care offered by the facility which would include how the facility shall meet the specialized needs of the affected residents such as Alzheimer's disease and/or related dementia, physically/developmentally disabled, in accordance with any laws which pertain to that service offered, *e.g.*, Alzheimer's Special Care Disclosure Act. Facilities shall establish a time-period for review of all policies and procedures and such reviews shall be documented. These policies and procedures shall be accessible and available to staff at all times, and shall be available to residents and/or their responsible parties upon their requests for inspection.

SECTION 500--STAFF/TRAINING

501. General (II).

A. Before being employed or contracted as a staff member/direct care volunteer by a licensed community residential care facility, a person shall undergo a criminal background check pursuant to 1976 Code Section 44-7-2910. Staff members/direct care volunteers/private sitters of the facility shall not have a prior conviction or pled no contest (*nolo contendere*) to abuse, neglect, or exploitation of a child or a vulnerable adult as defined in 1976 Code Section 43-35-10, *et seq.* (I)

B. Staff members/volunteers shall be provided the necessary training to perform the duties for which they are responsible in an effective manner. (I)

C. No supervision/care/services shall be provided to individuals who are not residents of the facility other than children of owners of the facility who are residing in the facility. Minimum staffing requirements shall be applied in instances where children of owners reside in the facility, i.e., children of owners shall be considered as residents in the staff/resident ratio. (I)

D. Staff members/direct care volunteers shall have at least the following qualifications: (I)

1. Capable of rendering care/services to residents;
2. Sufficient education to be able to perform their duties, and to speak, read, and write English;
3. Demonstrate a working knowledge of applicable regulations.

E. There shall be accurate and current information maintained regarding all staff members/volunteers of the facility, to include at least address, phone number, and personal/work/training background.

F. All staff members/direct care volunteers shall be assigned certain duties and responsibilities which shall be in writing and in accordance with the individual's capability.

G. When a facility engages a source other than the facility to provide services, normally provided by the facility, e.g., staffing, training, recreation, food service, professional consultant, maintenance, transportation, there shall be a written agreement with the source that describes how and when the services are to be provided, the exact services to be provided, and that these services are to be provided by qualified individuals. The source shall comply with this regulation in regard to resident care, services, and rights.

502. Administrator (II).

A. The facility administrator shall be licensed as a CRCF administrator in accordance with 1976 Code Section 44-7-260.

B. The administrator shall exercise judgment that reflects that s/he is capable of meeting the responsibilities involved in operating a facility to ensure that it is in compliance with these regulations, and shall demonstrate adequate knowledge of these regulations.

C. A staff member shall be designated in writing to act in the absence of the administrator, e.g., a listing of the lines of authority by position title, including the names of the persons filling these positions.

503. Staff (I).

A. There shall be a staff member actively on duty and present in the facility at all times that the facility is occupied by residents and to whom the residents can immediately report injuries, symptoms of illness, or emergencies. This staff member shall recognize and report significant changes in the physical or mental condition of each resident and shall ensure that appropriate action is taken.

B. The number and qualifications of staff members/direct care volunteers shall be determined by the number and condition of the residents. There shall be sufficient staff members/direct care volunteers to provide supervision, direct care and basic services for all residents. The minimum number of staff members/direct care volunteers that shall be maintained in all facilities:

1. In each building, there shall be at least one staff member/direct care volunteer for each eight (8) residents or fraction thereof on duty during all periods of peak hours.

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2. In each building, during non-peak hours, there shall be at least one staff member/volunteer on duty for each thirty (30) residents or fraction thereof. A staff member/volunteer shall be awake and dressed at all times. Staff member(s)/volunteer(s) shall be able to appropriately respond to resident needs during non-peak hours.

3. In facilities that are licensed for more than 10 beds, and the facility is of multi-floor design, there shall be a staff member available on each floor at all times residents are present on that floor.

C. The facility shall maintain documentation to ensure the facility meets Sections 503.B.1 and 503.B.2.

504. Inservice Training (I).

A. Documentation of all inservice training shall be signed and dated by both the individual providing the training and the individual receiving the training. The following training shall be provided by appropriate resources, *e.g.*, licensed/registered/certified persons, books, electronic media, *etc.*, to all staff members/direct care volunteers and private sitters in the context of their job duties and responsibilities, prior to resident contact and at a frequency determined by the facility, but at least annually unless otherwise specified by certificate, *e.g.*, cardiopulmonary resuscitation (CPR):

1. Basic first-aid to include emergency procedures as well as procedures to manage/care for minor accidents or injuries;

2. Procedures for checking and recording vital signs (for designated staff members only);

3. Management/care of persons with contagious and/or communicable disease, *e.g.*, hepatitis, tuberculosis, HIV infection;

4. Medication management including storage, administration, receiving orders, securing medications, interactions, and adverse reactions;

5. Depending on the type of residents, care of persons specific to the physical/mental condition being cared for in the facility, *e.g.*, dementia; cognitive disability; mental illness; or aggressive, violent, and/or inappropriate behavioral symptoms *etc.*, to include communication techniques (cueing and mirroring), understanding and coping with behaviors, safety, activities, *etc.*

6. Use of restraint techniques;

7. OSHA standards regarding blood-borne pathogens;

8. Cardiopulmonary resuscitation for designated staff members/direct care volunteers to ensure that there is a certified staff member/direct care volunteer present whenever residents are in the facility;

9. Confidentiality of resident information and records;

10. Bill of Rights for Long-Term Care Facilities per 1976 Code Section 44-81-10, *et seq.*;

11. Fire response training within twenty-four (24) hours of their first day on the job in the facility (See Section 1503);

12. Emergency procedures/disaster preparedness within twenty-four (24) hours of their first day on the job in the facility (See Section 1400); and

13. Activity training (for the designated staff only).

B. Job Orientation.

All new staff members/direct care volunteers shall have documented orientation to the organization and environment of the facility, specific duties and responsibilities of staff members/direct care volunteers, and residents' needs within twenty-four (24) hours of their first day on the job in the facility.

505. Health Status (I).

A. All staff members/direct care volunteers who have contact with residents, including food service staff members/direct care volunteers, shall have a health assessment within 12 months prior to initial resident contact. The health assessment shall include tuberculin skin testing as described in Section 1702.

B. If a staff member/direct care volunteer is working at multiple facilities operated by the same licensee, copies of records for tuberculin skin testing and the pre-employment health assessment shall be accessible at each facility. For any other staff member/direct care volunteer, a copy of the tuberculin skin testing shall be acceptable provided the test had been completed within three months prior to resident contact.

506. Private Sitters (II).

A. Unless the written agreement (See Section 901.A) between a resident and the facility prohibits the use of private sitters, the facility shall establish a formalized private sitter program directed by a facility staff member so that residents or their responsible party may contract for sitter services.

1. The facility shall assure that private sitters have been chosen in accordance with the Residents Bill of Rights.

2. Facilities allowing the use of private sitters shall establish written policies and procedures for private sitters.

3. Prior to resident contact, the private sitter shall have documented orientation to the organization and environment of the facility. Orientation to the facility shall consist, at least, of the following:

- a. Residents' rights;
- b. Confidentiality;
- c. Disaster preparedness;
- d. Emergency response procedures;
- e. Safety procedures and precautions; and
- f. Infection control.

4. There shall be accurate current information maintained regarding private sitters including:

- a. Name, address and telephone number;
- b. Documentation of orientation to the facility, including residents' rights, regulation compliance, policies and procedures, training, and duties;
- c. Date of initial resident contact may be maintained by the facility, if applicable.

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B. The facility shall maintain the following documentation regarding private sitters:

1. A health assessment (in accordance with Section 505.A) within twelve (12) months prior to initial resident contact or his or her first day working as a private sitter;

2. A criminal record check (See Section 501.B.) completed prior to working as a private sitter;

3. Determination of TB status (See Section 1702.D.) prior to initial resident contact or his or her first day working as a private sitter.

C. Private sitters shall not be included in the minimum staffing requirements of Section 503.B.

D. Private sitters shall sign in and sign out with facility staff upon entering or leaving the facility. Private sitters shall display identification in accordance with facility policies and procedures that is visible at all times while on duty.

SECTION 600--REPORTING

601. Accidents and/or Incidents.

A. A facility shall maintain a record of each accident and/or incident, including usage of mechanical/physical restraints, involving residents, staff members or volunteers, occurring in the facility or on the facility grounds. A facility's record of each accident and/or incident shall be documented, reviewed, investigated, and if necessary, evaluated in accordance with facility policies and procedures, and retained by the facility for six (6) years after the resident stops receiving services.

B. A facility shall report every serious accident and/or incident that results in resident's death or significant loss of function or damage to a body structure, not related to the natural course of a resident's illness or underlying condition or normal course of treatment, and resulting from an accident and/or incident occurring to resident within the facility or on the facility grounds. Serious accidents and/or incidents requiring reporting include, but are not limited to:

1. Crime(s) against resident;
2. Confirmed or suspected cases of abuse, neglect, or exploitation;
3. Medication error with adverse reaction;
4. Hospitalization as a result of the accident and/or incident;
5. Severe hematoma, laceration or burn requiring medical attention or hospitalization;
6. Fracture of bone or joint;
7. Severe injury involving use of restraints;
8. Attempted suicide; or
9. Fire.

C. A facility shall immediately report every serious accident and/or incident to the attending physician, next-of-kin or responsible party, and the Department via telephone, email or facsimile within twenty-four (24) hours of the serious accident and/or incident.

D. A facility shall submit a written report of its investigation of every serious accident and/or incident to the Department within five (5) days of the serious accident and/or incident. A facility's written report to the Department shall provide at a minimum:

1. Facility name;
2. License number;
3. Type of accident and/or incident;
4. Date accident and/or incident occurred;
5. Number of residents directly injured or affected;
6. Resident record number or last four (4) digits of Social Security Number;
7. Resident age and sex;
8. Number of staff directly injured or affected;
9. Number of visitors directly injured or affected;
10. Name(s) of witness(es);
11. Identified cause of accident and/or incident;
12. Internal investigation results if cause unknown; and
13. Brief description of the accident and/or incident including the location of occurrence and treatment of injuries.

E. A facility shall retain a report of every serious accident and/or incident with all of the information provided to the Department and the names, injuries, and treatments associated with each resident, staff and/or visitor involved. A facility shall retain all serious accident and/or incident records for six (6) years after the resident stops receiving services.

F. The administrator or his or her designee shall report every incident involving a resident that leaves the premises for more than twenty-four (24) hours without notice to staff members of intent to leave to local law enforcement, the resident's responsible party, and the Department. The administrator or his or her designee shall immediately notify local law enforcement and the responsible party by telephone when a cognitively impaired resident leaves the premises for any amount of time without notice to staff members.

G. The administrator or his or her designee shall report changes in a resident's condition, to the extent that serious health concerns and/or injuries, *e.g.*, fracture, behavioral changes or heart attack, are evident, to the attending physician and the responsible party immediately, not to exceed twenty-four (24) hours, consistent with the severity or urgency of the condition in accordance with facility policies and procedures. (I)

H. The administrator or his or her designee shall report abuse and suspected abuse, neglect, or exploitation of residents to the South Carolina Long-Term Care Ombudsman Program in accordance with 1976 Code Section 43-35-25.

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602. Fire/Disasters (II).

A. The administrator or his or her designee shall notify the Department via telephone or email of any fire in the facility and submit to the Department a complete written report including fire department reports, if any within seventy-two (72) hours of the occurrence of the fire.

B. The administrator or his or her designee shall report any natural disaster or fire requiring displacement of the residents or jeopardizing or potentially jeopardizing the safety of the residents to the Department via telephone or email immediately, with a complete written report including the fire department or other reporting authority (as applicable) submitted within seventy-two (72) hours.

603. Communicable Diseases and Animal Bites (I).

All cases of diseases and animal bites which are required to be reported to the appropriate county health department shall be accomplished in accordance with R.61-20.

604. Administrator Change.

The licensee shall notify the Department via telephone or email within seventy-two (72) hours of any change in administrator status. The licensee shall provide the Department in writing within ten (10) days the name of the newly-appointed administrator, the effective date of the appointment, copy of the administrator's license and the hours each day the individual will be working as the administrator of the facility.

605. Accounting of Controlled Substances (II).

Any facility registered with the Department's Bureau of Drug Control and the United States Drug Enforcement Agency shall report any theft or loss of controlled substances to local law enforcement and to the Department's Bureau of Drug Control upon discovery of the loss/theft.

606. Emergency Placement Notification.

In instances where evacuees have been relocated, the Department shall be notified by the relocating facility in writing no later than the following workday, the name of the individuals relocated and the name, address and phone number of the sheltering facility(ies) to which the residents have been relocated.

607. Facility Closure.

A. Prior to the permanent closure of a facility, the licensee shall notify the Department in writing of the intent to close and the effective closure date. Within 10 days of the closure, the facility shall notify the Department of the provisions for the maintenance of the records, the identification of those residents displaced, the relocated site, and the dates and amounts of resident refunds. On the date of closure, the license shall be returned to the Department.

B. In instances where a facility temporarily closes, the licensee shall notify the Department in writing within fifteen (15) days prior to temporary closure. In the event of temporary closure due to an emergency, the facility shall notify the Department within twenty-four (24) hours of the closure via telephone, email or facsimile. At a minimum this notification shall include, but not be limited to: the reason for the temporary closure, the location where the residents have been/will be transferred, the manner in which the records are being stored, and the anticipated date for reopening. The Department shall consider, upon appropriate review, the necessity of inspecting and determining the applicability of current construction standards of the facility prior to its reopening. If the facility is closed for a period longer than one year, and there is a desire to re-open, the facility shall re-apply to the Department for licensure and shall be subject to all licensing requirements at the time of that application, including construction-related requirements for a new facility.

608. Zero Census.

In instances when there have been no residents in a facility for any reason for a period of 90 days or more, the facility shall notify the Department in writing that there have been no admissions, no later than the 100th day following the date of departure of the last active resident. At the time of that notification, the Department shall consider, upon appropriate review of the situation, the necessity of inspecting the facility prior to any new and/or re-admissions to the facility. The facility shall still submit an application and pay the licensing fee to keep the license active, even though the facility is at zero census or temporarily closed. If the facility has no residents for a period longer than one year, and there is a desire to admit a resident, the facility shall re-apply to the Department for licensure and shall be subject to all licensing requirements at the time of that application, including construction-related requirements for a new facility.

SECTION 700--RESIDENT RECORDS

701. Content (II).

A. The facility shall initiate and maintain on site an organized record for each resident. The record shall contain sufficient documented information to identify the resident and the agency and/or person responsible for each resident; support the diagnosis, secure the appropriate care/services (as needed); justify the care/services provided to include the course-of-action taken and results; the symptoms or other indications of sickness or injury; changes in physical/mental condition; the response/reaction to care, medication, and diet provided; and promote continuity of care among providers, consistent with acceptable standards of practice. All entries shall be written legibly in ink, typed or electronic media, and signed, and dated.

B. Specific entries/documentation shall include at a minimum:

1. Consultations by physicians or other authorized healthcare providers;
2. Orders and recommendations for all medication, care, services, procedures, and diet from physicians or other authorized healthcare providers, which shall be completed prior to, or at the time of admission, and subsequently, as warranted. Verbal orders received shall be documented and include the date/time of receipt of the order, description of the order, and identification of the individual receiving the order;
3. Care/services provided, e.g., hospice, home health;
4. Medications administered and procedures followed if an error is made;
5. Special procedures and preventive measures performed;
6. Notes of observation. In instances that involve significant changes in a resident's medical condition and/or the occurrence of a serious incident, notes of observation shall be documented at least daily until the condition is stabilized and/or the incident is resolved. In all other instances, notes of observation for residents shall be documented at least monthly;
7. Time, circumstances, and condition of discharge, transfer, or death;
8. Provisions for routine and emergency medical care, to include the name and telephone number of the resident's physician, plan for payment, and plan for securing medications;
9. Special information, e.g., do-not-resuscitate orders, allergies, power of attorney, responsible party, etc.

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10. Photograph of resident. Resident photographs shall be at a minimum two and one half inches by three and one half inches (2 ½ by 3 ½ inches) in size, dated and no more than twenty-four (24) months old unless significant changes in appearance have occurred necessitating a more recent photograph.

702. Assessment (II).

A written assessment of the resident in accordance with Section 101.H shall be conducted by a direct care staff member as evidenced by his or her signature and date within a time-period determined by the facility, but no later than 72 hours after admission.

703. Individual Care Plan (II).

A. Using the written assessment, the facility shall develop within seven (7) days of admission an ICP with participation of the resident, administrator (or designee), and/or the sponsor or responsible party when appropriate, as evidenced by their signatures and date. The ICP shall be reviewed and/or revised as changes in resident needs occur, but not less than semi-annually with the resident, administrator (or designee), and/or the sponsor or responsible party as evidenced by their signatures and date.

B. The ICP shall describe:

1. The needs of the resident, including the activities of daily living for which the resident requires assistance, i.e., what assistance, how much, who will provide the assistance, how often, and when;
2. Requirements and arrangements for visits by or to physicians or other authorized healthcare providers;
3. Advance directives/healthcare power of attorney, as applicable;
4. Recreational and social activities which are suitable, desirable, and important to the well-being of the resident;
5. Nutritional needs.

C. The ICP shall delineate the responsibilities of the sponsor and of the facility in meeting the needs of the resident, including provisions for the sponsor to monitor the care and the effectiveness of the facility in meeting those needs. Included shall be specific goal-related objectives based on the needs of the resident as identified during the assessment phase, including adjunct support service needs, other special needs, and the methods for achieving objectives and meeting needs in measurable terms with expected achievement dates.

704. Record Maintenance.

A. The licensee shall provide accommodations, space, supplies, and equipment adequate for the protection and storage of resident records.

B. When a resident is transferred from one facility to another, a transfer summary to include at a minimum, copies of the most recent physical examination, the two-step tuberculosis test, the ICP and medication administration record (MAR), shall be forwarded to the receiving facility at the time of transfer or immediately after the transfer if the transfer is of an emergency nature. The transfer summary shall include the date sent and the signature of the transferring facility staff member. (I)

C. The resident record is confidential and shall be made available only to individuals authorized by the facility and/or the S.C. Code of Laws. (II)

D. Records generated by organizations/individuals contracted by the facility for care/services shall be maintained by the facility that has admitted the resident.

E. The facility shall determine the medium in which information is stored.

F. Upon discharge of a resident, the record shall be completed within 30 days, and filed in an inactive/closed file maintained by the licensee. Prior to the closing of a facility for any reason, the licensee shall arrange for preservation of records to ensure compliance with these regulations. The licensee shall notify the Department, in writing, describing these arrangements and the location of the records.

G. Records of residents shall be maintained for at least six (6) years following the discharge of the resident. Other regulation-required documents, e.g., fire drills, activity schedules, etc., shall be retained at least 12 months or since the last Department general inspection, whichever is the longer period.

H. Records of current residents are the property of the facility and shall be maintained at the facility and shall not be removed without court order.

EXCEPTION: When a resident moves from one licensed facility to another within the same provider network (same licensee), the original record may follow the resident; the sending facility shall maintain documentation of the resident’s transfer/discharge date and identification information. In the event of change of ownership, all active resident records or copies of active resident records shall be transferred to the new owner(s).

SECTION 800--ADMISSION/RETENTION

801. General (I).

A. Individuals seeking admission shall be identified as appropriate for the level of care, services, or assistance offered. The facility shall establish admission criteria that are consistently applied and comply with local, State, and Federal laws and regulations.

B. The facility shall admit and retain only those persons appropriate for placement in a CRCF in compliance with the standards of this regulation.

C. The facility shall not admit or retain any of the following persons in compliance with the standards of this regulation:

1. Any person who is likely to endanger him/herself or others as determined by a physician or other authorized healthcare provider;
2. Any person other than an adult; (II)
3. Any person needing hospitalization or nursing home care;
4. Any person needing daily skilled monitoring/observation due to an unstable or complex medical condition, e.g., brittle diabetes, dialysis patients with complications such as infections in the blood;
5. Any person needing medications that require frequent dosage adjustment, regulation and/or monitoring, e.g. diabetics receiving sliding scale insulin;
6. Any person needing intravenous medications or fluids, regular intra-muscular and subcutaneous injections by staff or by responsible party. This does not include injections administered on a part-time or intermittent basis by non-staff licensed nurses. Routine injection(s) of insulin scheduled daily or less frequently are permitted;

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7. Any person needing care of urinary catheter that cannot be managed independently by the resident;

8. Any person needing treatment of stage 2, 3 or 4 decubitus ulcers, or multiple pressure sores or other widespread skin disorder (important considerations include: signs of infection, full thickness tissue loss, or requirement of sterile technique);

9. Any person needing nasogastric tube feeding or having to be fed by a syringe or straw due to difficulties in swallowing. Gastronomy tube feedings that cannot be managed independently by the resident;

10. Any person needing suctioning of the nose and/or mouth;

11. Any person needing tracheostomy or sterile care of the tracheostomy that cannot be managed independently by the resident; or

12. Any person receiving oxygen for the first time, which requires adjustment and evaluation of oxygen concentration.

D. The facility shall not retain any of the following persons in compliance with the standards of this regulation:

1. Any person who has a serious aggressive, violent or socially inappropriate behavioral symptoms which cannot be controlled or improved in the facility.

2. Any person who has a dependency in all activities of daily living for more than fourteen (14) consecutive days, *e.g.*, bedridden; incapable of locomotion; unable to transfer; totally incontinent of urinary and/or bowel function; must be totally bathed and dressed and toileted and needs extensive assistance to eat. The facility shall develop a plan for transfer on the fifteenth (15th) day of total dependency if the resident is not improving.

3. Any person needing the continuous daily attention of a licensed nurse, *e.g.* care of a urinary catheter that cannot be managed independently, treatment of stage 2, 3, or 4 decubitus ulcers. Nursing care may be furnished to residents in need of short-term intermittent nursing care (no more than fourteen (14) consecutive days) while convalescing from illness or injury, provided the nursing services, *e.g.*, the utilization of a home health nurse for sterile dressing changes or for observation related to a surgical site, are furnished by a licensed nurse facility staff member or a home health nurse.

E. Residents whose condition changes to a degree that nursing home care, the daily attention of a nurse, or hospitalization may be required, or have a contagious disease, shall be examined by a physician or other authorized healthcare provider regarding the possible necessity for transfer to a facility where the resident's eligibility for admission is appropriate.

F. When the provision of care/services in the facility, combined with other appropriately licensed services, in accordance with facility policy, *e.g.*, hospice, home health, as may be ordered by a physician or other authorized healthcare provider, does not meet the needs of the resident, or if any resident becomes in need of continuous medical or nursing supervision, or if the facility does not have the capability to provide necessary care/services, the resident shall be transferred within 30 days to a location which shall meet those needs. The administrator shall coordinate this transfer with the resident, next-of-kin/responsible party, and sponsor.

SECTION 900--RESIDENT CARE/SERVICES

901. General.

A. Prior to admission, there shall be a written agreement between the resident, and/or his/her responsible party, and the facility. The agreement shall be revised upon any changes and shall include at least the following:

1. An explanation of the specific care, services, and/or equipment provided by the facility, e.g., administration of medication, provision of special diet as necessary, assistance with bathing, toileting, feeding, dressing, and mobility;
2. Disclosure of fees for all care, services, and/or equipment provided;
3. Advance notice requirements of not less than thirty (30) days to change fee amount for care, services and/or equipment;
4. Refund policy to include when monies are to be forwarded to resident upon discharge/transfer/relocation;
5. The date a resident is to receive his/her personal needs allowance;
6. The amount a resident receives for his/her personal needs allowance;
7. Transportation policy;
8. Discharge/transfer provisions to include the conditions under which the resident may be discharged and the agreement terminated, and the disposition of personal belongings;
9. Documentation of the explanation of the Resident's Bill of Rights and the grievance procedure. (II)

B. The facility shall coordinate with residents to provide care, including diet, services, i.e., routine and emergency medical care, podiatry care, dental care, counseling and medications, as ordered by a physician or other authorized healthcare provider. Such care shall be provided and coordinated among those responsible during the process of providing such care/services and modified as warranted based upon any changing needs of the resident. Such care and services shall be detailed in the ICP. (I)

C. The facility shall render care and services in accordance with orders from physicians or other authorized healthcare providers and take precautions for residents with special conditions, e.g., pacemakers, wheelchairs, dementia, etc. The facility shall assist in activities of daily living as needed and appropriate. Each facility is required to provide only those activities of daily living and only to the levels specifically designated in the written agreement between the resident, and/or his/her responsible party/guardian, and the facility. (I)

D. The facility shall provide necessary items and assistance, if needed, for residents to maintain their personal cleanliness, e.g., soap. (II)

E. The provision of care/services to residents shall be guided by the recognition of and respect for cultural differences to assure reasonable accommodations shall be made for residents with regard to differences, such as, but not limited to, religious practice and dietary preferences.

F. The facility shall make opportunities for participation in religious services available. Reasonable assistance in obtaining pastoral counseling shall be provided by the facility upon request by the resident.

G. In the event of closure of a facility for any reason, the facility shall ensure continuity of care/services by promptly notifying the resident's attending physician or other authorized healthcare provider, and responsible party, and arranging for referral to other facilities at the direction of the physician or other authorized healthcare provider. (II)

902. Fiscal Management (II).

A. Provisions shall be made for safeguarding money and valuables for those residents who request this assistance.

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B. Residents shall manage their own funds whenever possible.

C. Only residents may endorse checks made payable to them, unless a legally constituted authority has been authorized to endorse their checks.

D. In situations where a resident becomes unable to manage his/her funds, the administrator shall contact a family member or the county probate court regarding the need for a court-appointed guardian or conservator. The licensee, administrator, sponsor, or any of their relatives shall not be appointed guardian or conservator.

E. Upon written request of the resident, the administrator may maintain the personal monies for the resident.

F. The licensee may be designated payee for a resident.

G. There shall be an accurate accounting of residents' personal monies and written evidence of purchases by the facility on behalf of the residents to include a record of items/services purchased, written authorization from residents of each item/service purchased, and an accounting of all monies paid to the facility for care and services. Personal monies include all monies, including family donations. No personal monies shall be given to anyone, including family members, without written consent of the resident. If a resident's money is given to anyone by the facility, a receipt shall be obtained.

H. A report of the balance of resident finances shall be physically provided to each resident by the facility on a quarterly basis in accordance with the Resident's Bill of Rights, regardless of the balance amount, *e.g.*, zero balance. Documentation of quarterly reports to residents shall be readily available for review.

903. Recreation.

A. The facility shall offer a variety of recreational programs to suit the interests and physical/cognitive capabilities of the residents that choose to participate. The facility shall provide recreational activities that provide stimulation; promote or enhance physical, mental, and/or emotional health; are age-appropriate; and are based on input from the residents and/or responsible party, as well as information obtained in the initial assessment.

B. There shall be at least one different structured recreational activity provided daily each week that shall accommodate residents' needs/interests/capabilities as indicated in the ICP's.

C. The facility shall designate a staff member responsible for the development of the recreational program, to include responsibility for obtaining and maintaining recreational supplies. At least one staff person shall be responsible for providing/coordinating recreational activities for the residents.

D. The recreational supplies shall be adequate and shall be sufficient to accomplish the activities planned.

E. A current month's schedule shall be posted in order for residents to be made aware of activities offered. This schedule shall include activities, dates, times, and locations. Residents may choose activities and schedules consistent with their interests and physical, mental, and psychosocial well-being. If a resident has dementia and is unable to choose for him/herself, staff members/volunteers shall encourage participation and assist when deemed necessary.

904. Transportation (I).

The facility shall secure or provide transportation for residents when a physician's services are needed. Local (as defined by the facility) transportation for medical reasons shall be provided by the facility at no additional charge to the resident. If a physician's services are not immediately available and the resident's condition requires immediate medical attention, the facility shall provide or secure transportation for the resident to the

appropriate health care providers such as, but not limited to, physicians, dentists, physical therapists, or for treatment at renal dialysis facilities.

905. Safety Precautions/Restraints (I).

A. Periodic or continuous mechanical, physical or chemical restraints during routine care of a resident shall not be used, nor shall residents be restrained for staff convenience or as a substitute for care/services. However, in cases of extreme emergencies when a resident is a danger to him/herself or others, mechanical and/or physical restraints may be used as ordered by a physician or other authorized healthcare provider, and until appropriate medical care can be secured.

EXCEPTION: Antipsychotic medication administered to residents with Alzheimer’s disease or dementia is not considered a chemical restraint if the resident has been prescribed the antipsychotic medication in a physician order and/or PRN and the resident only receives the prescribed dosage of medication as indicated on the physician order and/or PRN and every medication administration is recorded pursuant to the requirements of this regulation.

B. Only those devices specifically designed as restraints may be used. Makeshift restraints shall not be used under any circumstance.

C. Emergency restraint orders shall specify the reason for the use of the restraint, the type of restraint to be used, the maximum time the restraint may be used, and instructions for observing the resident while restrained, if different from the facility’s written procedures. Residents certified by a physician or other authorized healthcare provider as requiring restraint for more than 24 hours shall be transferred to an appropriate facility.

D. During emergency restraint, residents shall be monitored at least every 15 minutes, and provided with an opportunity for motion and exercise at least every 30 minutes. Prescribed medications and treatments shall be administered as ordered, and residents shall be offered nourishment and fluids and given bathroom privileges.

906. Discharge/Transfer.

A. Residents shall be transferred or discharged only as appropriate per the provisions of the Resident’s Bill of Rights. In cases of medical emergencies, immediate transfer is permissible; however, the family member, and the sponsor, if any, shall be notified at the earliest practical hour, but not later than 24 hours following the transfer. (II)

B. Prior to discharge, the resident, his/her appropriate family member, and the sponsor, if any, shall be consulted.

C. Residents shall be transferred or discharged to a location appropriate to the residents needs and abilities. Residents requiring care and/or supervision shall not be transferred/discharged to a location that is not licensed to provide that care. (II)

D. Upon transfer/discharge of a resident, resident information shall be released in a manner that promotes continuity in the care that serves the best interest of the resident.

E. Upon transfer/discharge, the facility shall ensure that medications, as appropriate, personal possessions and funds are released to the resident and/or the receiving facility in a manner that ensures continuity of care/services and maximum convenience of the resident. (II)

SECTION 1000--RIGHTS AND ASSURANCES

1001. General (II).

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A. The facility shall comply with all current Federal, State, and local laws and regulations concerning resident care, resident rights and protections, and privacy and disclosure requirements, e.g., 1976 Section 44-81-10, *et seq.*, Resident's Bill of Rights, Alzheimer's Special Care Disclosure Act, and the Omnibus Adult Protection Act notice, 1976 Code Section 43-35-5, *et seq.* (I)

B. The Resident's Bill of Rights, the Omnibus Adult Protection Act, and other notices as required by law, shall be prominently displayed in public areas of the facility.

C. The facility shall comply with all relevant Federal, State, and local laws and regulations concerning discrimination, e.g., Title VII, Section 601 of the Civil Rights Act of 1964, and insure that there is no discrimination with regard to source of payment in the recruitment, location of resident, acceptance or provision of goods and services to residents or potential residents, provided that payment offered is not less than the cost of providing services.

D. Achieving the highest level of self-care and independence by residents shall be reflected in the manner in which the facility provides/promotes resident care, e.g., residents making their own decisions, selecting a physician or other provider, maintaining personal property, managing finances.

E. Should a facility develop "house rules," the rules shall not be in conflict with the provisions of the Resident's Bill of Rights or other rights/assurances addressed in this regulation.

F. Residents shall be provided the opportunity to provide input into changes in facility operational policies, procedures, services, including "house rules."

G. Residents shall be assured freedom of movement. Residents shall not be locked in or out of their rooms or any common usage areas (e.g., dining, sitting, activity rooms) in the facility, or in or out of the facility building. Exit doors may be equipped with delayed egress locks as permitted by the codes referenced in Section 1902.A. (I)

EXCEPTION: Exit doors may be locked with written approval by the Department and as permitted by the codes referenced in Section 1902.

H. The facility shall develop a grievance/complaint procedure to be exercised on behalf of the residents to enforce the Resident's Bill of Rights which includes the address and phone number of the Department, and a provision prohibiting retaliation should the grievance right be exercised.

I. Care, services, and items provided by the facility, the charges, and those services that are the responsibilities of the resident shall be delineated in writing. The resident shall be made aware of such charges/services and changes to charges/services as verified by the signature of the resident or responsible party.

J. Residents shall not be requested or required to perform any type of care/service in the facility that would normally be the duty of a staff member/volunteer. Residents may be allowed to engage in such activities as listed in the ICP with written authorization not necessarily in the ICP from a physician or other authorized healthcare provider, if strictly voluntary, and under proper supervision. (I)

K. Residents shall be allowed sufficient time to attempt and complete activities of daily living tasks without unnecessary intervening by staff members/volunteers in order to expedite completion of the tasks. Staff members/volunteers shall intervene appropriately as necessary to assist residents whose completion of the tasks may be impeded by their physical/mental condition.

L. Residents shall be permitted to use the telephone and shall be allowed privacy when placing or receiving telephone calls. This access shall include business hours from 7 a.m. through 8 p.m., seven (7) days a week, and other times when appropriate. This telephone service shall be available for use by residents and/or visitors for

their private, discretionary use; pay phones for this purpose are acceptable. Telephones capable of only local calls are acceptable for this purpose, provided other arrangements exist to provide resident/visitor discretionary access to a telephone capable of long distance service.

M. In instances when a resident moves/relocates, lack of advance notice by the resident of the departure shall not relieve the facility of the obligation to refund the monies due the resident. The facility may charge the resident no more than fourteen (14) days of occupancy, if the resident fails to notify in writing the administrator of the intent to voluntarily relocate. However, if the facility is able to fill the bed vacated by the resident, the facility shall cease charging the resident regardless of the notice given. The facility shall notify the previous resident in writing as soon as it fills the bed with a new resident. This does not apply to residents that participate in the Optional State Supplementation Program (OSS). Voluntary relocation does not occur when a resident of a CRCF seeks to be discharged because a higher level of care is required or because the resident's health, safety, or welfare is endangered.

SECTION 1100--RESIDENT PHYSICAL EXAMINATION AND TB SCREENING

1101. General (I).

A. A physical examination shall be completed for residents within thirty (30) days prior to admission and at least annually thereafter. Physical examinations conducted within thirty (30) days prior to admission by physicians licensed in states other than South Carolina are permitted for new admissions under the condition that residents obtain an attending physician licensed in South Carolina within thirty (30) days of admission to the facility and undergo a second (2nd) physical examination by that physician within thirty (30) days of admission to the facility. The physical examination shall be updated to include new medical information if the resident's condition has changed since the last physical examination was completed. The physical examination shall address:

1. The appropriateness of placement in a CRCF;
2. Medications/treatments ordered;
3. Self-administration status;
4. Identification of special conditions/care required, *e.g.*, a communicable disease, dental problems, podiatric problems, Alzheimer's disease and/or related dementia, *etc.*; and,
5. The need of (or lack thereof) for the continuous daily attention of a licensed nurse.

B. The admission physical examination shall include a two-step tuberculin skin test, as described in Section 1702, unless there is a documented previous positive reaction.

C. The physical examination shall be performed only by a physician or other authorized healthcare provider.

D. If a resident or potential resident has a communicable disease, the administrator shall seek advice from a physician or other authorized healthcare provider in order to:

1. Ensure the facility has the capability to provide adequate care and prevent the spread of that condition, and that the staff members/volunteers are adequately trained;
2. Transfer the resident to an appropriate facility, if necessary.

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E. A discharge summary from a health care facility, which includes a physical examination, may be acceptable as the admission physical examination, provided the summary includes the requirements of Sections 1101.A-C above.

F. Isolation Provisions. Residents with contagious pulmonary tuberculosis shall be separated (See Section 1702.E) from all other noninfected residents until declared noncontagious by a physician or other authorized healthcare provider. Should it be determined that the facility cannot care for the resident to the degree which assures the health and safety of the resident and the other residents of the facility, the resident shall be relocated to a facility that can meet his/her needs.

G. In the event that a resident transfers from a facility licensed by the Department to a CRCF, an additional admission physical examination shall not be required, provided the sending facility has had a physical examination conducted on the resident not earlier than twelve (12) months prior to the admission of the resident to the CRCF, and the physical examination meets requirements specified in Sections 1101.A - C above unless the receiving facility has an indication that the health status of the resident has changed significantly. A tuberculin skin test and/or BAMT shall be required within one (1) month after admission to the CRCF to which the resident transfers, to document baseline status for that facility.

SECTION 1200--MEDICATION MANAGEMENT

1201. General (I).

A. Medications, including controlled substances, medical supplies, and those items necessary for the rendering of first aid shall be available and properly managed in accordance with local, State, and Federal laws and regulations. Such management shall address the securing, storing, and administering of medications, medical supplies, first aid supplies, and biologicals, their disposal when discontinued or outdated, and their disposition at discharge, death, or transfer of a resident.

B. Applicable reference materials published within the previous three years shall be available at the facility in order to provide staff members/volunteers with adequate information concerning medications.

1202. Medication and Treatment Orders (I).

A. Medications and treatments, to include oxygen, shall be administered to residents only upon orders (to include standing orders) of a physician or other authorized healthcare provider. Medications accompanying residents at admission may be administered to residents provided the medication is in the original labeled container and the order is subsequently obtained as a part of the admission physical examination. Should there be concerns regarding the appropriateness of administering medications due to the condition/state of the medication, *e.g.*, expired, makeshift or illegible labels, or the condition/state of health of the newly-admitted resident, staff members shall consult with or make arrangements to have the resident examined by a physician or other authorized healthcare provider, or at the local hospital emergency room prior to administering any medications.

B. All orders (including verbal orders) shall be received only by staff members authorized by the facility, and shall be signed and dated by a physician or other authorized healthcare provider no later than three (3) business days after the order is given.

C. Medications and medical supplies ordered for a specific resident shall not be provided/administered to any other resident.

1203. Administering Medication/Treatments (I).

A. Doses of medication shall be administered by the same staff member who prepared them for administration. Preparation shall occur no earlier than one hour prior to administering. Preparation of doses for more than one scheduled administration shall not be permitted. Each physician ordered treatment or medication dose administered/supervised shall be properly recorded by initialing on the resident's medication administration record (MAR) as the medication is administered or treatment record as treatment is rendered. Recording medication administration shall include medication name, dosage, mode of administration, date, time, and the signature of the individual administering or supervising the taking of the medication. If the ordered dosage is to be given on a varying schedule, *e.g.*, "take two tablets the first day and one tablet every other day by mouth with noon meal," the number of tablets shall also be recorded. The treatment record shall document the type of treatment, date and time of treatment and signature of the individual administering treatment.

B. Facility staff members may administer routine medications, acting in a surrogate family role, provided these staff members have been trained to perform these tasks in the proper manner by individuals licensed to administer medications. Facility staff members may administer injections of medications only in instances where medications are required for diabetes and conditions associated with anaphylactic reactions under established medical protocol. A staff licensed nurse may administer influenza and vitamin B-12 injections and perform tuberculin skin tests. Although facility staff members may monitor blood sugar levels (provided s/he has been appropriately trained and the facility has received a "Certificate of Waiver" from Clinical Laboratories Improvement Amendments (CLIA)), the provision of sliding scale insulin injections by facility staff members is prohibited.

C. Self-administering of medications by a resident is permitted only:

1. Upon the specific written orders of the physician or other authorized healthcare provider, obtained on a semi-annual basis, or

2. The facility shall ascertain by resident demonstration to the staff and document, at least quarterly, that s/he remains capable of self-administering medications.

D. Facilities may elect not to permit self-administration.

E. When residents who are unable to self-administer medications leave the facility for an extended period of time, the proper amount of medications, along with dosage, mode, date, and time of administration, shall be given to a responsible person who will be in charge of the resident during his/her absence from the facility; these details shall be properly documented in the MAR. In these instances, the amount of medication needed for the designated period of time may be transferred to a prescription vial or bottle that is properly labeled.

F. At each shift change, there shall be a documented review of the MAR's by outgoing staff members with incoming staff members that shall include verification by outgoing staff members that they have properly administered medications in accordance with orders by a physician or other authorized healthcare provider, and have documented the administrations. Errors/omissions indicated on the MAR's shall be addressed and corrective action taken at that time.

1204. Pharmacy Services (I).

A. Any pharmacy within the facility shall be provided by or under the direction of a pharmacist in accordance with accepted professional principles and appropriate local, State, and Federal laws and regulations.

B. Facilities which maintain stocks of legend drugs and biologicals for dispensing to residents shall obtain and maintain a valid, current pharmacy permit from the S.C. Board of Pharmacy.

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C. Labeling of medications dispensed to residents shall be in compliance with local, State, and Federal laws and regulations, to include expiration date.

1205. Medication Containers (I).

A. Medications for residents shall be obtained from a permitted pharmacy or prescriber on an individual prescription basis. These medications shall bear a label affixed to the container which reflects at least the following: name of pharmacy, name of resident, name of the prescribing physician or other authorized healthcare provider, date and prescription number, directions for use, and the name and dosage unit of the medication. The label shall be brought into accord with the directions of the physician or other authorized healthcare provider each time the prescription is refilled. Medication containers having soiled, damaged, incomplete, illegible, or makeshift labels shall be returned to the pharmacy for re-labeling or disposal. Residents may obtain their over-the-counter (OTC) medication from a pharmacy other than a pharmacy contracted with the facility.

B. Medications for each resident shall be kept in the original container(s) including unit dose systems; there shall be no transferring between containers (except in instances such as in Section 1203.E above), or opening blister packs to remove medications for destruction or adding new medications for administration, except under the direction of a pharmacist. In addition, for those facilities that utilize the unit dose system or multi-dose system, an on-site review of the medication program by a pharmacist shall be conducted on at least a quarterly basis to ensure the program has been properly implemented and maintained. For changes in dosage, the new packaging shall be available in the facility no later than the next administration time subsequent to the order.

C. If a physician or other authorized healthcare provider changes the dosage of a medication, a label, which does not obscure the original label, shall be attached to the container which indicates the new dosage, date, and prescriber's name. In lieu of this procedure, it is acceptable to attach a label to the container that states, "Directions changed; refer to MAR and physician or other authorized healthcare provider orders for current administration instructions." The new directions shall be communicated to the pharmacist upon receipt of the order.

1206. Medication Storage (I).

A. Medications shall be properly stored and safeguarded to prevent access by unauthorized persons. Expired or discontinued medications shall not be stored with current medications. Storage areas shall be locked, and of sufficient size for clean and orderly storage. Storage areas shall not be located near sources of heat, humidity, or other hazards that may negatively impact medication effectiveness or shelf life. Medications requiring refrigeration shall be stored in a refrigerator at the temperature established by the U.S. Pharmacopeia (36-46 degrees F.). Medications requiring refrigeration shall be kept in a secured refrigerator used exclusively for medications, or in a secured manner in which medications are separated from other items kept in a refrigerator (e.g. Lock Box). All refrigerators storing medications shall have accurate thermometers (within plus or minus 2 degrees).

B. Medications shall be stored:

1. Separately from poisonous substances or body fluids;
2. In a manner which provides for separation between topical and oral medications, and which provides for separation of each individual resident's medication.

C. A facility shall maintain records of receipt, administration and disposition of all controlled substances in sufficient detail to enable an accurate reconciliation including:

1. Separate control sheets on any controlled substances. This record shall contain the following information: date, time administered, name of resident, dose, signature of individual administering, name of physician or other legally authorized healthcare provider ordering the medication; and

2. At each shift change, a documented review of the control sheets by outgoing staff members with incoming staff members including verification by outgoing staff members indicating they have properly administered medications in accordance with orders by a physician or other authorized healthcare provider, and have documented the administrations. Errors/omissions indicated on the control sheets shall be addressed and corrective action taken at that time.

D. Unless the facility has a permitted pharmacy, legend medications shall not be stored except those specifically prescribed for individual residents. Nonlegend medications that can be obtained without a prescription may be retained and labeled as stock in the facility for administration as ordered by a physician or other authorized healthcare provider.

E. The medications prescribed for a resident shall be protected from use by any other individuals. For those residents who have been authorized by a physician or other authorized healthcare provider to self-administer medications, such medications may be kept on the resident's person, i.e., a pocketbook, pocket, or any other method that would enable the resident to control the items.

F. No medication shall be left in a resident's room unless the facility provides an individual cabinet/compartiment which is kept locked in the room of each resident who has been authorized in writing to self-administer by a physician or other authorized healthcare provider. In lieu of a locked cabinet/ compartment, storage of medications shall be permitted in a resident room which can be locked, provided the room is licensed for one bed; medications are not accessible by unauthorized persons; the room is kept locked when the resident is not in the room; the medications are not controlled substances and all other requirements of this section are met.

G. During nighttime hours in resident rooms, only medications which a physician or other authorized healthcare provider has ordered in writing for emergency/immediate use, e.g., nitroglycerin or inhalers, may be kept unlocked in or upon a cabinet or bedside table, and only when the resident to whom that medication belongs is present in the room.

1207. Disposition of Medications (I).

A. Upon discharge of a resident, the facility shall release unused medications to the resident, family member, or responsible party, as appropriate, and shall document the release with the signature of the person receiving the unused medications unless specifically prohibited by the attending physician or other authorized healthcare provider.

B. Residents' medications shall be destroyed by the facility administrator or his/her designee when:

1. Medication has deteriorated or exceeded its expiration date;
2. Unused portions remain due to death or discharge of the resident, or discontinuance of the medication (may also be returned to the dispensing pharmacy). Medication that has been discontinued by order may be stored for a period not to exceed thirty (30) days provided they are stored separately from current medications.

C. The destruction of medication shall be witnessed by the administrator or his/her designee, the mode of destruction indicated, and these steps documented. Destruction records shall be retained by the facility for a period of two (2) years.

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D. The destruction of controlled substances shall be accomplished only by the administrator or his or her designee and witnessed by the administrator or his or her designee and a staff member trained by individuals licensed to administer medications.

SECTION 1300--MEAL SERVICE

1301. General (II).

A. All facilities that prepare food on-site shall be approved by the Department, and shall be regulated, inspected, and graded pursuant to R.61-25. Facilities preparing food on-site and licensed for 16 beds or more subsequent to the promulgation of these regulations shall have kitchen equipment which meets the requirement of R.61-25. Existing facilities with 16 licensed beds or more may continue to operate with equipment currently in use; however, only certified/classified equipment shall be used when replacements are necessary. Those facilities with 15 beds or less shall be regulated pursuant to R.61-25 with certain exceptions in regard to food equipment (may utilize non-certified/non-classified food equipment).

EXCEPTION: In facilities with five beds or less, in lieu of a three-compartment sink, a non-certified/non-classified dishwasher may be used to wash equipment/utensils, provided the facility is equipped with at least a two-compartment sink used to sanitize and adequately air dry equipment/utensils. In facilities with 10 beds or less and licensed prior to May 24, 1991, as CRCF's, in which a two compartment sink serves to wash kitchen equipment/utensils, the facility shall provide an additional container of adequate length, width, and depth to completely immerse all equipment/utensils, for final sanitation. Non-certified/non-classified dishwashers may be utilized in facilities licensed with 10 beds or less prior to May 24, 1991, provided they are approved by the Department.

B. When meals are catered to a facility, such meals shall be obtained from a food service establishment graded by the Department, pursuant to R.61-25, and there shall be a written executed contract with the food service establishment.

C. If food is prepared at a central kitchen and delivered to separate facilities or separate buildings and/or floors of the same facility, provisions shall be made and approved by the Department for proper maintenance of food temperatures and a sanitary mode of transportation.

D. Food shall be palatable, properly prepared, and sufficient in quantity and quality to meet the daily nutritional needs of the residents in accordance with written dietary policies and procedures. Efforts shall be made to accommodate the religious, cultural, and ethnic preferences of each individual resident and consider variations of eating habits, unless the orders of a physician or other authorized healthcare provider contraindicate.

E. Liquid or powder soap dispensers and sanitary paper towels shall be available at each food service handwash lavatory. Alcohol-based waterless hand sanitizers shall not be used in lieu of liquid or powder soap.

1302. Food and Food Storage.

A. Home canned food usage shall be prohibited. (I)

B. At least a one-week supply of staple foods and a two-day supply of perishable foods shall be maintained on the premises. Supplies shall be appropriate to meet the requirements of the menu and special or therapeutic diets. (II)

1303. Meals and Services.

A. All facilities shall provide dietary services to meet the daily nutritional needs of the residents in accordance with the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences. (I)

B. The dining area shall provide a congenial and relaxed environment. Table service shall be planned in an attractive and colorful manner for each meal and shall include full place settings with napkins, tablecloths or place-mats, and nondisposable forks, spoons, knives, drink containers, plates, and other eating utensils/containers as needed.

C. A minimum of three nutritionally-adequate meals, in accordance with Section 1304.A above, in each 24-hour period, shall be provided for each resident unless otherwise directed by the resident's physician or other authorized healthcare provider. Not more than 14 hours shall elapse between the serving of the evening meal and breakfast the following day. (II)

D. Special attention shall be given to preparation and prompt serving in order to maintain correct food temperatures for serving at the table or resident room (tray service). (II)

E. The same foods shall not be repetitively served during each seven-day period except to honor specific, individual resident requests.

F. Specific times for serving meals shall be established, documented on a posted menu, and followed.

G. Suitable food and snacks shall be available and offered between meals at no additional cost to the residents. (II)

H. Residents shall be encouraged to eat in the dining room at mealtime. Tray service shall be permitted when the resident is medically unable to access the dining area for meals, or if the facility has received written notice from the resident/responsible party of a preference to receive tray service, in which case it may be provided on an occasional basis unless otherwise indicated in the facility's policies and procedures. Under no circumstances, may staff members utilize tray service for their own convenience. (II)

1304. Meal Service Personnel (II).

A. Sufficient staff members/volunteers shall be available to serve food and to provide individual attention and assistance, as needed.

B. Dietary services shall be organized with established lines of accountability and clearly defined job assignments for those engaged in food preparation and serving. There shall be trained staff members/ volunteers to supervise the preparation and serving of the proper diet to the residents including having sufficient knowledge of food values in order to make appropriate substitutions when necessary. The facility shall not permit residents to engage in food preparation.

EXCEPTION: A resident may engage in food preparation provided the following criteria are met:

1. Approval to engage in food preparation by a physician or other authorized medical authority;
2. The ICP of the resident has indicated food preparation as suitable/beneficial to the resident;
3. The resident is directly supervised by staff members/volunteers (must be in the kitchen with the resident);
4. Preparing food must be part of an organized program in which daily living skills are being taught;

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5. The utilization of residents for preparing food is not a substitute for staff members/volunteers.

1305. Diets.

A. If the facility accepts or retains residents in need of medically-prescribed special diets, the menus for such diets shall be planned by a professionally-qualified dietitian or shall be reviewed and approved by a physician or other authorized healthcare provider. The facility shall maintain documentation that each of these menus has been planned by a dietitian, a physician or other authorized healthcare provider. At a minimum, documentation for each resident's special diet menu shall include the signature of the dietitian, the physician or other authorized healthcare provider, his/her title, and the date he/she signed the menu. The facility shall maintain staff capable of the preparation/serving of any special diet, *e.g.*, low-sodium, low-fat, 1200-calorie, diabetic diet. Facility staff preparing a resident's special diet shall be knowledgeable of the procedure to prepare each special diet. The preparation of any resident's special diet shall follow the written guidance provided by a registered dietitian, physician, or other authorized healthcare provider authorizing the resident's special diet. For each resident receiving a special diet, this written guidance shall be documented in the resident's record. (I)

B. If special diets are required, the necessary equipment for preparation of those diets shall be available and utilized.

C. A diet manual published within the previous five years shall be available and shall address at minimum:

1. Food sources and food quality;
2. Food protection storage, preparation and service;
3. Food worker health and cleanliness;
4. Recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences food serving recommendations;
5. General menu planning;
6. Menu planning appropriate to special needs, *e.g.*, diabetic, low-salt, low-cholesterol, or other diets appropriate for the elderly and/or infirmed.

1306. Menus.

A. Menus shall be planned and written at a minimum of one week in advance and dated as served. The current week's menu, including routine and special diets and any substitutions or changes made, shall be readily available and posted in one or more conspicuous places in a public area. All substitutions made on the master menu shall be recorded in writing. Cycled menus shall be rotated so that the same weekly menu is not duplicated for at least a period of three weeks.

B. Records of menus as served shall be maintained for at least 30 days.

1307. Ice and Drinking Water (II).

A. Ice from a water system that is in accordance with R.61-58, shall be available and precautions taken to prevent contamination. The ice scoop shall be stored in a sanitary manner outside of the ice container.

B. Potable drinking water shall be available and accessible to residents at all times.

C. The usage of common cups shall be prohibited.

D. Ice delivered to resident areas in bulk shall be in nonporous, covered containers that shall be cleaned after each use.

SECTION 1400--EMERGENCY PROCEDURES/DISASTER PREPAREDNESS

1401. Disaster Preparedness (II).

A. All facilities shall develop, by contact and consultation with their county emergency preparedness agency, a suitable written plan for actions to be taken in the event of a disaster and/or emergency evacuation and implement the written plan for actions at the time of need. Prior to initial licensing of a facility, the completed plan shall be submitted to the Department for review. Additionally, in instances where there are applications for increases in licensed bed capacity, the emergency and disaster evacuation plan shall be updated to reflect the proposed new total licensed bed capacity. All staff members and volunteers shall be made familiar with this plan and instructed as to any required actions. A copy of the emergency and disaster evacuation plan shall be available for inspection by the resident and/or responsible party upon request. The emergency and disaster evacuation plan shall be reviewed and updated annually, as appropriate. Staff members shall rehearse the emergency and disaster evacuation plan at least annually and shall not require resident participation.

B. The disaster/emergency evacuation plan shall include, but not be limited to:

1. A sheltering plan to include:

a. The licensed bed capacity and average occupancy rate;

b. Name, address and phone number of the sheltering facility(ies) to which the residents will be relocated during a disaster;

c. A letter of agreement signed by an authorized representative of each sheltering facility which shall include: the number of relocated residents that can be accommodated; sleeping, feeding, and medication plans for the relocated residents; and provisions for accommodating relocated staff members/volunteers. The letter shall be updated with the sheltering facility at least every three (3) years and whenever significant changes occur. For those facilities located in Beaufort, Charleston, Colleton, Horry, Jasper, and Georgetown counties, at least one (1) sheltering facility shall be located in a county other than these counties.

2. A transportation plan, to include agreements with entities for relocating residents, which addresses:

a. Number and type of vehicles required;

b. How and when the vehicles are to be obtained;

c. Who (by name or organization) will provide drivers;

d. Procedures for providing appropriate medical support, food, water, and medications during transportation and relocation based on the needs and number of the residents;

e. Estimated time to accomplish the relocation;

f. Primary and secondary routes to be taken to the sheltering facility.

3. A staffing plan for the relocated residents, to include:

a. How care will be provided to the relocated residents, including the number and type of staff members that will accompany residents who are relocated;

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b. Prearranged transportation arrangements to ensure staff members are relocated to the sheltering facility;

c. Co-signed statement by an authorized representative of the sheltering facility if staffing is to be provided by the sheltering facility.

1402. Emergency Call Numbers.

Emergency call data shall be posted in a conspicuous place and shall include at least the telephone numbers of fire and police departments, ambulance service, and the poison control center. Other emergency call information shall be available, to include the names, addresses, and telephone numbers of staff members/volunteers to be notified in case of emergency.

1403. Continuity of Essential Services (II).

There shall be a written plan to be implemented to assure the continuation of essential resident support services for such reasons as power outage, water shortage, or in the event of the absence from work of any portion of the workforce resulting from inclement weather or other causes.

SECTION 1500--FIRE PREVENTION

1501. Arrangements for Fire Department Response/Protection (I).

A. Each facility shall develop, in coordination with its supporting fire department and/or disaster preparedness agency, suitable written plans for actions to be taken in the event of fire, i.e., fire plan and evacuation plan.

B. Facilities located outside of a service area or range of a public fire department shall arrange for the nearest fire department to respond in case of fire by written agreement with that fire department. A copy of the agreement shall be kept on file in the facility and a copy shall be forwarded to the Department. If the agreement is changed, a copy shall be forwarded to the Department.

1502. Tests and Inspections (I).

Fire protection and suppression systems shall be maintained and tested in accordance with the provisions of the codes officially adopted by the South Carolina Building Codes Council and the South Carolina State Fire Marshal applicable to community residential care facilities.

1503. Fire Response Training (I).

A. Fire response training shall address at a minimum, the following:

1. Fire plan, including the training of staff members/volunteers;
2. Reporting a fire;
3. Use of the fire alarm system, if applicable;
4. Location and use of fire-fighting equipment;
5. Methods of fire containment;
6. Specific responsibilities, tasks, or duties of each individual.

B. A plan for the evacuation of residents, staff members, and visitors, to include evacuation routes and procedures, in case of fire or other emergencies, shall be established and posted in conspicuous public areas throughout the facility.

C. All residents capable of assisting in their evacuation shall be trained in the proper actions to take in the event of a fire, *e.g.*, actions to take if the primary escape route is blocked.

D. Residents shall be made familiar with the fire plan and evacuation plan upon admission and a copy of the evacuation floor diagram shall be provided to each resident and/or the resident's responsible party.

1504. Fire Drills (I).

A. An unannounced fire drill shall be conducted at least quarterly for all shifts. Each staff member/volunteer shall participate in a fire drill at least once each year. Records of drills shall be maintained at the facility, indicating the date, time, shift, description, and evaluation of the drill, and the names of staff members/volunteers and residents directly involved in responding to the drill. If fire drill requirements are mandated by statute or regulation, then provisions of the statute or regulation shall be complied with and shall supersede the provisions of Section 1504.

B. Drills shall be designed and conducted in consideration of and reflecting the content of the fire response training described in Section 1503 above.

C. All residents shall participate in fire drills. In instances when a resident refuses to participate in a drill, efforts shall be made to encourage participation, *e.g.*, counseling, implementation of incentives rewarding residents for participation, specific staff/volunteer to resident assignments to promote resident participation. Continued refusal may necessitate implementation of the discharge planning process to place the resident in a setting more appropriate to their needs and abilities.

D. In conducting fire drills, all residents shall evacuate to the outside of the building to a selected assembly point; drills shall be designed to ensure that residents attain the experience of exiting through all exits.

SECTION 1600--MAINTENANCE

1601. General (II).

The facility shall keep all equipment and building components (*e.g.*, doors, windows, lighting fixtures, plumbing fixtures) in good repair and operating condition. The facility shall document preventive maintenance. The facility shall comply with the provisions of the codes officially adopted by the South Carolina Building Codes Council and the South Carolina State Fire Marshal applicable to community residential care facilities.

SECTION 1700--INFECTIOUS CONTROL AND ENVIRONMENT

1701. Staff Practices (I).

Staff/volunteer practices shall promote conditions that prevent the spread of infectious, contagious, or communicable diseases and provide for the proper disposal of toxic and hazardous substances. These preventive measures/practices shall be in compliance with applicable guidelines of the *Blood borne Pathogens Standard of the Occupational Safety and Health Act (OSHA) of 1970*; the Centers for Disease Control and Prevention (CDC); and R.61-105; and other applicable Federal, State, and local laws and regulations.

1702. Tuberculin Skin Testing (I).

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A. Tuberculin skin testing is a diagnostic tool for detecting *M. tuberculosis* infection. A small dose (0.1 mil) of purified protein derivative (PPD) tuberculin is injected just beneath the surface of the skin (by the intradermal Mantoux method), and the area is examined for induration (hard, dense, raised area at the site of the TST administration) forty-eight to seventy-two (48 to 72) hours after the injection (but positive reactions can still be measurable up to a week after administering the TST). The size of the indurated area is measured with a millimeter ruler and the reading is recorded in millimeters, including zero (0) mm to represent no induration. Redness/erythema is insignificant and is not measured or recorded. Authorized healthcare providers are permitted to perform tuberculin skin testing and symptom screening.

B. All facilities shall conduct an annual tuberculosis risk assessment (See Section 101.BBB) in accordance with CDC guidelines (See Section 102.B.16) to determine the appropriateness and frequency of tuberculosis screening and other tuberculosis related measures to be taken.

C. The risk classification, *i.e.*, low risk, medium risk, shall be used as part of the risk assessment to determine the need for an ongoing TB screening program for staff/direct care volunteers and residents and the frequency of screening. A risk classification shall be determined for the entire facility. In certain settings, *e.g.*, healthcare organizations that encompass multiple sites or types of services, specific areas defined by geography, functional units, patient population, job type, or location within the setting may have separate risk classifications.

D. Staff/Direct Care Volunteers/Private Sitters Tuberculin Skin Testing

1. Tuberculosis Status. Prior to date of hire or initial resident contact, the tuberculosis status of staff/direct care volunteer/private sitters shall be determined in the following manner in accordance with the applicable risk classification:

2. Low Risk:

a. Baseline two-step Tuberculin Skin Test (TST) or a single Blood Assay for *Mycobacterium tuberculosis* (BAMT): All staff/direct care volunteers/private sitters (within three (3) months prior to contact with residents) unless there is a documented TST or a BAMT result during the previous twelve (12) months. If a newly employed staff/direct care volunteer or private sitter has had a documented negative TST or a BAMT result within the previous twelve (12) months, a single TST (or the single BAMT) can be administered and read to serve as the baseline prior to resident contact.

b. Periodic TST or BAMT is not required.

c. Post-exposure TST or a BAMT for staff/direct care volunteers upon unprotected exposure to *M. tuberculosis*: Perform a contact investigation when unprotected exposure is identified. Administer one (1) TST or a BAMT as soon as possible to all staff who have had unprotected exposure to an infectious TB case/suspect. If the TST or the BAMT result is negative, administer another TST or a BAMT eight to ten (8 to 10) weeks after that exposure to *M. tuberculosis* ended.

d. Post-exposure TST or a BAMT for private sitters upon unprotected exposure to *M. tuberculosis*: Written evidence of a contact investigation when unprotected exposure is identified shall be provided to the facility administrator. The private sitter shall provide documentation of a completed single TST or a BAMT prior to resident contact. If the TST or BAMT result is negative, the private sitter shall provide written evidence of an additional TST or BAMT eight to ten (8 to 10) weeks after that exposure to *M. tuberculosis* ended. (CDC: Guidelines for Preventing the Transmission of *Mycobacterium tuberculosis* in Health-Care Settings, December 30, 2005).

e. Baseline positive with or without documentation of treatment for latent TB infection (LTBI) (See Section 101.BB) or TB disease shall have a symptoms screen prior to employment and annually thereafter.

f. Upon hire, staff/direct care volunteers/private sitters with a newly positive test result for *M. tuberculosis* infection (*i.e.*, TST or BAMT) or signs or symptoms of tuberculosis, *e.g.*, cough, weight loss, night sweats, fever, shall have a chest radiograph performed immediately to exclude TB disease (or evaluate an interpretable copy taken within the previous three (3) months). Repeat radiographs are not needed unless symptoms or signs of TB disease develop or unless recommended by a physician. These staff members/direct care volunteers/private sitters will be evaluated for the need for treatment of TB disease or latent TB infection (LTBI) and will be encouraged to follow the recommendations made by a physician with TB expertise (*i.e.*, the Department's TB Control program).

3. Medium Risk:

a. Baseline two-step TST or a single BAMT: All staff/direct care volunteers/private sitters (within three (3) months prior to contact with residents) unless there is a documented TST or a BAMT result during the previous twelve (12) months. If a newly employed staff/direct care volunteer/private sitter has had a documented negative TST or a BAMT result within the previous twelve (12) months, a single TST (or the single BAMT) can be administered to serve as the baseline prior to resident contact.

b. Periodic testing (with TST or BAMT): Annually, of all staff/direct care volunteers who have risk of TB exposure and who have previous documented negative results. Instead of participating in periodic testing, staff/direct care volunteers with documented TB infection (positive TST or BAMT) shall receive a symptom screen annually. This screen shall be accomplished by educating the staff/direct care volunteers who have documented TB infection about symptoms of TB disease (including the staff's and/or direct care volunteers' responses concerning symptoms of TB disease), documenting the questioning of the staff/direct care volunteers about the presence of symptoms of TB disease, and instructing the staff/direct care volunteers to report any such symptoms immediately to the administrator. Treatment for latent TB infection (LTBI) shall be considered in accordance with CDC and Department guidelines and, if recommended, treatment completion shall be encouraged.

c. Periodic testing (with TST or BAMT): Annually, of all private sitters who have risk of TB exposure and who have previous documented negative results. Instead of participating in periodic testing, private sitters with documented TB infection (positive TST or BAMT) shall provide the facility with written evidence of a symptom screen annually. Documentation of education about symptoms of TB disease (including responses concerning symptoms of TB disease) and written evidence of the questioning about the presence of symptoms of TB disease, and the report of any such symptoms shall be provided immediately to the facility administrator.

d. Post-exposure TST or a BAMT for staff/direct care volunteers upon unprotected exposure to *M. tuberculosis*: Perform a contact investigation (See Section 101.M) when unprotected exposure is identified. Administer one (1) TST or a BAMT as soon as possible to all staff/direct care volunteers/private sitters who have had unprotected exposure to an infectious TB case/suspect. If the TST or the BAMT result is negative, administer another TST or BAMT eight to ten (8 to 10) weeks after that exposure to *M. tuberculosis* ended.

e. Post exposure TST or a BAMT for private sitters upon unprotected exposure to *M. tuberculosis*: Written evidence of a contact investigation when unprotected exposure is identified shall be provided to the facility administrator. The private sitter shall provide documentation of a completed single TST or a BAMT prior to resident contact. If the TST or BAMT result is negative, the private sitter shall provide written evidence of an additional TST or BAMT eight to ten (8 to 10) weeks after that exposure to *M. tuberculosis* ended.

4. Baseline Positive or Newly Positive Test Result:

a. Baseline positive with or without documentation of treatment for latent TB infection (LTBI) or TB disease shall have a symptoms screen prior to employment and annually thereafter.

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b. Upon hire, staff/direct care volunteers/private sitters with a newly positive test result for *M. tuberculosis* infection (*i.e.*, TST or BAMT) or signs or symptoms of tuberculosis, *e.g.*, cough, weight loss, night sweats, fever, shall have a chest radiograph performed immediately to exclude TB disease (or evaluate an interpretable copy taken within the previous three (3) months). Repeat chest radiographs are not required unless symptoms or signs of TB disease develop or unless recommended by a physician. These staff members/direct care volunteers/private sitters will be evaluated for the need for treatment of TB disease or latent TB infection (LTBI) and will be encouraged to follow the recommendations made by a physician with TB expertise (*i.e.*, the Department's TB Control program).

c. Staff/direct care volunteers/private sitters who are known or suspected to have TB disease shall be excluded from work, required to undergo evaluation by a physician, and permitted to return to work only with written approval by the Department's TB Control program. Repeat chest radiographs are not required unless symptoms or signs of TB disease develop or unless recommended by a physician.

E. Resident Tuberculosis Screening (I)

1. Tuberculosis Status. Prior to admission, the tuberculosis status of a resident shall be determined in the following manner in accordance with the applicable risk classification:

a. For Low Risk and Medium Risk:

1. Admission/Baseline two-step TST or a single BAMT: All residents within thirty (30) days prior to admission shall have completed the first step of the two step tuberculin skin test followed seven to twenty one (7 to 21) days later by a second test unless there is a documented TST or a BAMT result during the previous twelve (12) months. If a newly-admitted resident has had a documented negative TST or a BAMT result within the previous twelve (12) months, a single TST (or the single BAMT) can be administered within one (1) month prior to admission to the facility to serve as the baseline. As an exception, a resident may be admitted with at least the first step of the TB screening process completed prior to admission and the second step within fourteen (14) days of admission.

2. Periodic TST or BAMT is not required.

3. Post-exposure TST or a BAMT for residents upon unprotected exposure to *M. tuberculosis*: Perform a contact investigation when unprotected exposure is identified. Administer one (1) TST or a BAMT as soon as possible to all residents who have had exposure to an infectious TB case/suspect. If the TST or the BAMT result is negative, administer another TST or a BAMT eight to ten (8 to 10) weeks after that exposure to *M. tuberculosis* ended.

b. Baseline Positive or Newly Positive Test Result:

1. Residents with a baseline positive or newly positive test result for *M. tuberculosis* infection (*i.e.*, TST or BAMT) or documentation of treatment for latent TB infection (LTBI) or TB disease or signs or symptoms of tuberculosis, *e.g.*, cough, weight loss, night sweats, fever, shall have a chest radiograph performed immediately to exclude TB disease (or evaluate an interpretable copy taken within the previous three (3) months). Routine repeat chest radiographs are not required unless symptoms or signs of TB disease develop or unless recommended by a physician. These residents shall be evaluated for the need for treatment. If diagnosed with latent TB infection (LTBI) the resident shall be encouraged to follow the recommendations made by a physician with TB expertise (*i.e.*, the Department's TB Control program). For those residents diagnosed with TB disease, the facility shall assure that the affected residents follow the recommendations made by a physician with TB expertise (*i.e.*, the Department's TB Control program).

2. Residents who are known or suspected to have TB disease shall be transferred from the facility if the facility does not have an Airborne Infection Isolation room (See Section 101.E), required to undergo

evaluation by a physician, and permitted to return to the facility only with written approval by the Department's TB Control program.

F. Individuals who have been declared in writing to be in an emergency crisis stabilization status may be admitted to the facility without the initial step of the two-step tuberculin skin test and/or while awaiting the result of a BAMT. These individuals shall be placed in an area separate from the general population. This admission to the facility may be made provided:

1. There is documentation at the facility of the declaration by Adult Protective Services of the South Carolina Department of Social Services or the South Carolina Department of Mental Health that the admission is, in fact, an emergency (NOTE: Only these agencies may declare these crisis stabilization admissions to be an emergency);

2. There is written evidence of a chest x-ray within one (1) month prior to admission and a written assessment by a physician or other authorized healthcare provider that there is no active TB and a negative assessment for signs and/or symptoms of tuberculosis; and,

3. The resident will receive the initial step of the two-step tuberculin test within twenty-four (24) hours of admission to the facility. The second step of the two-step tuberculin skin test must be administered within the next seven to fourteen (7 to 14) days.

1703. Housekeeping (II).

The facility and its grounds shall be clean, and free of vermin and offensive odors.

A. Interior housekeeping shall at a minimum include:

1. Cleaning each specific area of the facility;
2. Cleaning and disinfection, as needed, of equipment used and/or maintained in each area appropriate to the area and the equipment's purpose or use;
3. Safe storage of chemicals indicated as harmful on the product label, cleaning materials, and supplies in cabinets or well-lighted closets/rooms, inaccessible to residents. If a physician or other authorized healthcare provider has determined that a resident is capable of appropriately using a cleaning product or other hazardous agent, the facility may elect to permit the resident to use the product, provided there is a written statement from a physician or other authorized healthcare provider that assures that the resident is capable of maintaining the product in a secure locked manner and that a description of product usage is outlined in the resident's ICP.

B. Exterior housekeeping shall at a minimum include:

1. Cleaning of all exterior areas, e.g., porches and ramps, and removal of safety impediments such as snow and ice;
2. Keeping facility grounds free of weeds, rubbish, overgrown landscaping, and other potential breeding sources for vermin.
3. Safe storage of chemicals indicated as harmful on the product label, equipment and supplies inaccessible to residents.

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1704. Infectious Waste (I).

Accumulated waste, including all contaminated sharps, dressings, and/or similar infectious waste, shall be disposed of in a manner compliant with *OSHA Blood-borne Pathogens Standard*, and R.61-105.

1705. Pets (II).

A. If the facility chooses to permit pets, healthy animals that are free of fleas, ticks, and intestinal parasites and have been screened by a veterinarian prior to resident contact, have received required inoculations, if applicable, and that present no apparent threat to the health, safety, and well-being of the residents, may be permitted in the facility, provided they are sufficiently fed and cared for and that both the pets and their housing are kept clean.

B. Pets shall not be allowed near residents who have allergic sensitivities to pets, or for other reasons such as residents who do not wish to have pets near them.

C. Pets shall not be allowed in the kitchen area. Pets shall be permitted in resident dining areas only during times when food is not being served. If the dining area is adjacent to a food preparation or storage area, those areas shall be effectively separated by walls and closed doors while pets are present.

D. If personal pets are permitted in the facility, the housing of those pets shall be either in a resident private room or outside the facility.

1706. Clean/Soiled Linen and Clothing (II).

A. Clean Linen/Clothing. A supply of clean, sanitary linen/clothing shall be available at all times. In order to prevent the contamination of clean linen/clothing by dust or other airborne particles or organisms, clean linen/clothing shall be stored and transported in a sanitary manner, e.g., enclosed and covered. Linen/Clothing storage rooms shall be used only for the storage of linen/clothing. Clean linen/Clothing shall be separated from storage of other purposes.

B. Soiled Linen/Clothing.

1. Soiled linen/Clothing shall neither be sorted, rinsed, nor washed outside of the laundry service area;

2. Provisions shall be made for collecting, transporting, and storing soiled linen/clothing;

3. Soiled linen/Clothing shall be kept in enclosed/covered containers;

4. Laundry operations shall not be conducted in resident rooms, dining rooms, or in locations where food is prepared, served, or stored. Freezers/refrigerators may be stored in laundry areas, provided sanitary conditions are maintained.

EXCEPTION: Residents may sort, rinse/handwash their own soiled, delicate, personal items, e.g., pantyhose, underwear, socks, handkerchiefs, clothing, accessories, heirloom linens, needlepoint, crocheted, or knitted pillows or pillowcases, or other similar items personally owned and cared for by the resident, in a private bathroom sink, provided the practice does not create a safety hazard, e.g., water on the floor.

SECTION 1800--QUALITY IMPROVEMENT PROGRAM

1801. General (II).

A. There shall be a written, implemented quality improvement program that provides effective self-assessment and implementation of changes designed to improve the care/services provided by the facility.

B. The quality improvement program, as a minimum, shall:

1. Establish desired outcomes and the criteria by which policy and procedure effectiveness is regularly, systematically, and objectively accomplished;
2. Identify, evaluate, and determine the causes of any deviation from the desired outcomes;
3. Identify the action taken to correct deviations and prevent future deviation, and the person(s) responsible for implementation of these actions;
4. Analyze the appropriateness of ICP's and the necessity of care/services rendered;
5. Analyze all incidents and accidents, to include all medication errors and resident deaths;
6. Analyze any infection, epidemic outbreaks, or other unusual occurrences which threaten the health, safety, or well-being of the residents;
7. Establish a systematic method of obtaining feedback from residents and other interested persons, e.g., family members and peer organizations, as expressed by the level of satisfaction with care/services received.

SECTION 1900--DESIGN AND CONSTRUCTION

1901. General (II).

A facility shall be planned, designed, and equipped to provide and promote the health, safety, and well-being of each resident. Facility design shall be such that all residents have access to required services. There shall be at least 200 gross square feet per licensed bed in facilities with ten (10) beds or less, and in facilities licensed for more than 10 beds, at least an additional 100 gross square feet per licensed bed.

1902. Codes and Standards (II)

A. Facility design and construction shall comply with provisions of the codes officially adopted by the South Carolina Building Codes Council and the South Carolina State Fire Marshal applicable to community residential care facilities.

B. Unless specifically required otherwise by the Department, all facilities shall comply with the construction codes and construction regulations applicable at the time its license was issued.

1903. Submission of Plans (II)

A. Plans and specifications shall be submitted to the Department for review and approval for new construction, additions or alterations to existing buildings, replacement of major equipment, buildings being licensed for the first time, buildings changing license type, and for facilities increasing occupant load or licensed capacity. Final plans and specifications shall be prepared by an architect and/or engineer registered in South Carolina and shall bear their seals and signatures. Architectural plans shall also bear the seal of a South Carolina registered architectural corporation. Unless directed otherwise by the Department, submit plans at the schematic, design development, and final stages. All plans shall be drawn to scale with the title, stage of submission and date shown thereon. Any construction changes from the approved documents shall be approved by the Department. Construction work shall not commence until a plan approval has been received from the Department. During

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construction the owner shall employ a registered architect and/or engineer for observation and inspections. The Department shall conduct periodic inspections throughout each project.

B. Plans and specifications shall be submitted to the Department for review and approval for projects that have an effect on:

1. The function of a space;
2. The accessibility to or of an area;
3. The structural integrity of the facility;
4. The active and/or passive fire safety systems (including kitchen equipment such as exhaust hoods or equipment required to be under an exhaust hood);
5. Doors;
6. Walls;
7. Ceiling system assemblies;
8. Exit corridors;
9. Life safety systems; or
10. That increase the occupant load or licensed capacity of the facility.

C. All subsequent addenda, change orders, field orders, and documents altering the Department review must be submitted. Any substantial deviation from the accepted documents shall require written notification, review and re-approval from the Department.

D. Cosmetic changes utilizing paint, wall covering, floor covering, etc. that are required to have a flame-spread rating or to satisfy other safety criteria shall be documented with copies kept on file at the facility and made available to the Department.

1904. Inspections

Construction work which violates codes or standards will be required to be brought into compliance. All projects shall obtain all required permits from the locality having jurisdiction. Construction without proper permitting shall not be inspected by the Department.

SECTION 2000--FIRE PROTECTION, PREVENTION AND LIFE SAFETY (I)

2001. Alarms.

A. Facilities with six (6) or more licensed beds shall have a partial, manual, automatic, supervised fire alarm system. The facility shall arrange the system to transmit an alarm automatically to a third party. The alarm system shall notify by audible and visual alarm all areas and floors of the building. The alarm system shall shut down central recirculation systems and outside air units that serve the area(s) of alarm origination as a minimum.

B. All fire, smoke, heat, sprinkler flow, and manual fire alarming devices must be connected to and activate the main fire alarm system when activated.

SECTION 2100--GENERAL CONSTRUCTION REQUIREMENTS

2101. Floor Finishes (II).

A. Floor coverings and finishes shall meet the requirements of the building codes.

B. All floor coverings and finishes shall be appropriate for use in each area of the facility and free of hazards, e.g., slippery surfaces. Floor finishes shall be composed of materials that permit frequent cleaning, and when appropriate, disinfection.

2102. Wall Finishes (I).

A. Wall finishes shall meet the requirements of the building codes.

B. Manufacturers' certifications or documentation of treatment for flame spread and other safety criteria shall be furnished and maintained.

2103. Curtains and Draperies (II).

In bathrooms and resident rooms, window treatments shall be arranged in a manner to provide privacy.

2104. Gases (I).

A. Safety precautions shall be taken against fire and other hazards when oxygen is dispensed, administered, or stored. "No Smoking" signs shall be posted conspicuously, and cylinders shall be properly secured in place.

B. Smoking shall be allowed only in designated areas in accordance with the facility smoking policy. No smoking is permitted in resident rooms or staff bedrooms or bath/restrooms.

2105. Furnishings/Equipment (I).

A. The facility shall maintain the physical plant to be free of fire hazards or impediments to fire prevention.

B. No portable electric or unvented fuel heaters shall be permitted in the facility.

C. Fireplaces and fossil-fuel stoves, e.g., wood-burning, shall have partitions or screens or other means to prevent burns. Fireplaces shall be vented to the outside. "Unvented" type gas logs are not allowed. Gas fireplaces shall have a remote gas shutoff within the room and not inside the fireplace.

D. Wastebaskets, window dressings, cubicle curtains, mattresses, and pillows shall be noncombustible, inherently flame-resistant, or treated or maintained flame-resistant.

SECTION 2200--EXITS

2201. Number and Locations of Exits (I).

A. The facility shall maintain halls, corridors and all other means of egress from the building to be free of obstructions.

B. Each resident room shall open directly to an approved exit access corridor without passage through another occupied space or shall have an approved exit directly to the outside at grade level and accessible to a public space free of encumbrances.

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EXCEPTION: When two resident rooms share a common “sitting” area that opens onto the exit access corridor.

SECTION 2300--WATER SUPPLY/HYGIENE

2301. Design and Construction (II).

A. Resident and staff hand washing lavatories and resident showers/tubs shall be supplied with hot and cold water at all times.

B. Plumbing fixtures that require hot water and are accessible to residents shall be supplied with water that is thermostatically controlled to a temperature of at least 100 degrees F. and not to exceed 120 degrees F. at the fixture.

C. The water heater or combination of heaters shall be sized to provide at least six gallons per hour per bed at the above temperature range. (II)

D. Hot water supplied to the kitchen equipment/utensil washing sink shall be supplied at 120 degrees F. provided all kitchen equipment/utensils are chemically sanitized. For those facilities sanitizing with hot water, the sanitizing compartment of the kitchen equipment/utensil washing sink shall be capable of maintaining the water at a temperature of at least 180 degrees F.

E. Hot water provided for washing linen/clothing shall not be less than 160 degrees F. Should chlorine additives or other chemicals which contribute to the margin of safety in disinfecting linen/clothing be a part of the washing cycle, the minimum hot water temperature shall not be less than 110 degrees F., provided hot air drying is used. (II)

2302. Cross-connections (I).

There shall be no cross-connections in plumbing between safe and potentially unsafe water supplies. Water shall be delivered at least two delivery pipe diameters above the rim or points of overflow to each fixture, equipment, or service unless protected against back-siphonage by approved vacuum breakers or other approved back-flow preventers. A faucet or fixture to which a hose may be attached shall have an approved vacuum breaker or other approved back-flow preventer.

SECTION 2400--ELECTRICAL

2401. Receptacles (II).

A. Resident Room. Each resident room shall have duplex grounding type receptacles located to include one at the head of each bed.

B. Corridors. Duplex receptacles for general use shall be installed approximately 50 feet apart in all corridors and within 25 feet of the ends of corridors.

2402. Ground Fault Protection (I).

A. Ground fault circuit-interrupter protection shall be provided for all outside receptacles and bathrooms.

B. The facility shall provide ground fault circuit-interrupter protection for any receptacles within six feet of a sink or any other wet location. If the sink is an integral part of the metal splashboard grounded by the sink, the entire metal area is considered part of the wet location.

2403. Exit Signs (I).

A. In facilities licensed for six or more beds, required exits and ways to access thereto shall be identified by electrically-illuminated exit signs.

B. Changes in egress direction shall be marked with exit signs with directional arrows.

C. Exit signs in corridors shall be provided to indicate two directions of exit.

2404. Emergency Electric Service (I).

Emergency electric services shall be provided as follows:

A. Exit lights, if required;

B. Exit access corridor lighting;

C. Illumination of means of egress;

D. Fire detection and alarm systems, if required.

SECTION 2500--HEATING, VENTILATION, AND AIR CONDITIONING

2501. General (II).

A. The HVAC system shall be inspected at least once a year by a certified/licensed technician.

B. The facility shall maintain a temperature of between 72 and 78 degrees F. in resident areas.

C. No HVAC supply or return grill shall be installed within three feet of a smoke detector. (I)

D. HVAC grills shall not be installed in floors.

E. Intake air ducts shall be filtered and maintained to prevent the entrance of dust, dirt, and other contaminating materials. The system shall not discharge in such a manner that would be an irritant to the residents/staff/volunteers.

F. All kitchen areas shall be adequately ventilated in order for all areas to be kept free from excessive heat, steam, condensation, vapors, smoke, and fumes.

G. Each bath/restroom shall have either operable windows or have approved mechanical ventilation.

SECTION 2600--PHYSICAL PLANT

2601. Facility Accommodations/Floor Area (II).

A. Consideration shall be given to the preferences of the residents in determining an appropriate homelike atmosphere in resident rooms and activity/dining areas.

B. There shall be sufficient living arrangements providing for residents' quiet reading, study, relaxation, entertainment, or recreation, to include living, dining, and recreational areas available for residents' use.

C. Minimum square footage requirements shall be as follows: (II)

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1. Twenty square feet per licensed bed of living and recreational areas combined, excluding bedrooms, halls, kitchens, dining rooms, bathrooms, and rooms not available to the residents;

2. Fifteen square feet of floor space in the dining area per licensed bed.

D. All required care/services furnished at the facility shall be provided in a manner which does not require residents to ambulate from one site to another outside the building(s), nor which impedes residents from ambulating from one site to another due to the presence of physical barriers.

E. Methods for ensuring visual and auditory privacy between resident and staff/volunteers/visitors shall be provided as necessary.

2602. Resident Rooms.

A. A resident shall have the choice to furnish his/her room. Whether the resident or the facility furnishes the room, each resident room shall be equipped with the following as a minimum for each resident:

1. A comfortable single bed having a mattress with moisture-proof cover, sheets, blankets, bedspread, pillow, and pillowcases; roll-away type beds, cots, bunkbeds, and folding beds shall not be used. It is permissible to remove a resident bed and place the mattress on a platform or pallet or use a recliner provided the physician or other authorized healthcare provider has approved and the decision is documented in the ICP. (II)

EXCEPTION: In the case of a married couple sharing the same room, a double bed is permitted if requested. For all other requirements, this shall be considered a bedroom with two beds.

2. A closet or wardrobe, a bureau consisting of at least three drawers, and a compartmentalized bedside table/nightstand to adequately accommodate each resident's personal clothing, belongings, and toilet articles. Built-in storage is permitted.

EXCEPTION: In existing facilities, if square footage is limited, residents may share these storage areas; however, specific spaces within these storage areas shall be provided by the facility particular to each resident.

3. A comfortable chair for each resident occupying the room. In facilities licensed prior to the promulgation of this regulation, if the available square footage of the resident room will not accommodate a chair for each resident or if the provision of multiple chairs impedes resident ability to freely and safely move about within their room, at least one chair shall be provided by the facility and provisions made to have additional chairs available for temporary use in the resident's room by visitors.

B. If hospital-type beds are used, there shall be at least two lockable casters on each bed, located either diagonally or on the same side of the bed.

C. Beds shall not be placed in corridors, solaria, or other locations not designated as resident room areas. (I)

D. No resident room shall contain more than three beds. (II)

E. No resident room shall be located in a basement.

F. Access to a resident room shall not be by way of another resident room, toilet, bathroom, or kitchen.

G. Equipment such as bedpans, urinals, and hot water bottles, necessary to meet resident needs, shall be provided by the facility. Portable commodes shall be permitted in resident rooms only at night or in case of temporary illness, and suitably stored at all other times. (II)

EXCEPTION: Permanent positioning of a portable commode at bedside shall only be permitted if the room is private, the commode is maintained in a sanitary condition, and the room is of sufficient size to accommodate the commode.

H. Side rails may be utilized when required for safety and when ordered by a physician or other authorized healthcare provider. When there are special concerns, e.g., residents with dementia, side rail usage shall be monitored by staff members as per facility policies and procedures. (I)

I. In semi-private rooms, when personal care is being provided, arrangements shall be made to ensure privacy, e.g., portable partitions or cubicle curtains when needed or requested by a resident.

J. There shall be at least one (1) mirror in each resident room or resident bathroom. As an exception, when a resident's condition is such that having a mirror may be detrimental to his/her well-being, e.g., agitation and confusion associated with dementia, mirrors are not required.

K. Consideration shall be given to resident compatibility in the assignment of rooms for which there is multiple occupancy.

L. At least one private room shall be available in the facility in order to provide assistance in addressing resident compatibility issues, resident preferences, and accommodations for residents with communicable disease.

2603. Resident Room Floor Area.

A. Each resident room shall be an outside room with an outside window or door. (I)

B. In non-apartment units, the resident sleeping room floor area is a usable or net area and does not include wardrobes (built-in or freestanding), closets, or the entry alcove to the room. The following is the minimum floor space allowed: (II)

1. Rooms for only one resident: 100 square feet;
2. Rooms for more than one resident: 80 square feet per resident.

C. Resident sleeping rooms shall be of sufficient size to allow three feet between two beds. (II)

2604. Bathrooms/Restrooms (II).

A. Separate bathroom facilities shall be provided for live-in staff members/volunteers/public and/or family.

B. Toilets shall be provided in ample number to serve the needs of staff members/volunteers/public. The minimum number for residents shall be one toilet for each six licensed beds or fraction thereof.

C. There shall be at least one (1) handwash lavatory adjacent to each toilet. Liquid soap shall be provided in public restrooms and bathrooms used by more than one resident. Communal use of bar soap is prohibited. A sanitary individualized method of drying hands shall be available at each lavatory.

D. There shall be one bathtub or shower for each eight licensed beds or fraction thereof.

E. All bathtubs, toilets, and showers used by residents shall have approved grab bars securely fastened in a usable fashion.

F. Privacy shall be provided at toilets, urinals, bathtubs, and showers.

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G. Toilet facilities shall be at or adjacent to the kitchen for kitchen employees.

H. Facilities for handicapped persons shall be provided whether or not any of the residents are classified as handicapped.

I. All bathroom floors shall be entirely covered with an approved nonabsorbent covering. Walls shall be nonabsorbent, washable surfaces to the highest level of splash.

J. There shall be a mirror above each bathroom lavatory for residents' grooming.

K. An adequate supply of toilet tissue shall be maintained in each bathroom.

L. Easily cleanable receptacles shall be provided for waste materials. Such receptacles in toilet rooms for women shall be covered.

M. Bar soap, bath towels, and washcloths shall be provided to each resident as needed. Bath linens assigned to specific residents may not be stored in centrally located bathrooms. Provisions shall be made for each resident to properly keep their bath linens in their room, i.e., on a towel hook/bar designated for each resident occupying that room, or bath linens to meet resident needs shall be distributed as needed, and collected after use and stored properly, per Section 1706.

EXCEPTION: Bath linens assigned to specific residents for immediate use may be stored in the bathroom provided the bathroom serves a single occupancy (one resident) room, or is shared by occupants of adjoining rooms, for a maximum of six residents. A method that distinguishes linen assignment and discourages common usage shall be implemented.

2605. Doors (II).

A. All resident rooms and bath/restrooms shall have opaque doors for the purpose of privacy.

B. All glass doors, including sliding or patio type doors shall have a contrasting or other indicator that causes the glass to be observable, e.g., a decal located at eye level.

C. Bath/restroom door widths shall be at least 36 inches wide.

D. Doors to resident occupied rooms shall be at least 36 inches wide.

E. Doors that have locks shall be unlockable and openable with one action.

F. If resident room doors are lockable, there shall be provisions for emergency entry. There shall not be locks that cannot be unlocked and operated from inside the room.

G. All resident room doors shall be solid-core. Resident room doors shall be rated and provided with closers and latches as required by the codes referenced in Section 1902.

2606. Ramps (II).

A. At least one exterior ramp, accessible by all residents, staff members/volunteers, and visitors shall be installed from the first floor to grade.

B. The ramp shall serve all portions of the facility where residents are located.

C. The surface of a ramp shall be of nonskid materials.

D. Ramps in facilities with 11 or more licensed beds shall be of noncombustible construction. (I)

E. Ramps shall discharge onto a surface that is firm and negotiable by a wheelchair in all weather conditions and to a location accessible for loading into a vehicle.

2607. Handrails/Guardrails (II).

Handrails shall be provided on at least one side of each corridor/hallway.

EXCEPTION: In facilities with 10 beds or less, handrails are not required for interior corridor/hallway.

2608. Screens (II).

Windows, doors and openings intended for ventilation shall be provided with insect screens.

2609. Windows/Mirrors.

A. The window dimensions and maximum height from floor to sill shall be in accordance with the building codes, as applicable.

B. Where resident safety awareness is impaired, safety (non-breakable) mirrors shall be used.

2610. Janitor's Closet (II).

There shall be a lockable janitor's closet in all facilities. Each closet shall be equipped with a mop sink or receptor and space for the storage of supplies and equipment.

2611. Storage Areas.

A. Adequate general storage areas shall be provided for resident and staff/volunteer belongings, equipment, and supplies as well as clean linen, soiled linen, wheel chairs, and general supplies and equipment.

B. Storage buildings on the premises shall meet the building codes requirements regarding distance from the licensed building. Storage in buildings other than on the facility premises shall be secure and accessible. An appropriate controlled environment shall be provided if necessary for storage of items requiring such an environment.

C. In mechanical rooms used for storage, the stored items shall be located away from mechanical equipment and shall not be a type of storage that might create a fire or other hazard. (I)

D. Supplies/equipment shall not be stored directly on the floor. Supplies/equipment susceptible to water damage/contamination shall not be stored under sinks or other areas with a propensity for water leakage.

E. In facilities licensed after the promulgation of these regulations with 16 beds or more, there shall be a soiled linen storage room which shall be designed, enclosed, and used solely for that purpose, and provided with mechanical exhaust directly to the outside.

2612. Telephone Service.

A. At least one (1) telephone shall be available on each floor of the facility with at least one (1) active main or fixed-line telephone service available.

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B. At least one telephone shall be provided by the facility on each floor for staff members/volunteers to conduct routine business of the facility and to summon assistance in the event of an emergency; pay station phones are not acceptable for this purpose. Residents shall have telephone privacy pursuant to Section 1001.L.

2613. Location.

A. Transportation. The facility shall be served by roads that are passable at all times and are adequate for the volume of expected traffic.

B. Parking. The facility shall have a parking area to reasonably satisfy the needs of residents, staff members/volunteers, and visitors.

C. Access to firefighting equipment. Facilities shall maintain adequate access to and around the building(s) for firefighting equipment. (I)

2614. Outdoor Area.

A. Outdoor areas where unsafe, unprotected physical hazards exist shall be enclosed by a fence or a natural barrier of a size, shape, and density that effectively impedes travel to the hazardous area. (I)

B. Mechanical or equipment rooms that open to the outside of the facility shall be kept protected from unauthorized individuals. (II)

C. If a swimming pool is part of the facility, it shall be designed, constructed, and maintained pursuant to R.61-51. (II)

D. There shall be sufficient number of outside tables and comfortable chairs to meet the needs of the residents.

SECTION 2700--SEVERABILITY

2701. General.

In the event that any portion of these regulations is construed by a court of competent jurisdiction to be invalid, or otherwise unenforceable, such determination shall in no manner affect the remaining portions of these regulations, and they shall remain in effect as if such invalid portions were not originally a part of these regulations.

SECTION 2800--GENERAL

2801. General.

Conditions that have not been addressed in these regulations shall be managed in accordance with the best practices as interpreted by the Department.

Fiscal Impact Statement:

Implementation of this regulation will not require additional resources. There is no anticipated additional cost by the Department or State government due to any inherent requirements of this regulation. There are no external costs anticipated.

Statement of Need and Reasonableness:

The Department's Bureau of Health Facilities Licensing formulated this statement determined by analysis pursuant to 1976 Code Section 1-23-115 C(1)-(3) and (9)-(11).

DESCRIPTION OF REGULATION: R.61-84, *Standards for Licensing Community Residential Care Facilities*.

Purpose: The amendments to R.61-84, *Standards for Licensing Community Residential Care Facilities* will support the Department's goal of promoting and protecting the health of the public in a more efficient and effective manner. Community residential care facilities are facilities which offer room and board and which, unlike a boarding house, provide/coordinate a degree of personal care for a period of time in excess of 24 consecutive hours for two or more persons, 18 years old or older, not related to the licensee within the third degree of consanguinity. These facilities are designed to accommodate residents' changing needs and preferences, maximize residents' dignity, autonomy, privacy, independence, and safety, and encourage family and community involvement. The amendments pertain to provisions relating to statutory mandates, medication management, meal service, emergency procedures, design and construction, fire and life safety, and overall licensing requirements for community residential care facilities. In addition, corrections have been made for clarity and readability, grammar, references, codification and overall improvement to the text of the regulation.

Legal Authority: 1976 Code Section 44-7-260 and 44-7-370(A).

Plan for Implementation: Upon approval from the S.C. General Assembly and publication as a final regulation in the South Carolina State Register, a copy of R.61-84, that includes these amendments, will be available electronically on the Department's website under the Health Regulations Category at <http://www.scdhec.gov/Agency/RegulationsAndUpdates/LawsAndRegulations/> and subsequently in the Code of Regulations of the S.C. Code of Laws. Printed copies will be available for a fee from the Department's Freedom of Information Office. Staff will educate the regulated community on the provisions of the Act and the requirements of the regulation.

DETERMINATION OF NEED AND REASONABLENESS OF THE REGULATION BASED ON ALL FACTORS HEREIN AND EXPECTED BENEFITS:

The Department last amended R.61-84 June 25, 2010. 1976 Code Section 1-23-120(J) requires state agencies to perform a review of its regulations every five years and update them if necessary.

Statutory mandates, issues found in the review, and the necessity for overall updates renders the amendments needed and reasonable. The amendments improve the construction requirements regarding the licensee. In addition, corrections have been made for clarity and readability, grammar, references, codification and overall improvement to the text of the regulation.

DETERMINATION OF COSTS AND BENEFITS:

Internal Costs: Implementation of this regulation will not require additional resources. There is no anticipated additional cost by the Department or State government due to any inherent requirements of this regulation.

External Costs: There are no external costs anticipated.

External Benefits: The amendments update standards of licensure, procedures, and construction requirements for community residential care facilities while maintaining the interests of residents' health and safety and lessening provider burdens. The amendments update the standards to statutory mandates. The amendments will benefit the regulated community by clarifying the regulations and increasing their ease of use.

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UNCERTAINTIES OF ESTIMATES:

None.

EFFECT ON THE ENVIRONMENT AND PUBLIC HEALTH:

Implementation of this regulation should not compromise the protection of the environment.

The amendments seek to reasonably simplify the construction requirements while providing clarification and streamlining standards in the interest of resident care and safety for the community residential care facilities. The amendments also seek to align the regulation with statutory requirements.

DETRIMENTAL EFFECT ON THE ENVIRONMENT AND PUBLIC HEALTH IF THE REGULATION IS NOT IMPLEMENTED:

Implementation of this regulation should not compromise the protection of the environment.

If the revision is not implemented, unnecessary construction burdens may be placed on community residential care facilities. The amendments seek to improve the definitions pertinent to community residential care facilities, licensure requirements, meal service requirements, construction requirements to be current with building codes and fire and life safety codes while streamlining the standards for clarification in the interest of resident care and safety. In addition, the amendments align the regulation with statutory requirements.

Statement of Rationale:

The Department revises this regulation pursuant to the 1976 Code Section 1-23-120(J) requirement that state agencies perform a review of its regulations every five years and update them if necessary. The amendments seek to improve the regulation to be aligned with statutory mandates, to improve licensure requirements, meal service requirements, the references to building codes, constructions requirements, and fire and life safety codes. In addition, corrections have been made for clarity and readability, grammar, references, codification and overall improvement to the text of the regulation.

Document No. 4498

DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL

CHAPTER 61

Statutory Authority: 1976 Code Section 44-7-260

61-75. Standards for Licensing Day Care Facilities for Adults

Synopsis:

The purpose of the amendment is to clarify regulations pertaining to facilities for adults 18 years of age or older, which offer in a group setting a program of individual and group activities and therapies are affected by this regulation. The amendments herein include the Department's Bureau of Health Facilities Licensing effort to improve licensing procedures, care of participants, infection control and sanitation, functional safety, emergency procedures, design and construction, fire and life safety, and overall licensing requirements for day care facilities for adults. In addition, corrections have been made for clarity and readability, grammar, references, codification and overall improvement to the text of the regulation.

A Notice of Drafting was published in the *State Register* on July 25, 2014.

Section-by-Section Discussion of Amendments

Correct the statutory authority under the title of the regulation in the text.

TABLE OF CONTENTS

The Table of Contents was added to reflect the contents of the regulation.

61-75.101 Definitions

Section 61-75.101 title was revised for clarity. The definitions of 61-75.101.A Abuse, 61-75.101.B Administrator, 61-75.101.D Authorized Healthcare Provider, 61-75.101.I Exploitation, and 61-75.101.L Neglect have been added. The definitions of 61-75.101.C Adult Day Care Services, 61-75.101.E Day Care Facility for Adults, 61-75.101.J Licensee, 61-75.101.M Participant, and 61-75.101.N Person have been amended. The definitions of 61-75.A.1(b) Board, 61-75.A.1(g) Existing Facility, 61-75.A.1(h) Fire Safety Authority, and 61-75.A.1(k) New Facility have been deleted. The remaining definitions were renumbered to adjust the codification.

61-75.102 Licensure Requirements

Section 61-75.102.A was revised to clarify the license for Day Care Facilities for Adults. Section 61-75.102.B was added to clarify compliance. Section 61-75.102.C was revised to current statutory reference documenting. Section 61-75.102.D was revised to clarify the effective day and term of license. Sections 61-75.102.F, 61-75.102.G, 61-75.102.I, 61-75.102.J and 61-75.102.N were added to clarify licensure requirements. The remaining sections were renumbered to adjust the codification.

61-75.103 Facility Closure

Section 61-75.103 was added to clarify the procedure for when a facility requests permanent and/or temporary closure.

61-75.104 Zero Census

Section 61-75.104 was added to clarify the procedure for when a facility has zero census.

SECTION 200 – ENFORCING REGULATIONS

The section title of Section 200 was renumbered to adjust the codification and was re-titled to clarify the section contents.

61-75.201 General (Enforcing Regulations)

Section 61-75.201 was added to clarify the Department's means of enforcing the regulation.

61-75.202 Inspections/Investigations

Section 61-75.202 was added to clarify the inspection and investigation requirements.

61-75.203 Consultations

Section 61-75.203 was added to allow facilities to request consultation by the Department, or when otherwise deemed appropriate.

SECTION 300 – ENFORCEMENT ACTIONS

Section 300 was renumbered to adjust the codification.

61-75.301 General (Enforcement Actions)

Section 61-75.301.A was revised to clarify the Departments use of monetary penalty when a facility is found in violation.

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61-75.302 Violation Classifications

Section 61-75.302 was renumbered to adjust for codification. Former Section 61-75.A(4) Hearings and Appeals was deleted as the procedures are written in statute.

SECTION 400 – POLICIES AND PROCEDURES

Section 400 was renumbered to adjust codification.

61-75.401 Policies and Procedures

Section 61-75.401 was revised to clarify the facility shall develop and implement written policies and procedures.

61-75.402 Administrator

Section 61-75.402. A was revised to amend the reporting time in change of the administrator.

61-75.403 Administrative Record

Section 61-75.403 was revised to amend the administrative record requirement. The remaining sections were renumbered to adjust the codification.

61-75.404 Personnel

Section 61-75.404.A was added to require criminal background checks for all direct care staff members and volunteers. Section 61-75.404.B was revised for grammatical changes. Section 61-75.404.D was added to clarify the employee health assessment process. Section 61-75.404.F was amended to clarify in-service training requirements. The remaining sections were renumbered to adjust the codification. Section 61-75.404.H was relocated and amended to clarify the first aid training. Former Section 61-75.C.(6) was deleted as the Client Patient Act was repealed from statute and is no longer required. The remaining sections were renumbered to adjust the codification.

SECTION 500 – CARE OF PARTICIPANTS

Section 500 was renumbered to adjust codification.

61-75.501 Activities and Programs

Section 61-75.501.A was revised to improve the clarity of the offered activities and therapies. Section 61-75.501.G was revised to increase the ratio of participants to emergency/sick beds and to clarify roll-away beds are not permitted. Sections 61-75.501.H and 61-75.501.I were corrected for grammar. The remaining sections were renumbered to adjust the codification.

61-75.502 Medical Needs

Sections 61-75.502.A and 61-75.502.D were corrected for grammar. Section 61-75.502.B was added for clarity regarding the pre-enrollment physical examination for a patient transferring from one facility to another. Section 61-75.502.E.4 Antiseptic cleanser was added to the requirement of the standard first-aid kit. The remaining sections were renumbered to adjust the codification.

61-75.503 Participant Records

Section 61-75.503.A.1 was revised to include a photo for identification purposes. Section 61-75.503.A.4.a was amended to include language to clarify the initial assessment. Sections 61-75.503.A.4 and 61-75.503.A.4.c were amended to correct grammar. Section 61-75.503.A.4.d was amended to allow review of records as changes in participant needs occur. Section 61-75.503.A.7 was revised to include the participant's responsible party/sponsor in the written acknowledgement. The remaining sections were renumbered to adjust the codification.

SECTION 600 FOOD SERVICE

Section 600 was renumbered to adjust codification.

61-75.601 General (Food Service)

Section 61-75.601 was revised to unify the language from several parts of the regulation and relocated to the Food Service section to regulate those facilities preparing food will be regulated, inspected, and permitted pursuant to Regulation 61-25.

61-75.602 Meals and Special Diets

Section 61-75.602 was revised to combine former sections 61-75.E(1) and 61-75.E(2) to create a new section regarding meals and special diets. The remaining sections were deleted and renumbered to adjust the codification.

SECTION 700 FUNCTIONAL SAFETY

Section 700 was renumbered to adjust the codification.

Former Section 61-75.F(1) General (Functional Safety)

Section 61-75.F(1) was deleted and relocated to Section 61-75.401 requiring a facility to develop and implement written policies and procedures.

61-75.701 Maintenance

Section 61-75.701 was revised to delete the building code requirements as they are adopted by the South Carolina Building Codes Council.

61-75.702 Emergency/Disaster Preparedness

Section 61-75.702.A was revised to include the floor diagram posted for evacuation of participants, staff, and visitors in case of fire or other emergency. Section 61-75.702.C was revised to clarify the emergency call data shall be posted in a conspicuous place. The remaining sections were renumbered to adjust the codification.

61-75.703 Accidents/Incidents

Section 61-75.703.A was added to clarify the reporting requirements for accidents and incidents. Section 61-75.703.B was added to clarify the information that needs to be in the report.

SECTION 800 INFECTION CONTROL AND SANITATION

Section 800 was renumbered to adjust the codification.

61-75.801 General (Infection Control and Sanitation)

Section 61-75.801 was corrected for grammar.

61-75.802 Linen and Laundry

Section 61-75.802.B was corrected for grammar. Section 61-75.802.C was amended to clarify the requirements of handwash lavatories. The remaining sections were renumbered to adjust the codification.

61-75.806 Pets

Section 61-75.806 was amended to clarify requirements for facilities allowing pets.

61-75.807 Tuberculosis Risk Assessment

Sections 61-75.807.A and 61-75.807.B were added to clarify the Department's TB guidelines.

61-75.808 Staff Tuberculosis Screening

Sections 61-75.808.A, 61-75.808.B, 61-75.808.C, and 61-75.808.D were added to clarify the Department's TB guidelines.

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SECTION 900 STATEMENT OF RIGHTS OF ADULT DAY CARE PARTICIPANTS

Section 900 was renumbered to adjust the codification. Section 900 was relocated from former Section 61-75.N.

61-75.901 Statement of Rights of Adult Day Care Participants

Section 61-75.901.A was relocated and renumbered to adjust the codification. Section 61-75.901.B was added to allow for a grievance and complaint procedure to be included in the Statement of Rights. Section 61-75.901.C was added to state that the Statement of Rights shall be posted in a conspicuous location in the facility.

SECTION 1000 DESIGN AND CONSTRUCTION

Section 1000 was renumbered to adjust the codification. Section 1000 was relocated from former Section 61-75.H. Sections 61-75.1001, 61-75.1002, 61-75.1003, and 61-75.1004 were revised to current construction requirements.

SECTION 1100 FIRE PROTECTION EQUIPMENT AND SYSTEMS

Section 1100 was renumbered to adjust the codification. Section 1100 was relocated from former Section 61-75.I. Sections 61-75.1101 and 61-75.1102 were revised to current construction requirements.

SECTION 1200 PREVENTIVE MAINTENANCE EQUIPMENT AND UTILITIES

Section 1200 was renumbered to adjust the codification.

61-75.1201 General (Preventive Maintenance Equipment and Utilities)

Section 61-75.1201 was added to clarify the preventive maintenance equipment and utilities requirement.

61-75.1202 Signal System

Section 61-75.1202 was revised to clarify the current signal system requirements.

61-75.1203 Restrooms

Section 61-75.1203 was revised to clarify the current construction requirements.

61-75.1204 Janitor's Closets

Section 61-75.1204 was revised to clarify the current janitor's closets requirements.

61-75.1205 Storage Areas

Section 61-75.1205 was revised to clarify the current storage areas requirements.

61-75.1206 Elevators

Section 61-75.1206 was revised to clarify the current inspection requirements for elevators.

61-75.1207 Telephone Service

Section 61-75.1207, formerly Section 61-75.H(7)(d), was relocated and renumbered to adjust for codification.

61-75.1208 Location

Section 61-75.1208, formerly Section 61-75.H(7), was relocated and renumbered to adjust for codification.

61-75.1209 Furnishings/Equipment

Section 61-75.1209 was added to clarify the furnishings and equipment requirements.

61-75.1210 Water Requirements

Section 61-75.1210, formerly Section 61-75.H(9), was relocated and revised to current water requirement standards. The remaining sections were renumbered to adjust the codification.

61-75.1211 Panelboards

Section 61-75.1211 was added to clarify the construction requirements.

61-75.1212 Lighting

Section 61-75.1212, formerly Section 61-75.J(2), was relocated and revised to current construction requirements. The remaining sections were renumbered to adjust for codification.

61-75.1213 Heating, Ventilation, and Air Conditioning (HVAC)

Section 61-75.1213, formerly Section 61-75.H(8)(g), was relocated and revised to current construction requirements. The remaining sections were renumbered to adjust for codification.

SECTION 1300 SEVERABILITY

Section 1300 was renumbered to adjust the codification.

61-75.1301 General (Severability)

Section 61-75.1301 was added to clarify the effectiveness of the regulation.

SECTION 1400 GENERAL

Section 61-75.1400 was renumbered to adjust the codification.

61-75.1401 General

Section 61-75.1401 was revised to clarify best practices as interpreted by the Department.

Instructions: Replace Regulation 61-75, Standards for Licensing Day Care Facilities for Adults, in its entirety.

Text:

61-75. Standards for Licensing Day Care Facilities for Adults.

Statutory Authority: 1976 Code Section 44-7-260

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SECTION 100 – DEFINITIONS AND GENERAL REQUIREMENTS

101. Definitions

A. Abuse. Physical abuse or psychological abuse.

1. Physical Abuse. The act of intentionally inflicting or allowing to be inflicted physical injury on a participant by an act or failure to act. Physical abuse includes, but is not limited to, slapping, hitting, kicking, biting, choking, pinching, burning, actual or attempted sexual battery, use of medication outside the standards of reasonable medical practice for the purpose of controlling behavior, and unreasonable confinement. Physical abuse also includes the use of a restrictive or physically intrusive procedure to control behavior for the purpose of punishment except that a therapeutic procedure prescribed by a licensed physician or other authorized healthcare provider or that is part of a written plan of care by a physician or other authorized healthcare provider is not considered physical abuse. Physical abuse does not include altercations or acts of assault between participants.

2. Psychological Abuse. The deliberate use of any oral, written, or gestured language or depiction that includes disparaging or derogatory terms to a participant or within the participant's hearing distance, regardless of the participant's age, ability to comprehend, or disability, including threats or harassment or other forms of intimidating behavior causing fear, humiliation, degradation, agitation, confusion, or other forms of serious emotional distress.

B. Administrator. The individual responsible for the day-to-day management of the Day Care Facility for Adults.

C. Adult Day Care Services. Activities and therapies offered in a Day Care Facility for Adults through an individualized plan of care which sets forth measurable goals or behaviorally stated objectives, with such services being designed to activate, motivate, and retrain impaired or other categories of adults to enable them to sustain or regain functional independence.

D. Authorized Healthcare Provider. An individual authorized by law and currently licensed in South Carolina to provide specific treatments, care, or services to participants, *e.g.*, advanced practice registered nurse, physician assistant.

E. Day Care Facility for Adults. A facility, for adults 18 years of age or older, which offers in a group setting a program of individual and group activities and therapies. The program is directed toward providing community-based day care services for those adults in need of a supportive setting, thereby preventing unnecessary institutionalization. The program shall provide a minimum of four (4) and a maximum of fourteen (14) hours of operation a day.

F. Department. The South Carolina Department of Health and Environmental Control.

G. Dietitian. A person who is registered by or meets the requirements of the American Dietetic Association and has at least one (1) year of experience in clinical nutrition.

H. Direct Care Staff. Individuals responsible for the provision of care and supervision of the participants.

I. Exploitation.

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1. Causing or requiring a participant to engage in activity or labor that is improper, unlawful, or against the reasonable and rational wishes of the participant;

2. An improper, unlawful, or unauthorized use of the funds, assets, property, power of attorney, guardianship, or conservatorship of a participant by an individual for the profit or advantage of that individual or another individual; or

3. Causing a participant to purchase goods or services for the profit or advantage of the seller or another individual through undue influence, harassment, duress, force, coercion, or swindling by overreaching, cheating, or defrauding the participant through cunning arts or devices that delude the participant and cause him or her to lose money or other property.

4. Exploitation does not include requiring a participant to participate in an activity or labor that is a part of a written plan of care or prescribed or authorized by the participant's attending physician.

J. Licensee. The person on whom rests the ultimate responsibility and authority for the conduct of the Day Care Facility for Adults.

K. Licensing Agency. The Department of Health and Environmental Control.

L. Neglect. The failure or omission of a direct care staff member or direct care volunteer to provide the care, goods, or services necessary to maintain the health or safety of a participant including, but not limited to, food, clothing, medicine, shelter, supervision, and medical services. Failure to provide adequate supervision resulting in harm to participants, including altercations or acts of assault between participants, may constitute neglect. Neglect may be repeated conduct or a single incident that has produced or could result in physical or psychological harm or substantial risk of death. Noncompliance with regulatory standards alone does not constitute neglect.

M. Participant. An adult, 18 years and above, who is receiving service in a Day Care Facility for Adults.

N. Person. An individual, trust or estate, partnership, corporation including an association, joint stock company, state, political subdivision, or instrumentality including a municipal corporation of a state, or any legal entity recognized by the State.

O. Sponsor: A family member, guardian, agency, or other person who acts on behalf of the participant.

102. Licensure Requirements

A. License. No person, private or public organization, political subdivision, or governmental agency shall establish, operate, maintain, or represent itself (advertise/market) as a Day Care Facility for Adults within South Carolina without possessing a valid license issued annually by the Department.

B. Compliance. A license shall not be issued to a proposed facility that has not been previously and continuously licensed under Department regulations until the licensee has demonstrated to the Department that the proposed facility is in substantial compliance with the licensing standards. A copy of the licensing standards shall be maintained at the facility and accessible to all staff members/volunteers. A new facility, or one that has not been continuously licensed under these or prior standards, shall not provide care to participants until it has been issued an initial license.

C. Issuance of License. A license is issued pursuant to the provisions of 1976 Code Section 44-7-260(A), as amended, and the regulations promulgated thereunder, and shall be posted in a conspicuous place in a public area within the facility. The issuance of a license does not guarantee adequacy of individual care, treatment, personal safety, fire safety or the well-being of any occupant of a facility. A license is not assignable or

transferable and is subject to revocation by the Department for failure to comply with the laws and regulations of the State of South Carolina.

D. Effective Date and Term of License. A license shall be effective for a twelve (12) month period following the date of issue and shall expire one (1) year following such date.

E. Separate Licenses. Separate licenses are required for facilities not maintained on the same premises. A single license or separate licenses may be issued for facilities maintained in separate buildings on the same premises.

F. Facility Name. No proposed facility shall be named nor shall any existing facility have its name changed to the same or similar name as any other facility licensed in South Carolina. The Department shall determine if names are similar. If the facility is part of a "chain operation" it shall then have the geographic area in which it is located as part of its name.

G. Application. Applicants for a license shall submit to the Department a completed application on a form prescribed and furnished by the Department prior to initial licensing and periodically thereafter at intervals determined by the Department.

H. Licensing Fees. The annual license fee shall be \$3.00 for each licensed participant. Such fees shall be made payable to the Department of Health and Environmental Control and are not refundable.

I. Late Fee. Failure to submit a renewal application or fee thirty (30) days or more after the license expiration date may result in a late fee of \$75.00 or twenty-five percent (25%) of the licensing fee amount, whichever is greater, in addition to the licensing fee. Continual failure to submit completed and accurate renewal applications and/or fees by the time-period specified by the Department may result in an enforcement action.

J. Change of License.

1. A facility shall request issuance of an amended license by application to the Department prior to any of the following circumstances:

- a. Change of ownership by purchase or lease;
- b. Change of facility's name or address; or
- c. Change in licensed number of participants.

2. Changes in facility name or address (as notified by the post office) shall be accomplished by application or by letter from the licensee.

K. Day Care Facilities for Adults shall not serve participants whose needs exceed resources outlined in these regulations. (II)

L. Number of Participants. No facility shall at any given time care for more participants than approved and so stated on the face of the license. (II)

M. Rights of Participants. A Statement of Rights of Adult Day Care Participants is in Section 901 of this regulation and shall be posted in a conspicuous place in the facility.

N. Exceptions to Licensing Standards. The Department may make exceptions to these standards where the Department determines the health, safety, and well-being of participants are not compromised, and provided the standard is not specifically required by statute.

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103. Facility Closure

A. Prior to the permanent closure of a facility, the licensee shall notify the Department in writing of the intent to close and the effective closure date. Within ten (10) days of the closure, the facility shall notify the Department of the provisions for the maintenance of the records. On the date of closure, the license shall be returned to the Department.

B. In instances where a facility temporarily closes, the licensee shall notify the Department in writing within fifteen (15) days prior to temporary closure. At a minimum this notification shall include, but not be limited to: the reason for the temporary closure, the manner in which the records are being stored, and the anticipated date for reopening. The Department shall consider, upon appropriate review, the necessity of inspecting and determining the applicability of current construction standards of the facility prior to its reopening. If the facility is closed for a period longer than one (1) year, and there is a desire to re-open, the facility shall re-apply to the Department for licensure and shall be subject to all licensing requirements at the time of that application, including construction-related requirements for a new facility.

104. Zero Census

In instances when there have been no participants in a facility for any reason for a period of ninety (90) days or more, the facility shall notify the Department in writing that there have been no admissions, no later than the 100th day following the date of departure of the last active participant. At the time of that notification, the Department shall consider, upon appropriate review of the situation, the necessity of inspecting the facility prior to any new and/or re-admissions to the facility. The facility shall still submit an application and pay the licensing fee to keep the license active, even though the facility is at zero census or temporarily closed. If the facility has no participants for a period longer than one (1) year, and there is a desire to admit a participant, the facility shall re-apply to the Department for licensure and shall be subject to all licensing requirements at the time of that application, including construction-related requirements for a new facility.

SECTION 200 – ENFORCING REGULATIONS

201. General

The Department shall utilize inspections, investigations, consultations, and other pertinent documentation regarding a proposed or licensed facility in order to enforce this regulation.

202. Inspections/Investigations

A. Inspections by the Department shall be conducted prior to initial licensing of a facility and subsequent inspections conducted as deemed appropriate by the Department. (I)

B. All facilities are subject to inspection/investigation at any time without prior notice by individuals authorized by South Carolina Code of Laws. When staff members/volunteers/participants are absent, the facility shall provide information to those seeking legitimate access to the facility, including visitors, as to the expected return of staff members/volunteers/participants. (I)

C. Individuals authorized by South Carolina law shall be granted access to all properties and areas, objects, and records in a timely manner and have the authority to require the facility to make photocopies of those documents required in the course of inspections or investigations. Photocopies shall be used only for purposes of enforcement of regulations and confidentiality shall be maintained except to verify the identity of individuals in enforcement action proceedings. Physical area of inspections shall be determined by the extent to which there is potential impact/affect upon participants as determined by the inspector. (I)

D. When there is noncompliance with the licensing standards, the facility shall submit an acceptable written plan of correction to the Department that shall be signed by the administrator and returned by the date specified on the report of inspection/investigation. The written plan of correction shall describe: (II)

1. The actions taken to correct each cited deficiency;
2. The actions taken to prevent recurrences (actual and similar); and
3. The actual or expected completion dates of those actions.

E. The Department may charge a fee for plan reviews, construction inspections and licensing inspections.

203. Consultations

Consultations shall be provided by the Department as requested by the facility or as deemed appropriate by the Department.

SECTION 300 – ENFORCEMENT ACTIONS

301. Enforcement Actions

When the Department determines that a facility is in violation of any statutory provision, rule, or regulation relating to the operation or maintenance of such facility, the Department, upon proper notice to the licensee, may impose a monetary penalty, deny, suspend, or revoke licenses.

302. Violation Classifications

Violations of standards in this regulation are classified as follows:

A. Class I violations are those which the Department determines to present an imminent danger to the health and welfare of the participants of the facility or a substantial probability that death or serious physical harm could result therefrom. A physical condition, one or more practices, means, methods or operations in use in a facility may constitute such a violation. The condition or practice constituting a Class I violation shall be abated or eliminated immediately unless a fixed period of time, as stipulated by the Department, is required for correction. Each day such violation shall exist after expiration of said time shall be considered a subsequent violation.

B. Class II violations are those, other than Class I violations, which the Department determines to have a direct or immediate relationship to the health, safety or security of the facility's participants. The citation of a Class II violation shall specify the time within which the violation is required to be corrected. Each day such violation shall exist after expiration of said time shall be considered a subsequent violation.

C. Class III violations are those which are not classified as serious in these regulations or those which are against the best practices as interpreted by the Department. The citation of a Class III violation shall specify the time within which the violation is required to be corrected. Each day such violation shall exist after expiration of said time shall be considered a subsequent violation.

D. Class I and II violations are indicated by notation after each applicable section, i.e., (I) or (II). Violations of sections which are not annotated in that manner denote Class III violations.

E. The Department shall exercise discretion in arriving at its decision to penalize a facility. The Department will consider the following factors: specific conditions and their impact or potential impact on health, safety or

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welfare; efforts by the facility to correct; overall conditions; history of compliance; any other pertinent conditions.

F. When imposing a monetary penalty, the Department may invoke 1976 Code Section 44-7-320(C) to determine the dollar amount or may utilize the following schedule:

MONETARY PENALTY RANGES			
Frequency of Violation of standard within a 24-month period	Class I	Class II	Class III
1st	\$200-1000	\$100-500	\$0
2nd	500-2000	200-1000	100-500
3rd	1000-5000	500-2000	200-1000
4th	5000	1000-5000	500-2000
5th	5000	5000	1000-5000
6th	5000	5000	5000

SECTION 400 – POLICIES AND PROCEDURES

401. Policies and Procedures

A. Written policies and procedures addressing each section of this regulation regarding participant care, rights, and the operation of the facility shall be developed and implemented, and revised as required in order to accurately reflect actual facility operation. The facility shall establish a time-period for review of all policies and procedures and such reviews shall be documented. The facility shall make its policies and procedures available to staff at all times and available to participants and their families and/or caregivers for inspection upon request. They shall include but not be limited to:

1. Purpose of the facility, to include scope and quality of services;
2. Criteria for enrollment;
3. Organizational structure defining lines of authority;
4. Fees charged;
5. Ensuring the compliance with all relevant Federal, State, and local laws which govern operations of the facility; and
6. Rights and responsibilities of participants.

402. Administrator

A. The governing authority or owner shall select a full-time Administrator to manage the facility. The governing authority shall report within seventy-two (72) hours to the Department in writing any change in the position of the Administrator. The governing authority, owner, or Administrator shall appoint in writing an individual to act in the absence of the Administrator.

B. An Administrator shall have a bachelor's degree, or at least two (2) years of college or technical school with at least an additional four (4) years of experience in the field of nursing, social service, sociology, psychology or in an area closely related to health and social development for the aging. (II)

403. Administrative Records

The facility shall have on file at the facility the following documents and references:

- A. A record of annual inspection by the fire safety authority having jurisdiction, to verify that all applicable fire safety requirements have been met; (I)
- B. A record of programs and activities;
- C. A complete record of daily attendance of participants and staff for the previous six (6) months;
- D. The daily menu served for the previous six (6) months with substitute food items noted;
- E. Current regulations;
- F. Reports of inspections, reviews, and corrective actions taken related to licensure for the previous three (3) years;
- G. Annual elevator safety inspections, if applicable; and (II)
- H. Annual heating, ventilation, and air conditioning inspection report.

404. Personnel

- A. Direct care staff members and volunteers shall undergo a criminal background check prior to being employed or contracting with a Day Care Facility for Adults pursuant to S.C. Code Section 44-7-2910.
- B. Each facility shall have a staff capable of providing program services and supervision to the participants. The minimum staff/participant ratio shall be one (1) direct care staff member to eight (8) participants. Volunteers and interns may count as staff. (II)
- C. There shall be accurate and current information maintained regarding all staff members/volunteers of the facility, to include at least address, telephone number, and personal/work/training background.
- D. All staff members/direct care volunteers who have contact with participants shall have a health assessment within twelve (12) months prior to initial participant contact. The health assessment shall include tuberculin skin testing as described in Sections 807 and 808.
- E. All new staff members/direct care volunteers shall have documented orientation to the organization and environment of the facility, specific duties and responsibilities of staff members/direct care volunteers, and participants' needs within twenty-four (24) hours of their first day on the job in the facility.
- F. In-service training programs shall be planned and provided for all employees to ensure and maintain their understanding of their duties and responsibilities. Records shall be maintained to reflect program content and individuals attending. Documentation of all in-service training shall be signed and dated by both the individual providing the training and the individual receiving the training. A signature for the individual providing the training may be omitted for computer-based training. The following training shall be provided prior to participant contact at a minimum:

- 1. Fire Safety Measures;
- 2. Infection Control;

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3. Participant Rights; and

4. Confidentiality of participant information and records and the protecting of participants' rights, including prevention of abuse, neglect, and exploitation;

G. A personnel record folder shall be maintained for each employee and for each direct care and food service volunteer. The folder shall contain a current job description that reflects the employee's responsibilities and work assignments, and documentation indicating that job orientation, in-service education, annual performance evaluations (except for volunteers), pre-employment physical and TB skin tests were performed.

H. At least one (1) staff member who is certified with American Red Cross first-aid training and CPR (or American Heart Association CPR) and capable of recognizing symptoms of distress shall be present when participants are in the facility. If the staff member is a licensed nurse, first-aid training will not be required. (I)

SECTION 500 – CARE OF PARTICIPANTS

501. Activities and Programs

A. Activities and therapies shall be offered through individualized plans of care which set forth measurable goals or behaviorally-stated objectives. These shall be designed to activate, motivate, and/or assist participants to enable them to sustain or regain functional independence. Group and individual type services shall be provided.

B. A planned, well-balanced program of activities and services shall be provided at each facility.

C. Each facility shall provide supervision and personal care training in order to assist the participant in developing self-help skills.

D. Each facility shall make available social, group, individual, educational, recreational, and other activities such as:

1. Opportunities for arts and crafts;
2. Daily exercise by the participant;
3. Development of hobbies;
4. Assistance with community and personal referral activities;
5. Reading of magazines and books, television viewing, and listening to the radio;
6. Excursions or outings to points of interest; or
7. Planned indoor and outdoor recreation.

E. A schedule of the program(s) shall be posted at all times.

F. Rest periods shall be provided when needed or as prescribed by a physician.

G. The emergency/sick bed ratio shall be one (1) bed per twenty (20) licensed participants or fraction thereof. The emergency/sick beds that are required shall be set up and ready for use. Roll-away beds are not permitted. The facility shall include private room(s), cubicle curtains, portable partitions, or other means to insure privacy of participants when utilizing the bed(s). (II)

H. A facility shall provide at least one chair with arms per participant, including one recliner or comfortable lounge chair per four participants, for resting or other leisure activities. (II)

I. A facility shall provide sufficient table space for dining and crafts.

502. Medical Needs

A. A physical examination is required within sixty (60) days prior to the enrollment of any participant. The physician's report shall include recommendations regarding limitations of activities, special diet, medications (name, type, dosage and whether the individual is capable of self-administering), and other considerations to determine whether appropriate services are available. The facility shall provide dietary and other health needs. The physical and mental condition of a participant must not confine him/her to a bed. (II)

B. In the event of a transfer of a participant from one licensed facility to another licensed facility, a new, pre-enrollment physical examination is not required if the new facility obtains a copy of the latest physical examination of the transferred participant, provided the latest physical exam occurred within the prior two (2) years.

C. Subsequent physical examinations or periodic health screening to determine a participant's ability to continue in the program is required at least every two (2) years.

D. The facility shall properly store and safeguard medications to prevent access by unauthorized persons. Storage areas shall be locked, and of sufficient size for clean and orderly storage. Narcotics shall be secured by double-lock. Medications requiring refrigeration shall be kept in a secured refrigerator used exclusively for medications, or in a secured manner in which medications are separated from other items kept in a refrigerator (e.g., Lock Box). All refrigerators storing medications shall have accurate thermometers (within plus or minus two (2) degrees).

E. A standard first-aid kit or equivalent first-aid supplies shall be on hand and readily accessible to include, but not limited to, the following:

1. Adhesive compresses;
2. Bandage compresses;
3. Plain gauze pads;
4. Antiseptic cleanser;
5. Absorbent gauze;
6. Triangular bandage;
7. Tourniquet; and
8. Scissors and tweezers.

503. Participant Records

A. A file shall be maintained for each participant. Each file shall contain, but not be limited to, the following information: (II)

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1. A personal data sheet to include: full name, address, phone number, social security number, photo, race, religious preference, next of kin or sponsor, marital status, name of spouse, and any other appropriate information;

2. Pre-enrollment physician's examination (within sixty (60) days prior to enrollment) and subsequent health screenings;

3. A listing (to include telephone numbers) of the participant's personal physician(s) and next of kin, legal guardian or sponsor to be contacted in case of emergency or illness;

4. A complete record setting forth an individual plan of care and activities; this care plan shall be completed within thirty (30) days of enrollment and shall include, but not be limited to:

a. Initial assessment by facility staff of the participant's physical condition, capabilities, and needs;

b. Objectives;

c. Notes of observation at least quarterly (An observation note is an entry made by a direct care staff member in reference to the progress of a participant relative to the achievement of goals as indicated in the care plan. Any appropriate routine entry made on a more frequent basis will satisfy this requirement.); and

d. Review and/or revision as changes in participant needs occur but not less than semi-annually;

5. Signed agreement between the facility and participant or sponsor stating the amount of fees for listed services;

6. A record of incidents, accidents, emergencies and illnesses which occur while the participant is receiving day care services.

7. Written acknowledgement of the Statement of Rights of Adult Day Care Participants (see Section 901) signed by the participant or responsible party/sponsor.

SECTION 600 – FOOD SERVICE (II)

601. General

A. All facilities that prepare food on-site shall be approved by the Department and regulated, inspected, and permitted pursuant to R.61-25.

B. When meals are catered to a facility, such meals shall be obtained from a food service establishment graded by the Department, pursuant to R.61-25, and there shall be a written executed contract with the food service establishment.

C. The transportation of all food from a permitted food service establishment to another location for service shall meet the requirements of R.61-25 for storage, display, and general protection against contamination.

D. The use of home canned foods is not allowed.

E. All cleaning supplies, detergents and other potentially poisonous items shall be stored away from food items.

F. At least one (1) handwash sink equipped with hot and cold, sanitary soap dispenser, and towel dispenser or electric hand dryer shall be present in the food preparation areas.

G. If a dishwashing machine is used, it shall meet the standards for sanitization required by the Department. Domestic (home-type) dishwashing machines shall be equipped with a self-contained water heating element or otherwise be provided an inlet water temperature of 160 degrees Fahrenheit.

602. Meals and Special Diets

A. A facility shall provide at least one (1) meal for participants who receive adult day care services for four (4) hours or more per day, unless otherwise directed by a physician in writing. A facility shall provide at least two (2) meals for each participant receiving care for ten (10) or more hours per day unless otherwise directed by a physician.

B. All facilities shall provide dietary services to meet the daily dietary needs of participants in accordance with written dietary policies and procedures. Each meal shall provide at least one-third of the U.S.D.A. recommended dietary requirement and other standards established by the Department. Facilities shall post weekly menus where they may be observed by participants. Snacks are permitted but not in lieu of full meals.

C. Facilities with participants in need of special or therapeutic diets shall employ or contract with (either directly or through a caterer) a dietitian or qualified food service supervisor to provide appropriate consultations for such diets. A qualified food service supervisor is a person who:

1. Is a graduate of a dietetic technician or dietetic assistant training program, (correspondence or classroom), approved by the American Dietetic Association; or

2. Is a graduate of a State-approved course that provided ninety (90) or more hours of classroom instruction in food service supervision, and has experience as a supervisor in a health care institution with consultation from a dietitian; or

3. Has training and experience in food service supervision and management in a military service equivalent in content to the programs in paragraphs (1) or (2) above.

D. Special diets shall be prescribed, dated and signed by the physician.

SECTION 700 – FUNCTIONAL SAFETY

701. Maintenance

A facility's structure, its component parts, and all equipment such as elevators, furnaces and emergency lights, shall be kept in good repair and operating condition. Areas used by participants shall be maintained in good repair and kept free of hazards, to include obstructions which may block exits in case of emergency. (II)

702. Emergency/Disaster Preparedness

A. The facility shall have a written emergency plan and have a floor diagram posted for evacuation of participants, staff, and visitors in case of fire or other emergency. (I)

B. At least one (1) fire drill shall be held every three (3) months to familiarize all employees with fire safety procedures. Records of the drills and attendees shall be maintained. Upon identification of procedural problems with regard to the drills, records shall show what corrective action has been taken. (I)

C. The facility shall post emergency call data in a conspicuous place and shall include at least the telephone numbers of fire and police departments, ambulance service, and the poison control center. Other emergency call information shall be available, to include the names, addresses, and telephone numbers of staff members/volunteers to be notified in case of emergency.

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703. Accidents/Incidents (II)

A. The facility shall report each accident and/or incident resulting in unexpected death or serious injury to the next-of-kin or responsible party for each affected individual at the earliest practicable hour, not exceeding twenty-four (24) hours. The facility shall notify the Department immediately, not to exceed twenty-four (24) hours, via telephone, email or facsimile. The facility shall submit a report of the licensee's investigation of the accident and/or incident to the Department within five (5) days. Accidents and/or incidents requiring reporting include, but are not limited to,:

1. Abuse, Neglect or Exploitation (Confirmed);
2. Abuse, Neglect or Exploitation (Suspected);
3. Adverse or severe medication reaction;
4. Criminal event against participant;
5. Death;
6. Elopement;
7. Fire;
8. Fracture of bone or joint;
9. Hospitalization as a result of accident/incident;
10. Medication Error resulting in hospitalization or death;
11. Burns, hematoma, laceration requiring medical attention; and
12. Attempted Suicide.

B. Reports submitted to the Department shall contain only: facility name, license number, type of accident/incident, date accident/incident occurred, number of participants directly injured or affected, participant record number or last four (4) digits of Social Security Number, participant age and sex, number of staff directly injured or affected, number of visitors directly injured or affected, witness(es) name(s), identified cause of accident/incident, internal investigation results if cause unknown, a brief description of the accident/incident including location where occurred, and treatment of injuries. The report retained by the facility, in addition to the minimum reported to the Department, shall contain: names of participant(s), staff, and/or visitor(s), the injuries and treatment associated with each patient, staff, and/or visitor. Records of all accidents and incidents shall be retained by the facility for six (6) years after the participant stops receiving services.

SECTION 800 – INFECTION CONTROL AND SANITATION

801. General

The facility shall provide adequate space, equipment, and staff in the facility to assure protection of all participants and staff against cross-infection. (II)

802. Linen and Laundry (II)

A. An adequate supply of clean linen or disposable materials shall be maintained for the sick bed(s). Each bed shall be made up with at least one (1) clean linen change (bottom and top sheets and pillowcase) and a bedspread or coverlet.

B. Facilities shall provide clean mattress covers, in addition to linen.

C. Liquid or powder soap dispensers and sanitary paper towels shall be available at each handwash lavatory. Alcohol-based waterless hand sanitizers shall not be used in lieu of liquid or powder soap.

803. Housekeeping (II)

A. A facility shall be kept clean and free from odors. Accumulated waste material must be removed daily or more often if necessary. There must be frequent cleaning of floors, walls, ceilings, woodwork, and windows. The premises must be kept free from rodent and insect infestation. Pesticide spraying shall be conducted when participants are not present. Bath and toilet facilities must be maintained in a clean and sanitary condition at all times.

B. Cleaning materials and supplies shall be stored in a safe manner. All harmful agents shall be locked in a closet or cabinet used for this purpose only.

C. Dry sweeping and dusting of walls and floors are prohibited while participants are in the area being cleaned.

D. Floors shall have a smooth, washable surface and shall be kept clean, in good repair, and free from hazards. If carpeting is used, it shall be cleaned regularly and maintained in good repair.

804. Sanitation (II)

A. All garbage and waste shall be collected, stored and disposed of in a manner designed to prevent the transmission of disease. Containers shall be washed and sanitized before being returned to work areas. Disposable type containers shall not be reused.

B. Containers for garbage and refuse shall be covered and stored outside in durable, rust-resistant, non-absorbent, watertight, rodent-proof, easily cleanable containers placed on an approved platform to prevent overturning by animals, the entrance of flies, or the creation of a nuisance. All solid waste shall be disposed of at sufficient frequencies in a manner so as not to create a rodent, insect or other vermin problem.

C. Containers for garbage shall be cleaned as necessary.

D. All sewage and liquid waste shall be disposed of in a manner not to create a public health hazard and by a sanitary method approved by the Department.

805. Outside Areas (II)

All outside areas, grounds and/or adjacent buildings shall be kept free of rubbish, grass, and weeds that may serve as a fire hazard or as a haven for roaches, rodents and other pests. Measures for the control of insects, rodents, and other vermin shall be applied to prevent harborage, breeding, and infestation of the premises. All stairs, walkways, ramps and porches shall be maintained free from accumulations of water, ice, snow and other impediments.

806. Pets

A. If the facility chooses to permit pets, healthy animals that are free of fleas, ticks, and intestinal parasites and have been screened by a veterinarian prior to participant contact, have received required inoculations, if

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applicable, and that present no apparent threat to the health, safety, and well-being of the participants, may be permitted in the facility, provided they are sufficiently fed and cared for and that both the pets and their housing are kept clean.

B. Pets shall not be allowed near participants who have allergic sensitivities to pets, or for other reasons such as participants who do not wish to have pets near them.

C. Pets shall not be allowed in the kitchen area. Pets shall be permitted in participant dining areas only during times when food is not being served. If the dining area is adjacent to a food preparation or storage area, those areas shall be effectively separated by walls and closed doors while pets are present.

807. Tuberculosis Risk Assessment (I)

A. All facilities shall conduct an annual tuberculosis risk assessment in accordance with CDC guidelines to determine the appropriateness and frequency of tuberculosis screening and other tuberculosis related measures to be taken.

B. The risk classification, *i.e.*, low risk, medium risk, shall be used as part of the risk assessment to determine the need for an ongoing TB screening program for staff and participants and the frequency of screening. A risk classification shall be determined for the entire facility. In certain settings, *e.g.*, healthcare organizations that encompass multiple sites or types of services, specific areas defined by geography, functional units, participant population, job type, or location within the setting may have separate risk classifications.

808. Staff Tuberculosis Screening (I)

A. Tuberculosis Status. Prior to date of hire or initial participant contact, the tuberculosis status of direct care staff shall be determined in the following manner in accordance with the applicable risk classification:

B. Low Risk:

1. Baseline two-step Tuberculin Skin Test (TST) or a single Blood Assay for *Mycobacterium tuberculosis* (BAMT): All staff (within three (3) months prior to contact with participants) unless there is a documented TST or a BAMT result during the previous twelve (12) months. If a newly employed staff has had a documented negative TST or a BAMT result within the previous twelve (12) months, a single TST (or the single BAMT) can be administered to serve as the baseline.

2. Periodic TST or BAMT is not required.

3. Post-exposure TST or a BAMT for staff upon unprotected exposure to *M. tuberculosis*: Perform a contact investigation when unprotected exposure is identified.

4. Administer one (1) TST or a BAMT as soon as possible to all staff who have had unprotected exposure to an infectious TB case/suspect. If the TST or the BAMT result is negative, administer another TST or a BAMT eight to ten (8-10) weeks after that exposure to *M. tuberculosis* ended.

C. Medium Risk:

1. Baseline two-step TST or a single BAMT: All staff (within three (3) months prior to contact with participants) unless there is a documented TST or a BAMT result during the previous twelve (12) months. If a newly employed staff has had a documented negative TST or a BAMT result within the previous twelve (12) months, a single TST (or the single BAMT) can be administered to serve as the baseline.

2. Periodic testing (with TST or BAMT): Annually, of all staff who have risk of TB exposure and who have previous documented negative results. Instead of participating in periodic testing, staff with documented TB infection (positive TST or BAMT) shall receive a symptom screen annually. This screen shall be accomplished by educating the staff about symptoms of TB disease (including the staff and/or direct care volunteers responses), documenting the questioning of the staff about the presence of symptoms of TB disease, and instructing the staff to report any such symptoms immediately to the administrator or director of nursing. Treatment for latent TB infection (LTBI) shall be considered in accordance with CDC and Department guidelines and, if recommended, treatment completion shall be encouraged.

3. Post-exposure TST or a BAMT for staff upon unprotected exposure to *M. tuberculosis*: Perform a contact investigation when unprotected exposure is identified. Administer one (1) TST or a BAMT as soon as possible to all staff who have had unprotected exposure to an infectious TB case/suspect. If the TST or the BAMT result is negative, administer another TST or a BAMT eight to ten (8-10) weeks after that exposure to *M. tuberculosis* ended.

D. Baseline Positive or Newly Positive Test Result:

1. Staff with a baseline positive or newly positive test result for *M. tuberculosis* infection (*i.e.*, TST or BAMT) or documentation of treatment for latent TB infection (LTBI) or TB disease or signs or symptoms of tuberculosis, *e.g.*, cough, weight loss, night sweats, fever, shall have a chest radiograph performed immediately to exclude TB disease (or evaluate an interpretable copy taken within the previous three (3) months). These staff members will be evaluated for the need for treatment of TB disease or latent TB infection (LTBI) and will be encouraged to follow the recommendations made by a physician with TB expertise (*i.e.*, the Department’s TB Control program).

2. Staff who are known or suspected to have TB disease shall be excluded from work, required to undergo evaluation by a physician or legally authorized healthcare provider, and permitted to return to work only with approval by the Department TB Control program. Repeat chest radiographs are not required unless symptoms or signs of TB disease develop or unless recommended by a physician or legally authorized healthcare provider.

SECTION 900 – STATEMENT OF RIGHTS OF ADULT DAY CARE PARTICIPANTS

901. Statement of Rights of Adult Day Care Participants

A. Each participant must be accorded the following rights: (II)

1. The right to be treated as an adult, with consideration, respect, and dignity, including privacy in treatment and in care for personal needs.

2. The right to participate in a program of services and activities designed to encourage independence, learning, growth, and awareness of constructive ways to develop one's interests and talents.

3. The right to self-determination within the day care setting, including the opportunity to:

- a. Participate in developing one's plan for services and any changes therein.
- b. Decide whether or not to participate in any given activity.
- c. Be involved to the extent possible in program planning and operation.
- d. Refuse treatment, if applicable, and be informed of the consequences of such refusal.
- e. End participation in the adult day care center at any time.

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4. The right to be cared about in an atmosphere of sincere interest and concern in which needed support and services are provided.

5. The right to a safe, secure and clean environment.

6. The right to confidentiality and the requirement for written consent for release of information to persons not authorized under law to receive it.

7. The right to voice grievances without discrimination or reprisal with respect to care or treatment, if applicable, that is (or is not) provided.

8. The right to be fully informed, as evidenced by the participant's written acknowledgment of these rights, of all rules and regulations regarding participant conduct and responsibilities.

9. The right to be free from harm, including isolation, excessive medication, if applicable, abuse, or neglect.

10. The right to be fully informed, at the time of acceptance into the program, of services and activities available and related charges.

11. The right to communicate with others and be understood by them to the extent of the participant's capability.

B. The Statement of Rights of Adult Day Care Participants shall provide a grievance and complaint procedure to be exercised on behalf of the participants to enforce the Statement of Rights of Adult Day Care Participants that includes the Department's email address and telephone number.

C. The Statement of Rights of Adult Day Care Participants shall be posted in a conspicuous place in the facility.

SECTION 1000 - DESIGN AND CONSTRUCTION

1001. General (II)

A. A facility shall be planned, designed, and equipped to provide and promote the health, safety, and well-being of each participant.

B. Rooms shall be provided to accommodate a variety of programs and participants served. At a minimum, the facility shall provide one (1) group activity room and a room for resting purposes to accommodate the appropriate licensed participants. The facility shall provide adequate storage space for supplies and personal belongings.

C. A minimum of fifty (50) square feet of usable activity space, exclusive of hallways, storage space, kitchen, toilet and resting area(s), office and other similar space, shall be provided for each participant. However, when the adult day care program is combined with a similar program, a minimum of twenty-five (25) feet of usable activity space in one (1) group activity room is permissible, provided that this area is for the exclusive use of the adult day care participants and other recreational and craft areas are available.

D. Only first floor occupancy shall be permitted except where elevators are provided or if only non-participant areas are located on the above floor(s), e.g., storage areas, staff offices, lounges, etc.

E. Every facility shall be accessible to participants with disabilities to include all participant areas and restrooms.

F. The entrance to the building shall be at grade level, be sheltered from the weather and accommodate wheelchairs.

G. There shall be at least two (2) exits remote from each other to exit the building or space.

1002. Applicable Code (II)

A. New facility design and construction shall comply with codes officially adopted by the South Carolina Building Codes Council and the South Carolina State Fire Marshal. No facility shall be licensed unless the Department has received in writing that responsible local officials (zoning and building) have approved the facility for code compliance.

B. Unless specifically required otherwise by the Department, existing facilities shall remain in compliance with the construction codes and construction regulations applicable at the time its license was issued.

C. Any facility that closes, has its license revoked, or surrenders its license and applies for re-licensure at the same site, shall be considered a new building and shall meet the codes, regulations, and requirements for the building and its essential equipment and systems in effect at the time of application for re-licensing.

1003. Submission of Plans and Specifications

A. Plans and specifications shall be prepared by an architect and/or engineer registered in South Carolina. Unless directed otherwise by the Department, submit plans at the schematic, design development, and final stages. All plans shall be drawn to scale with the title, stage of submission and date shown thereon. Any construction changes from the approved documents shall be approved by the Department. Construction work shall not commence until a plan approval has been received from the Department. During construction the owner shall employ a registered architect and/or engineer for observation. Upon approval of the Department, construction administration may be performed by an entity other than the architect. The Department shall conduct periodic inspections throughout each project.

B. Plans and specifications shall be submitted to the Department for new construction and for any projects that has an effect on:

1. The function of a space;
2. The accessibility to or of an area;
3. The structural integrity of the facility;
4. The active and/or passive fire safety systems (including kitchen equipment such as exhaust hoods or equipment required to be under an exhaust hood);
5. Doors;
6. Walls;
7. Ceiling system assemblies;
8. Exit corridors;
9. Life safety systems; or
10. Increases the occupant load or licensed capacity of the facility.

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C. All subsequent addenda, change orders, field orders, and documents altering the Department review must be submitted. Any substantial deviation from the accepted documents shall require written notification, review and re-approval from the Department.

D. Cosmetic changes utilizing paint, wall covering, floor covering, etc., that are required to have a flame-spread rating or other safety criteria shall be documented with copies of the documentation and certifications kept on file at the facility and made available to the Department.

E. Any construction work which violates codes or standards shall be brought into compliance.

1004. Construction Inspections

All projects shall obtain all required permits from the locality having jurisdiction. Construction without proper permitting shall not be inspected by Department.

SECTION 1100 - FIRE PROTECTION EQUIPMENT AND SYSTEMS

1101. Alarms

A. facility shall include a partial, manual, automatic, supervised fire alarm system. The system shall be arranged to transmit an alarm automatically to a third party by an approved method. The alarm system shall notify by audible and visual alarm all areas and floors of the building. The alarm system shall shut down central recirculating systems and outside air units that serve the area(s) of alarm origination as a minimum.

B. All fire, smoke, heat, sprinkler flow, or manual fire alarming devices or systems must be connected to the main fire alarm system and trigger the system when they are activated.

C. A facility shall include a sprinkler system.

1102. Gases (I)

Safety precautions shall be taken against fire and other hazards when oxygen is dispensed, administered, or stored. "No Smoking" signs shall be posted conspicuously inside the facility and on oxygen cylinders. All cylinders shall be properly stored and secured in place.

SECTION 1200 – PREVENTIVE MAINTENANCE EQUIPMENT AND UTILITIES

1201. General

The facility shall keep the structure, its component parts, facilities and all equipment in good repair and operating condition and documented. Facilities shall comply with provisions of the code officially adopted by the South Carolina Building Codes Council and the South Carolina State Fire Marshal.

1202. Signal System

A. All facilities shall have a signal system consisting of a call button for each bed, bath, and toilet. A light shall be at or over each participant room door visible from the corridor. There shall be an audio-visual master station in a location continuously monitored by staff.

B. Facilities shall have a signal system consisting of an audio-visual device that cannot be interrupted located in all utility rooms, medicine preparation rooms, lounges, storage rooms and areas where staff congregate.

C. Activation of signal system shall be by pull cord or electronic device. Pull cord shall hang to a maximum of four (4) inches above finished floor.

1203. Restrooms (II)

A. There shall be an appropriate number of restrooms in the facility to accommodate participants, staff, and visitors.

B. Restrooms shall be accessible during all operating hours of the facility.

C. All restrooms shall be equipped with at least one (1) toilet fixture, toilet paper installed in a holder, a handsink supplied with hot and cold running water, liquid or granulated soap, single-use disposable paper towels or electric air dryer, and a covered waste receptacle.

D. All toilet fixtures used by participants shall have approved grab bars securely fastened in a usable fashion.

E. Privacy shall be provided at toilet fixtures and urinals.

F. Bathrooms shall accommodate persons with disabilities as required by codes, whether or not any of the staff or participants are classified as disabled.

G. All restroom floors shall be entirely covered with an approved nonabsorbent covering. Walls shall be nonabsorbent, washable surfaces to the highest level of splash.

H. One toilet shall be provided for each fifteen (15) participants. Where separate staff and/or public toilets are not provided, employees and volunteers shall be included in the ratio.

1204. Janitor's Closets

A. The facility shall include at least one (1) lockable janitor's closet.

B. Each janitor's closet shall contain a floor receptor or service sink and storage space for housekeeping equipment and supplies, *e.g.*, mops.

1205. Storage Areas

A. Facilities shall have adequate general storage areas for equipment, supplies and wheelchairs.

B. Storage buildings on the premises shall meet the requirements of the codes regarding distance from the licensed building. Storage in buildings other than on the facility premises shall be secure and accessible. An appropriate controlled environment shall be provided if necessary for storage of items requiring such an environment.

C. Chemicals indicated as harmful on the product label, cleaning materials, and supplies shall be safely stored in cabinets or well-lighted closets/rooms.

1206. Elevators (II)

Elevators shall be inspected and tested upon installation, prior to first use, and annually thereafter by a certified elevator inspector.

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1207. Telephone Service

At least one (1) land-line telephone shall be available on each floor of the facility for use by participants and/or visitors for their private, discretionary use.

1208. Location

A. Transportation. The facility shall be served by roads that are passable at all times and are adequate for the volume of expected traffic.

B. Parking. The facility shall have a parking area to reasonably satisfy the needs of participants, staff members, and visitors.

C. Access to firefighting equipment. Facilities shall maintain adequate access to and around the building(s) for firefighting equipment. (I)

1209. Furnishings/Equipment (I)

A. The facility shall maintain the physical plant free of fire hazards and impediments to fire prevention.

B. No portable electric or unvented fuel heaters shall be permitted in the facility.

C. Wastebaskets, furniture, window dressings, portable partitions, cubicle curtains, mattresses, and pillows shall be noncombustible, inherently flame-resistant, or treated or maintained flame-resistant in accordance with the applicable codes.

D. Wall finishes shall be washable, and, in the immediate area of plumbing fixtures, shall be smooth and moisture resistant.

E. Wall bases in areas which are frequently subject to wet cleaning methods shall be tightly sealed and constructed without voids that can harbor insects.

F. Floor and wall penetrations by pipes, ducts, and conduits shall be tightly sealed to minimize entry of rodents and insects. Joints of structural elements shall be similarly sealed.

G. Interior finish materials shall comply with the flame spread requirements.

H. Floors shall not have cracks or be of uneven elevation and shall be of non-skid surfaces to prevent falls.

1210. Water Requirements

A. The facility shall establish written policies and procedures to prevent waterborne microbial contamination within the water distribution system.

B. The facility shall ensure the practice of hand hygiene to prevent the hand transfer of pathogens, and the use of barrier precautions (*e.g.*, gloves) in accordance with established guidelines.

C. The facility shall eliminate contaminated water or fluid from environmental reservoirs (*e.g.*, in equipment or solutions) wherever possible.

D. The facility shall not place decorative fountains and fish tanks in participant areas. If decorative fountains are used in separate public areas, the facility shall ensure they are disinfected in accordance with manufacturer's instructions and safely maintained.

E. The facility plumbing fixtures that require hot water and are accessible to participants shall be supplied with water which is thermostatically controlled to a temperature of at least 100 degrees F. (37.8 degrees C) and not exceeding 125 degrees F. (51.7 degrees C.) at the fixture.

F. The facility shall have a written plan to respond to disruptions in water supply. The plan must include a contingency plan to estimate water demands for the entire facility in advance of significant water disruptions (i.e., those expected to result in extensive and heavy microbial or chemical contamination of the potable water), sewage intrusion, or flooding.

G. When a significant water disruption or an emergency occurs, the facility shall:

1. Adhere to any advisory to boil water issued by the municipal water utility;
2. Alert participants, families, employees, volunteers, students and visitors not to consume water from drinking fountains, ice, or drinks made from municipal tap water while the advisory is in effect, unless the water has been disinfected;
3. After the advisory is lifted, run faucets and drinking fountains at full flow for greater than five (5) minutes or use high-temperature water flushing or chlorination;
4. All ice and drinks that may have been contaminated must be disposed and storage containers cleaned; and
5. Decontaminate the hot water system as necessary after a disruption in service or a cross-connection with sewer lines has occurred.

H. The facility shall follow appropriate recommendations to prevent cross connection and other sources of contamination of ice for human consumption.

I. The facility shall maintain and implement policies and procedures addressing the management of failure of waste water systems.

J. Participant and staff handwashing lavatories and showers, if any, shall include hot and cold water at all times.

K. If a non-community water supply is used, approval from the Department shall be obtained to insure safe location, construction, proper maintenance and operation of the system.

L. The use of "common drinking cups" is prohibited. Disposable cups, if used, shall be stored properly to prevent contamination.

M. If a swimming pool is part of the facility, it shall be designed, constructed, and maintained pursuant to the Department's regulations governing swimming pools, Regulation 61-51.

1211. Panelboards (II)

The directory shall be labeled to conform to the actual room designations. Clear access shall be maintained to the panel.

1212. Lighting

A. Spaces occupied by persons, machinery, equipment within buildings, approaches to buildings, and parking lots shall be lighted. (II)

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B. The facility shall have adequate artificial light to include sufficient illumination for reading, observation, and activities.

1213. Heating, Ventilation, and Air Conditioning (HVAC) (II)

A. The HVAC system shall be inspected at least once a year by a certified/licensed technician.

B. No HVAC supply or return grill shall be installed within three (3) feet of a smoke detector. (I)

C. Intake air ducts shall be filtered and maintained to prevent the entrance of dust, dirt, and other contaminating materials.

D. Each bath/restroom shall have either operable windows or approved mechanical ventilation.

SECTION 1300 -SEVERABILITY

1301. General

In the event that any portion of these regulations is construed by a court of competent jurisdiction to be invalid, or otherwise unenforceable, such determination shall in no manner affect the remaining portions of these regulations, and they shall remain in effect as if such invalid portions were not originally a part of these regulations.

SECTION 1400 - GENERAL

1401. General

Conditions that have not been addressed in these regulations shall be managed in accordance with the best practices as interpreted by the Department.

Fiscal Impact Statement:

Implementation of this regulation will not require additional resources. There is no anticipated additional cost by the Department or State government due to any inherent requirements of this regulation. There are no external costs anticipated.

Statement of Need and Reasonableness:

The Department's Bureau of Health Facilities Licensing formulated this statement determined by analysis pursuant to 1976 Code Section 1-23-115 C(1)-(3) and (9)-(11).

DESCRIPTION OF REGULATION: R.61-75, *Standards for Licensing Day Care Facilities for Adults*.

Purpose: The purpose of the amendment is to clarify regulations pertaining to facilities for adults 18 years of age or older, which offer in a group setting a program of individual and group activities and therapies are affected by this regulation. The amendments herein include the Department's Bureau of Health Facilities Licensing effort to improve licensing procedures, care of participants, infection control and sanitation, functional safety, emergency procedures, design and construction, fire and life safety, and overall licensing requirements for day care facilities for adults. In addition, corrections have been made for clarity and readability, grammar, references, codification and overall improvement to the text of the regulation.

Legal Authority: 1976 Code Sections 44-7-260.

Plan for Implementation: Upon approval from the S.C. General Assembly and publication as a final regulation in the South Carolina State Register, a copy of R.61-75, that includes these amendments, will be available electronically on the Department's website under the Health Regulations Category at <http://www.scdhec.gov/Agency/RegulationsAndUpdates/LawsAndRegulations/> and subsequently in the Code of Regulations of the S.C. Code of Laws. Printed copies will be available for a fee from the Department's Freedom of Information Office. Staff will educate the regulated community on the provisions of the Act and the requirements of the regulation.

DETERMINATION OF NEED AND REASONABLENESS OF THE REGULATION BASED ON ALL FACTORS HEREIN AND EXPECTED BENEFITS:

The Department promulgated R.61-75, June 28, 1991. The regulation was amended on December 5, 2003. 1976 Code Section 1-23-120(J) requires state agencies to perform a review of its regulations every five years and update them if necessary.

Statutory mandates, issues found in the review, and the necessity for overall updates renders the amendment needed and reasonable. The amendments improve the construction requirements regarding the licensee. In addition, corrections have been made for clarity and readability, grammar, references, codification and overall improvement to the text of the regulation.

DETERMINATION OF COSTS AND BENEFITS:

Internal Costs: There is no anticipated additional cost by the Department or State government due to any inherent requirements of this regulation.

External Costs: There are no external costs anticipated.

External Benefits: The amendments update licensing procedures, care of participants, infection control and sanitation, functional safety, emergency procedures, design and construction, and fire and life safety, while maintaining the interests of participants' health and safety and lessening provider burdens. The amendments update the standards to statutory mandates. The amendments seek to benefit the regulated community by clarifying the regulations and increasing their ease of use.

UNCERTAINTIES OF ESTIMATES:

None.

EFFECT ON THE ENVIRONMENT AND PUBLIC HEALTH:

There will be no effect on the environment.

The amendments seek to reasonably simplify the construction requirements while providing clarification and streamlining standards in the interest of participant care and safety for the day care facilities for adults. The amendments also seek to align the regulation with statutory requirements.

DETRIMENTAL EFFECT ON THE ENVIRONMENT AND PUBLIC HEALTH IF THE REGULATION IS NOT IMPLEMENTED:

There would not be a detrimental effect on the environment.

If the revision is not implemented, unnecessary construction burdens may be placed on day care facilities for adults. The amendments seek to improve the definitions pertinent to day care facilities for adults, licensure requirements, meal service requirements, construction requirements to be current with building codes and fire

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and life safety codes while streamlining the standards for clarification in the interest of resident care and safety. In addition, the amendments align the regulation with statutory requirements.

Statement of Rationale:

The Department revises this regulation pursuant to the 1976 Code Section 1-23-120(J) requirement that state agencies perform a review of its regulations every five (5) years and update them if necessary. The amendments seek to improve the regulation to be aligned with statutory mandates, to improve licensure requirements, meal service requirements, the references to building codes, constructions requirements, and fire and life safety codes. In addition, corrections have been made for clarity and readability, grammar, references, codification and overall improvement to the text of the regulation.

Document No. 4464
DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL
CHAPTER 61
Statutory Authority: 1976 Code Section 44-7-260

61-93. Standards for Licensing Facilities that Treat Individuals for Psychoactive Substance Abuse or Dependence

Synopsis:

Regulation 61-93 was last substantively amended on May 25, 2001. The purpose of the regulation is to provide a set of minimum licensing standards for facilities that treat individuals for psychoactive substance abuse or dependence. Psychoactive substance abuse or dependence facilities provide specialized structured psychoactive substance abuse/dependence care/treatment, including outpatient services including narcotic and methadone treatment programs, and inpatient services including residential treatment and/or detoxification. The purpose of this amendment is to revise the language regarding urine testing and to remove unduly financial burden on entities involved in licensee change. In addition, stylistic changes were included for corrections for clarity and readability, grammar, references, codification and overall improvement of the text of the regulation.

A Notice of Drafting was published in the *State Register* on March 28, 2014.

Change made at the request of the Senate Medical Affairs
Committee by letter dated May 4, 2015:

61-93.1404. The title of this new section was revised from Inpatient/Outpatient Tuberculosis Screening to Client Tuberculosis Screening (I).

Changes made at the request of the House Medical,
Military, Public and Municipal Affairs Committee
by letter dated March 24, 2015:

61-93.1404. This section was revised regarding inpatient/outpatient tuberculosis screening.

Section-by-Section Discussion of Revisions submitted
for legislative review on January 13, 2015 by the Department
of Health and Environmental Control

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The table was revised to reflect the revised regulation.

PART I - ALL FACILITIES

61-93.102. References

This amendment revises 61-93.102.B to delete references no longer available.

61-93.103. License Requirements

This section deletes language at 61-93.103.C and 61-93.103.D to ease the burden of construction requirements and remaining subsections were renumbered to adjust outline. 61-93.103.J (formerly I) was amended to add item 7 that the Department may charge a fee for plan reviews, construction inspections and licensing inspections.

61-93.503. Health Status (I)

Section 503.A was revised to the correct reference for Tuberculosis Risk Assessment.

61-93.601. Incidents/Accident (II)

The title and text of this section was revised to current standards of accident/incident reporting.

61-93.602. Fire/Disasters

Sections 61-93.602.A and 61-93.602.B were revised to remove the Division of Health Licensing reference and replace with the Department.

61-93.604. Administrator Change

This section was revised to remove the Division of Health Licensing reference and replace with the Department.

61-93.607. Emergency Placements

This section was revised to remove the Division of Health Licensing reference and replace with the Department.

61-93.608. Facility Closure

This section revises 61-93.608.A and B to remove the Division of Health Licensing reference and replace with the Department.

61-93.609. Zero Census

This section was revised to remove the Division of Health Licensing reference and replace with the Department and to clarify payment of a licensing fee.

61-93.703. Record Maintenance

Sections 61-93.703. E and F are revised to remove the Division of Health Licensing reference and replace with the Department.

61-93.804. Treatment of Minors (II)

Section 804.A was revised to remove the Division of Health Licensing reference and replace with the Department.

61-93.902. Client Rights (II)

This section revises 61-93.902.A.3 to remove the Division of Health Licensing reference and replace with the Department.

61-93.1001. General (I)

Section 61-93.1001.A.2 was revised to the correct reference for Tuberculosis Risk Assessment.

61-93.1106. General (I)

Section 61-93.1106.D was added language to for clarity for freestanding medical detoxification facilities for stock of legend medications.

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61-93.1201. General (II)

Section 61-93.101.A and C are revised to remove the Division of Health Licensing reference and replace with the Department.

61-93.1203. Food Equipment and Utensils (II)

This amendment revised the Exception in this section to remove the Division of Health Licensing reference and replace with the Department.

61-93.1302. Preventive Maintenance of Emergency Equipment and Supplies (II)

This is a new section added to clarify preventive maintenance procedures.

61-93.1402. Tuberculosis Risk Assessment (formerly Tuberculin Skin testing)

This section was revised to the current Tuberculosis Risk Assessment standards.

61-93.1403. Staff Tuberculosis Screening

61-93.1404. Inpatient/Outpatient Tuberculosis Screening

These two new sections were added to clarify the current Tuberculosis Screening standards.

61-93.1403, 1405, 1406, 1407 and 1408 were renumbered to 61-93.1405, 1406, 1407 and 1408 to adjust outline. No substantive changes.

61-93.1502. Disaster Preparedness (II)

Section 61-93.1502.A was revised to remove the Division of Health Licensing reference and replace with the Department.

Section 61-93.1502.B.1.c was revised to delete counties no longer required to have at least one sheltering facility.

61-93.1601. Arrangements for Fire Department Response (I)

Section 61-93.1601.B was revised to remove the Division of Health Licensing reference and replace with the Department.

61-93.1602. Tests and Inspections (I)

This section was deleted. The deleted section was consolidated into revised section 1800.

61-93.1603. Fire Response Training

This section was renumbered to 61-93.1602 to adjust outline.

61-93.1604. Fire Drills (I)

This section was renumbered to 61-93.1603 to adjust outline. Section 1604.B was revised to clarify the number of clients.

61-93.1801. General (II)

The title was changed to "Codes and Standards" and the section was revised to delete outdated references and correct the current standards.

61-93.1802. Local and State Codes and Standards (II).

This section was revised to delete the requirement at 61-93.1802.B. The outline was adjusted accordingly.

61-93.1804. Submission of Plans and Specifications (II)

This section was revised to clarify requirements for Submission of Plans Specifications.

61-93.1805. Construction Inspections

This new section was added to clarify construction inspections.

61-93.1901. Height and Area Limitations (II)

This section was deleted. The deleted section was consolidated into revised section 1800.

61-93.1902. Fire-Resistive Resistive Rating (I)

This section was renumbered to 1901 to adjust outline and revised to update to applicable codes.

61-93.1903, Vertical Openings (I); 1904. Wall and Partition Openings (I); 1905, Ceiling Openings (I); 1906, Fire Walls (I); 1907, Floor Finishes (H); and 1908, Wall Finishes (I) were deleted. The deleted sections were consolidated into revised section 1800.

61-93.1909. Curtains and Draperies

This section was renumbered to 61-93.1902 to adjust outline. No substantive changes.

61-93.2000. Hazardous Elements of Construction.

This part was deleted in entirety. The deleted section has been consolidated into revised section 2200 (formally section 2600).

61-93.2100. Fire Protection Equipment and Systems

This section was renumbered to 61-93.2000, and subsections therein were renumbered accordingly to adjust outline; the section was revised in entirety. This section was revised to current Fire Protection Equipment and Systems requirements.

61-93.2200. Exits

This section was deleted in entirety. The deleted section has been consolidated into revised section 2200 (formally section 2600).

61-93.2300. Water Supply/Hygiene

This section was deleted in entirety. The deleted section has been consolidated into revised section 2200 (formally section 2600).

61-93.2400. Electrical

This section was renumbered to 61-93.2100, and subsections therein were renumbered accordingly to adjust outline; this section was revised in entirety. This section was revised to current Electrical requirements.

61-93.2500. Heating, Ventilation, and Air Conditioning

This section was deleted in entirety. The deleted section has been consolidated into revised section 2200 (formally section 2600).

61-93.2600. Physical Plant

This section was renumbered to 61-93.2200, and subsections therein were renumbered accordingly to adjust outline; this section was revised in entirety. Deleted sections from previous sections have been consolidated into the revised section.

61-93.2700. Severability and 61-93.2800, General

These sections were renumbered to 61-93.2300 and 61-93.2400 respectively to adjust outline. No substantive changes.

PART II - OUTPATIENT FACILITIES

61-93.2900. Outpatient Facilities

This section was renumbered to 61-93.2500, and subsections therein were renumbered accordingly to adjust outline. No substantive changes.

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PART III - RESIDENTIAL TREATMENT PROGRAM FACILITIES

61-93.3000. Program Description

This section was renumbered to 61-93.2600, and subsections therein were renumbered accordingly, to adjust outline. No substantive changes. Section 61-93.2601.B.3 (formally Section 61-93.3001.B.3) corrected the spelling of “judgment.”

PART IV - DETOXIFICATION FACILITIES

61-93.3100. Program Description

This section was renumbered to 61-93.2700 and subsections therein were renumbered accordingly to adjust outline. Section 2701.B (formally 3101.B) was revised to clarify the appropriate action for Freestanding Medical Detoxification Facilities to recognize and evaluate significant signs and symptoms of medical distress.

PART V - NARCOTIC TREATMENT PROGRAMS

61-93.3200. Program Description

This section was renumbered to 61- 93.2800, and subsections therein were renumbered accordingly, to adjust outline. Section 2808.A.8 (formally 3208.A.8) was revised to reference the revised section regarding Tuberculosis Screening. Section 2809.G (formally 3209.G) revised language to clarify the random urine drug testing on a monthly basis. Section 2809.H (formally 3209.H) deleted yearly reference to current Clinical Laboratory Improvement Amendment standards.

Instructions: Amend R.61-93 pursuant to each individual instruction provided with the text of the amendments below.

Text:

61-93. Standards for Licensing Facilities that Treat Individuals for Psychoactive Substance Abuse or Dependence.

Revise Table of Contents to read:

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- 2818. Take-home Medication
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Revise 61-93.102.B to read:

102. References

A. The following Departmental publications are referenced in these regulations:

1. R.61-4, SC Controlled Substances Regulation;
2. R.61-20, Communicable Diseases;
3. R.61-25, Retail Food Establishments;
4. R.61-51, Public Swimming Pools;
5. R.61-58, State Primary Drinking Water Regulations;
6. R.61-67, Standards for Wastewater Facility Construction;
7. R.61-105, SC Infectious Waste Management Regulations;
8. SC Guidelines for Prevention and Control of Antibiotic Resistant Organisms.

B. The following non-Departmental publications are referenced within this regulation:

1. Underwriters Laboratories - Fire Resistance Directory;
2. Underwriters Laboratories - Building Materials List;
3. Occupational Safety and Health Act of 1970 (OSHA);
4. Food and Nutrition Board of the National Research Council, National Academy of Sciences;
5. National Sanitation Federation;
6. Guidelines for Preventing the Transmission of Myco-bacterium Tuberculosis in Healthcare Facilities.

Revise 61-93.103 to read:

103. License Requirements

A. License. No person, private or public organization, political subdivision, or governmental agency shall establish, operate, maintain, or represent itself as a facility in SC without first obtaining a license from the Department. When it has been determined by the Department that care/treatment for psychoactive substance abuse or dependence to two or more individuals unrelated to the owner is being provided at a location, and the owner has not been issued a license from the Department to provide such care/treatment, the owner shall cease and desist operation immediately and ensure the safety, health, and well-being of the occupants within the scope

of the law. Admission of clients prior to the effective date of licensure is a violation of Section 44-7-260(A)(1) of the SC Code of Laws, 1976, as amended. Current/previous violations of the SC Code and/or Department regulations may jeopardize the issuance of a license for the facility or the licensing of any other, facility or addition to an existing facility that is owned/operated by the licensee. The facility shall provide only the treatment, services, and care it is licensed to provide pursuant to the definition in Section 101 of this regulation. (I)

B. Compliance. An initial license shall not be issued to a proposed facility that has been not previously and continuously licensed under Department regulations until the licensee has demonstrated to the Department that the proposed facility is in substantial compliance with the licensing regulations. In the event a licensee of a currently licensed facility/activity makes application for another facility, the currently licensed facility/activity shall demonstrate substantial compliance with the applicable standards prior to the Department issuing a license to the proposed facility. A copy of this regulation shall be maintained at the facility. Facilities shall comply with applicable local, state, and federal laws, codes, and regulations.

C. Licensed Capacity. No facility that has been authorized to provide certain treatment/care/services shall provide other services outside the limits of the type facility identified on the face of the license and/or which it has been authorized to provide. (I)

D. Licensed Bed Capacity. No 24-hour facility that has been authorized to provide a set number of licensed beds, as identified on the face of the license, shall exceed the licensed bed capacity. No facility shall establish new treatment/care/services or occupy additional beds or renovated space without first obtaining authorization from the Department. (I)

E. Persons Received in Excess of Licensed Bed Capacity. No 24-hour facility shall receive for treatment/care/services persons in excess of the licensed bed capacity, except in cases of justified emergencies. (I)

EXCEPTION: Licensed Capacity Exception. In the event that the facility temporarily provides shelter for evacuees who have been displaced due to a disaster, then for the duration of that emergency, provided the health, safety, and well-being of all clients are not compromised, it is permissible to temporarily exceed the licensed capacity for the facility in order to accommodate these individuals (See Section 607).

F. Living Quarters for Staff in 24-hour Facilities. In addition to clients, only staff, volunteers, or owners of the facility and members of their immediate families may reside in facilities licensed under this regulation. Client rooms shall not be utilized by staff/family/volunteers nor shall staff/volunteers bedrooms be utilized by clients. However, children may occupy client rooms that have been licensed by the Department in programs specifically licensed to provide care/treatment for mothers who are chemically dependent. (II)

G. Issuance and Terms of License.

1. A license is issued by the Department and shall be posted in a conspicuous place in a public area within the facility.

2. The issuance of a license does not guarantee adequacy of individual care, treatment, personal safety, fire safety or the well-being of any client or occupant of a facility.

3. A license is not assignable nor transferable and is subject to revocation at any time by the Department for the licensee's failure to comply with the laws and regulations of this State.

4. A license shall be effective for a specified facility, at a specific location(s), for a specified period following the date of issue as determined by the Department. A license shall remain in effect until the facility is otherwise notified by the Department.

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5. Except for outpatient satellite facilities, facilities owned by the same entity but which are not located on the same adjoining or contiguous property shall be separately licensed. Roads or local streets, except limited access, e.g., interstate highways, shall not be considered as dividing otherwise adjoining or contiguous property.

6. Separate licenses are not required, but may be issued, for separate buildings on the same or adjoining grounds where a single level or type of care is provided.

7. Multiple types of facilities on the same premises shall be licensed separately even though owned by the same entity.

H. Facility Name. No proposed facility shall be named nor may any existing facility have its name changed to the same or similar name as any other facility licensed in SC. If it is part of a "chain operation" it shall then have the geographic area in which it is located as part of its name. The Department shall determine if names are similar.

I. Application. Applicants for a license shall submit to the Department a completed application on a form prescribed, prepared and furnished by the Department prior to initial licensing and periodically thereafter at intervals determined by the Department. Applicants for a license shall file application with the Department, that includes both an oath assuring that the contents of the application are accurate/true and compliance with this regulation.

J. Fees. Fees shall be made payable by check or money order to the Department.

1. The initial and annual license fee shall be \$75.00 for outpatient facilities and NTP's. The licensing fee for outpatient facility satellite locations shall be \$50.00 initial and annual per satellite facility.

2. For all other facilities licensed under this regulation, the annual license fee shall be \$10.00 per bed, with a minimum of \$75.00.

3. Fees for additional beds shall be prorated based upon the remaining months of the licensure year.

4. All fees remaining unpaid 30 days after billing shall be issued a late notice with no penalty due; however, it shall contain advisement of penalty for non-payment after 60 days. Fees remaining unpaid after 60 days shall be assessed a 10% penalty. Fees remaining unpaid at the end of 90 days shall be assessed a 25% penalty in addition to the 60-day penalty.

5. If a license renewal is denied, a portion of the fee shall be refunded based upon the remaining months of the licensure year, or \$75.00, whichever is greater.

6. Continual failure to submit completed and accurate renewal applications and/or fees by the time-periods specified by the Department may result in an enforcement action.

7. The Department may charge a fee for plan reviews, construction inspections and licensing inspections.

K. License Renewal. For a license to be renewed, applicants shall file an application with the Department, pay a license fee, and shall not be under consideration for, or undergoing enforcement actions by the Department. If the license renewal is delayed due to enforcement actions, the renewal license will be issued only when the matter has been resolved satisfactorily by the Department, or when the adjudicatory process is completed, whichever is applicable.

L. Change of License.

1. A facility shall request issuance of an amended license by application to the Department prior to any of the following circumstances:

- a. Change of ownership;
- b. Change in authorized capacity;
- c. Reallocation of types of beds as shown on the license (if applicable).
- d. Change of facility location from one geographic site to another.

2. Changes in a facility name or address initiated by the post office (no location change) may be accomplished by application or letter from the licensee.

M. Licensing is not required for any facility operated by the federal government.

N. Exceptions to the Standards of this Regulation. The Department has the authority to make exceptions to these standards when it is determined that the health, safety, and well-being of the clients will not be compromised and provided the standard is not specifically required by state or federal law.

Revise 6-93.503.A to read:

503. Health Status (I)

A. All staff and volunteers who have contact with clients, including food service staff/volunteers, shall have a health assessment within 12 months prior to initial client contact. The health assessment shall include tuberculin skin testing as described in Sections 1402 and 1403.

Revise 61-93.601 to read:

601. Accidents/Incidents (II)

A. The licensee shall report a record of each accident and/or incident occurring at the facility to the Department within five (5) days of occurrence. Reports submitted to the Department shall contain only: facility name, license number, type of accident/incident, date of accident/incident occurred, number of residents/clients directly injured or affected, resident/client medical record identification number, resident/client age and sex, number of staff directly injured or affected, number of visitors directly injured or affected, witness(es) name(s), identified cause of accident/incident, internal investigation results if cause unknown, a brief description of the accident/incident including location where occurred, and treatment of injuries. The report retained by the facility, in addition to the minimum reported to the Department, shall contain: names of resident(s)/client(s), staff, and/or visitor(s), the injuries and treatment associated with each resident/client, staff, and/or visitor. Records of all accidents and incidents shall be retained by the facility for ten (10) years after the patient stops receiving services at the facility.

B. The licensee shall report each accident and/or incident resulting in unexpected death or serious injury to the next of kin of or party responsible for each affected individual at the earliest practicable hour, not exceeding twenty-four (24) hours. The licensee shall notify the Department immediately, not to exceed twenty-four (24) hours, via telephone, email or facsimile. The licensee shall submit a report of the licensee's investigation of the accident and/or incident to the Department within five (5) days. Accidents and/or incidents requiring reporting include, but are not limited to,:

- 1. Abuse, Neglect or Exploitation (Confirmed);
- 2. Abuse, Neglect or Exploitation (Suspected);

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3. Adverse medication reaction;
4. Client left without notification for more than 24 hours;
5. Criminal event against client;
6. Death;
7. Elopement;
8. Fire;
9. Fracture of bone or joint;
10. Hospitalization as a result of accident/incident;
11. Medication Error;
12. Severe burn;
13. Severe hematoma;
14. Severe laceration;
15. Attempted Suicide; and
16. Use of physical restraints.

Revise 61-93.602 to read:

602. Fire/Disasters (II)

A. The Department shall be notified immediately via telephone or fax regarding any fire in the facility, and followed by a complete written report to include fire reports, if any, to be submitted within a time-period determined by the facility, but not to exceed 72 hours from the occurrence of the fire.

B. Any natural disaster or fire, that requires displacement of the clients, or jeopardizes or potentially jeopardizes the safety of the clients, shall be reported to the Department via telephone/fax immediately, followed by a complete written report which includes the fire report from the local fire department, if appropriate, submitted within a time-period as determined by the facility, but not to exceed 72 hours.

Revise 61-93.604 to read:

604. Administrator Change

The Department shall be notified in writing by the licensee within 10 days of any change in administrator. The notice shall include at a minimum the name of the newly-appointed individual and effective date of the appointment.

Revise 61-93.607 to read:

607. Emergency Placements

In instances where evacuees have been relocated to the facility, the Department shall be notified not later than the following workday of the circumstances regarding the emergency placement and the aggregate number of individuals received.

Revise 61-93.608 to read:

608. Facility Closure

A. Prior to the permanent closure of a facility, the Department shall be notified in writing of the intent to close and the effective closure date. Within 10 days of the closure, the facility shall notify the Department of the provisions for the maintenance of the records, and the identification of the site where clients are relocated. On the date of closure, the license shall be returned to the Department.

B. In instances where a facility temporarily closes, the Department shall be given written notice within a reasonable time in advance of closure. At a minimum this notification shall include, but not be limited to: the reason for the temporary closure, the location where the clients have been/will be transferred (24-hour facility only), the manner in which the records are being stored, and the anticipated date for re-opening. The Department shall consider, upon appropriate review, the necessity of inspecting the facility prior to its re-opening. If the facility is closed for a period longer than one year, and there is a desire to re-open, the facility shall re-apply to the Department for licensure and shall be subject to all licensing requirements at the time of that application, including construction-related requirements for a new facility.

Revise 61-93.609 to read:

609. Zero Census

In instances when there have been no clients in a facility for a period of 90 days or more for any reason, the facility shall notify the Department in writing that there have been no admissions no later than the 100th calendar day following the date of departure of the last active client. At the time of that notification, Department will consider, upon appropriate review of the situation, the necessity of inspecting the facility prior to any new and/or readmissions to the facility. In the event the facility is at zero census or temporarily closed, the licensee is still required to apply and pay the licensing fee to keep the license active. If the facility has no clients for a period longer than one year, and there is a desire to admit a client, the facility shall re-apply to the Department for licensure and shall be subject to all licensing requirements at the time of that application, including construction-related requirements for a new facility.

Revise 61-93.703.E to read:

E. Upon discharge of a client, the record shall be completed and filed in an inactive/closed file within a time-period determined by the facility, but not to exceed 30 days, and shall be maintained by the licensee. Prior to the closing of a facility for any reason, the licensee shall arrange for preservation of records to ensure compliance with these regulations. The licensee shall notify the Department, in writing, describing these arrangements and the location of the records.

Revise 61-93.703.F to read:

F. Records of adult clients may be destroyed after six years following discharge of the client. Records of minors shall be retained for six years or until majority, whichever period of time is greater. Other regulation-required documents, e.g., medication destruction, fire drills, etc., shall be retained for at least 12 months or since the last the Department general inspection, whichever is the longer period.

Revise 61-93.804.A Introductory language; subitems A.1 and A.2 remain the same, to read:

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804. Treatment of Minors (II)

A. Minors shall not be admitted to residential treatment program facilities (with the exception of facilities for mothers with children) or detoxification facilities, except only by request to the Department on a case-by-case basis. These requests shall include:

1. A statement that the facility is able to provide services and accommodations for the minor;
2. A statement of agreement by parent(s) or legal guardian.

Revise 61-93.902.A.3 to read:

902. Client Rights (II)

A. Client rights shall be guaranteed and prominently displayed in a public area. The facility shall inform the client in writing of these rights, to include, as a minimum:

3. Grievance/complaint procedures, including the address and phone number of the Department, and a provision prohibiting retaliation should the grievance right be exercised;

Revise 61-93.1001.A.2 to read:

1001. General (I)

A. A physical examination and history shall be completed within 30 days prior to admission or not later than 48 hours after admission for clients in 24-hour facilities. The procedure describing the need for a physical examination in outpatient facilities shall be determined by the facility with documented consultation with a physician or other authorized healthcare provider. For NTP's, see Section 3208.

EXCEPTION: If a client is admitted after 5:00 P.M. on Friday, a 24-hour facility has until close-of-business the next workday to obtain the admission physical examination.

2. In 24-hour facilities and NTP's, the physical examination shall include a tuberculin skin test, as described in Section 1404, unless there is a previously documented positive reaction.

Revise 61-93.1106.D to read:

1106. Medication Storage (I)

D. Unless the facility has a permitted pharmacy, stocks of legend medications shall not be stored except those specifically prescribed for individual clients. Non-legend medications may be retained and labeled as stock in the facility for administration as ordered by a physician or other authorized healthcare provider. As an alternative for freestanding medical detoxification facilities, stocks of legend medications that address medical distress, withdrawal symptoms, and other medications necessary for clients to safely complete the detoxification process, and Tuberculin PPD serum, not specifically prescribed for individual clients may be retained and labeled as stock in the facility for administration without a pharmacy permit provided the following conditions are met:

1. Each facility shall have a nondispensing drug outlet permit issued by the SC Board of Pharmacy;
2. At least monthly a licensed nurse shall:

- a. Review medication storage areas and emergency medication kits;
 - b. Review all medications in the facility for expiration dates and ensure the removal of discontinued or expired medications from use as indicated; and
 - c. Verify proper storage of medications and biologicals in the facility.
3. Stocks of legend medication shall not include controlled drugs.

Revise 61-93.1201.A to read:

1201. General (II)

A. All facilities that prepare food on-site shall be approved by the Department, and shall be regulated, inspected, and graded pursuant to R.61-25. Facilities preparing food on-site, licensed for 16 beds or more subsequent to the promulgation of these regulations shall have commercial kitchens. Existing facilities with 16 licensed beds or more may continue to operate with equipment currently in use; however, only commercial kitchen equipment shall be used when replacements are necessary. Those facilities with 15 beds or less shall be regulated pursuant to R.61-25 with certain exceptions in regard to equipment (may utilize domestic kitchen equipment).

Revise 61-93.1201.C to read:

C. If food is prepared at a central kitchen and delivered to separate facilities or separate buildings and/or floors of the same facility, provisions shall be made and approved by the Department for proper maintenance of food temperatures and a sanitary mode of transportation.

Revise 61-93.1203 to read:

1203. Food Equipment and Utensils (II)

The equipment and utensils utilized, and the cleaning, sanitizing, and storage of such shall be in accordance with R.61-25.

EXCEPTION: In facilities with five licensed beds or less, in lieu of a three-compartment sink, a domestic dishwasher may be used to wash equipment/utensils provided the facility has at least a two-compartment sink that will be used to sanitize and adequately air dry equipment/utensils. In facilities with 10 beds or less and licensed prior to May 24, 1991, as a community residential care facility, in which a two-compartment sink serves to wash kitchen equipment/utensils, an additional container of adequate length, width, and depth may be provided to completely immerse all equipment/utensils for final sanitation. Domestic dishwashers may be utilized in facilities licensed with 10 beds or less prior to May 24, 1991, provided they are approved by the Department.

Add new section 61-93.1302 to read:

1302. Preventive Maintenance of Emergency Equipment and Supplies (II)

Each facility shall develop and implement a written preventive maintenance program for all emergency equipment and supplies including, but not limited to, all patient monitoring equipment, isolated electrical systems, conductive flooring, patient grounding systems, and medical gas systems. Facilities shall check and/or test this equipment at intervals ensuring proper operation and state of good repair. After repairs and/or alterations to any equipment or system, facility shall thoroughly test the equipment or system for proper operation before

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returning it to service. The facility shall maintain records for each piece of emergency equipment to indicate its history of testing and maintenance.

Revise 61-93.1402 to read:

1402. Tuberculosis Risk Assessment (I)

A. All facilities shall conduct an annual tuberculosis risk assessment in accordance with CDC guidelines (See Section 102.B.4) to determine the appropriateness and frequency of tuberculosis screening and other tuberculosis related measures to be taken.

B. The risk classification, *i.e.*, low risk, medium risk, shall be used as part of the risk assessment to determine the need for an ongoing TB screening program for staff and residents and the frequency of screening. A risk classification shall be determined for the entire facility. In certain settings, *e.g.*, healthcare organizations that encompass multiple sites or types of services, specific areas defined by geography, functional units, patient population, job type, or location within the setting may have separate risk classifications.

Add new sections 61-93.1403 and 1404

1403. Staff Tuberculosis Screening (I)

A. Tuberculosis Status. Prior to date of hire or initial resident contact, the tuberculosis status of direct care staff shall be determined in the following manner in accordance with the applicable risk classification:

B. Low Risk:

1. Baseline two-step Tuberculin Skin Test (TST) or a single Blood Assay for *Mycobacterium tuberculosis* (BAMT): All staff (within three (3) months prior to contact with residents) unless there is a documented TST or a BAMT result during the previous twelve (12) months. If a newly employed staff has had a documented negative TST or a BAMT result within the previous twelve (12) months, a single TST (or the single BAMT) can be administered to serve as the baseline.

2. Periodic TST or BAMT is not required.

3. Post-exposure TST or a BAMT for staff upon unprotected exposure to *M. tuberculosis*: Perform a contact investigation when unprotected exposure is identified.

Administer one (1) TST or a BAMT as soon as possible to all staff who have had unprotected exposure to an infectious TB case/suspect. If the TST or the BAMT result is negative, administer another TST or a BAMT eight to ten (8-10) weeks after that exposure to *M. tuberculosis* ended.

C. Medium Risk:

1. Baseline two-step TST or a single BAMT: All staff (within three (3) months prior to contact with residents) unless there is a documented TST or a BAMT result during the previous twelve (12) months. If a newly employed staff has had a documented negative TST or a BAMT result within the previous twelve (12) months, a single TST (or the single BAMT) can be administered to serve as the baseline.

2. Periodic testing (with TST or BAMT): Annually, of all staff who have risk of TB exposure and who have previous documented negative results. Instead of participating in periodic testing, staff with documented TB infection (positive TST or BAMT) shall receive a symptom screen annually. This screen shall be accomplished by educating the staff about symptoms of TB disease (including the staff and/or direct care volunteers responses), documenting the questioning of the staff about the presence of symptoms of TB disease, and instructing the staff

to report any such symptoms immediately to the administrator or director of nursing. Treatment for latent TB infection (LTBI) shall be considered in accordance with CDC and Department guidelines and, if recommended, treatment completion shall be encouraged.

3. Post-exposure TST or a BAMT for staff upon unprotected exposure to *M. tuberculosis*: Perform a contact investigation when unprotected exposure is identified. Administer one (1) TST or a BAMT as soon as possible to all staff who have had unprotected exposure to an infectious TB case/suspect. If the TST or the BAMT result is negative, administer another TST or a BAMT eight to ten (8-10) weeks after that exposure to *M. tuberculosis* ended.

D. Baseline Positive or Newly Positive Test Result:

1. Staff with a baseline positive or newly positive test result for *M. tuberculosis* infection (*i.e.*, TST or BAMT) or documentation of treatment for latent TB infection (LTBI) or TB disease or signs or symptoms of tuberculosis, *e.g.*, cough, weight loss, night sweats, fever, shall have a chest radiograph performed immediately to exclude TB disease (or evaluate an interpretable copy taken within the previous three (3) months). These staff members will be evaluated for the need for treatment of TB disease or latent TB infection (LTBI) and will be encouraged to follow the recommendations made by a physician with TB expertise (*i.e.*, the Department's TB Control program).

2. Staff who are known or suspected to have TB disease shall be excluded from work, required to undergo evaluation by a physician, and permitted to return to work only with approval by the Department TB Control program. Repeat chest radiographs are not required unless symptoms or signs of TB disease develop or unless recommended by a physician.

1404. Client Tuberculosis Screening (I)

A. Client Tuberculosis Screening Procedures.

1. Clients in 24-hour facilities shall have evidence of a two-step tuberculin skin test. If the client in a 24-hour facility has a documented negative tuberculin skin test (at least single-step) within the previous twelve (12) months, the client shall have only one (1) tuberculin skin test to establish a baseline status.

2. Clients in 24-hour facilities shall have at least the first step within thirty (30) days prior to admission and no later than forty-eight (48) hours after admission pursuant to the physical examination as specified in Section 1001.

3. Clients in the narcotic treatment program shall have a single-step test within one (1) month prior to admission and no later than ten (10) days after admission as specified in Section 2808.

B. Clients with Positive Tuberculosis Results.

1. Clients with a baseline positive or newly positive test result for *M. tuberculosis* infection (*i.e.*, TST or BAMT) or documentation of treatment for latent TB infection (LTBI) or TB disease or signs or symptoms of tuberculosis, *e.g.*, cough, weight loss, night sweats, fever, shall have a chest radiograph performed immediately to exclude TB disease (or evaluate an interpretable copy taken within the previous three (3) months). Routine repeat chest radiographs are not required unless symptoms or signs of TB disease develop or unless recommended by a physician. These clients will be evaluated for the need for treatment of TB disease or latent TB infection (LTBI) and will be encouraged to follow the recommendations made by a physician with TB expertise (*i.e.*, the Department's TB Control program).

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2. Clients who are known or suspected to have TB disease shall be transferred from the facility if the facility does not have an Airborne Infection Isolation room (See Section 101.G), required to undergo evaluation by a physician, and permitted to return to the facility only with approval by the Department's TB Control program.

Renumber existing 61-93.1403 to 61-93.1405 to read:

1405. Housekeeping (II)

The facility and its grounds shall be neat, clean, and free of safety impediments, vermin, and offensive odors.

A. Interior housekeeping shall at a minimum include:

1. Cleaning each specific area of the facility;
2. Cleaning and disinfection, as needed, of equipment used and/or maintained in each area, appropriate to the area and the equipment's purpose or use.
3. Safe storage of harmful chemicals (as indicated on the product label), cleaning materials and supplies in well-lighted closets/rooms, inaccessible to clients. In 24-hour facilities only, when all clients have been authorized permission by a physician, authorized healthcare provider, or certified/licensed counselor to handle cleaning products, and housekeeping chores are part of the therapeutic program, cleaning agents may then be stored in an unsecured fashion.

B. Exterior housekeeping shall at a minimum include:

1. General cleaning of all exterior areas, e.g., porches and ramps, and removal of safety impediments such as water, snow, and ice;
2. Keeping facility grounds free of weeds, rubbish, overgrown landscaping, and other potential breeding sources for vermin;

Renumber existing 61-93.1404 to 61-93.1406 to read:

1406. Infectious Waste (I)

Accumulated waste, including all contaminated sharps, dressings, pathological, and/or similar infectious waste, shall be disposed of in a manner compliant with the Department's SC Guidelines For Prevention and Control of Antibiotic Resistant Organisms in Health Care Settings, R.61-105, and OSHA Bloodborne Pathogens Standard.

Renumber existing 61-93.1405 to 61-93.1407 to read:

1407. Pets (II)

A. Healthy animals that are free of fleas, ticks, and intestinal parasites, and have been examined by a veterinarian prior to entering the facility, have received required inoculations, if applicable, and that present no apparent threat to the health, safety, and well-being of the clients, shall be permitted in the facility, provided they are sufficiently fed, and cared for, and that the pets and their housing/food containers are kept clean.

B. Pets shall not be allowed near clients who have allergic sensitivities to pets, or for other reasons such as clients who do not wish to have pets near them.

C. Pets shall not be allowed in the kitchen area. Pets will be permitted in client dining/activities areas only during times when food is not being served. If the dining/activities area is adjacent to a food preparation or storage area, those areas shall be effectively separated by walls and closed doors while pets are present.

Renumber existing 61-93.1406 to 61-93.1408 to read:

1408. Clean/Soiled Linen and Clothing (II)

A. Clean Linen/Clothing. A supply of clean, sanitary linen/clothing shall be available at all times. Clean linen/clothing shall be stored and transported in an enclosed/covered sanitary manner. Linen/Clothing storage rooms shall be used only for the storage of linen/clothing. Clean linen/clothing shall be separated from storage of other purposes. Enclosing/Covering may be accomplished by utilizing materials such as cloth, plastic, or canvas cover, in order to prevent the contamination of clean linen/clothing by dust or other airborne particles or organisms.

B. Soiled Linen/Clothing.

1. Soiled linen/clothing shall neither be sorted nor rinsed outside of the laundry service area.
2. Provisions shall be made for collecting, transporting, and storing soiled linen/clothing.
3. Soiled linen/clothing shall be kept in enclosed/covered containers.

4. Laundry operations shall not be conducted in client rooms, dining rooms, or in locations where food is prepared, served, or stored. Freezers/refrigerators may be stored in laundry areas, provided sanitary conditions are maintained.

Revise 61-93.1502.A to read:

1502. Disaster Preparedness (II)

A. All facilities shall develop a suitable written plan for actions to be taken in the event of a disaster. All 24-hour facilities shall develop this plan in coordination with their county emergency preparedness agency. Prior to initial licensing of a facility by the Department, the completed plan shall be submitted to the Department for review. Additionally, in instances when there are applications for increases in licensed bed capacity, the emergency/disaster plan shall be updated appropriately to reflect the proposed new total bed capacity. All staff/volunteers shall be made familiar with this plan and instructed as to any required actions.

Revise 61-93.1502.B.1.c to read:

B. The disaster plan for 24-hour facilities shall include, but not be limited to:

1. A sheltering plan to include:

a. The licensed bed capacity and average occupancy rate;

b. Name, address and phone number of the sheltering facility(ies) to which the clients will be relocated during a disaster;

c. A letter of agreement signed by an authorized representative of each sheltering facility which shall include: the number of relocated clients that can be accommodated; sleeping, feeding, and medication plans for the relocated clients; and provisions for accommodating relocated staff. The letter shall be updated annually with the sheltering facility and whenever significant changes occur. For those facilities located in Beaufort,

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Charleston, Colleton, Horry, Jasper, and Georgetown counties, at least one sheltering facility must be located in a county other than these counties.

Revise 61-93.1601.B to read:

1601. Arrangements for Fire Department Response (I)

B. Facilities located outside of a service area or range of a public fire department shall arrange for the nearest fire department to respond in case of fire by written agreement with that fire department. A copy of the agreement shall be kept on file in the facility and a copy shall be forwarded to the Department. If the agreement is changed, a copy shall be forwarded to the Department.

Delete 61-93.6102.

Renumber 61-93.1603 to 61-93.1602 to read:

1602. Fire Response Training (I)

Each staff member/volunteer shall receive training within one week of hiring, and at a frequency determined by the facility, but at least annually thereafter, addressing at a minimum, the following:

- A. Fire plan to include evacuation routes and procedures, and the training of staff;
- B. Reporting a fire;
- C. Use of the fire alarm system, if applicable;
- D. Location and use of fire-fighting equipment;
- E. Methods of fire containment;
- F. Specific responsibilities, tasks, or duties of each individual.

Renumber 61-93.1604 to 61-93.1603 and revise 61-93.1604. B to read:

1603. Fire Drills (I)

A. Clients shall be made familiar with the fire plan and evacuation plan.

B. An unannounced fire drill shall be conducted at least quarterly for all shifts. Each staff member/ volunteer shall participate in a fire drill at least once each year. Records of drills shall be maintained at the facility, indicating the date, time, shift, description, and evaluation of the drill, and the names of staff/volunteers and number of clients directly involved in responding to the drill.

Revise 61-93.1801 to read:

1801. Codes and Standards.

The design and construction specifications for Facilities that Treat Individuals for Psychoactive Substance Abuse or Dependence shall conform to the most current nationally accepted standards for facility design set forth in the International Building Code (IBC); International Fire Codes (IFC); International Plumbing Codes (IPC); International Mechanical Codes (IMC); National Fire Protection Association (NFPA) codes – NFPA 10 - Standard for Portable Fire Extinguishers, NFPA 11 - Standard for Low-, Medium-, and High-Expansion Foam,

NFPA 12 - Standard on Carbon Dioxide Extinguishing Systems, NFPA 12A - Standard on Halon 1301 Fire Extinguishing Systems, NFPA 13 - Standard for the Installation of Sprinkler Systems, NFPA 13R - Standard for the Installation of Sprinkler Systems in Low-Rise Residential Occupancies, NFPA 14 - Standard for the Installation of Standpipe and Hose Systems, NFPA 15 - Standard for Water Spray Fixed Systems for Fire Protection, NFPA 16 - Standard for the Installation of Foam-Water Sprinkler and Foam-Water Spray Systems, NFPA 17 - Standard for Dry Chemical Extinguishing Systems, NFPA 17A - Standard for Wet Chemical Extinguishing Systems, NFPA 18 - Standard on Wetting Agents, NFPA 20 - Standard for the Installation of Stationary Pumps for Fire Protection, NFPA 22 - Standard for Water Tanks for Private Fire Protection, NFPA 24 - Standard for the Installation of Private Fire Service Mains and Their Appurtenances, NFPA 25 - Standard for the Inspection, Testing, and Maintenance of Water-Based Fire Protection Systems, NFPA 30 - Flammable and Combustible Liquids Code, NFPA 30A - Code for Motor Fuel Dispensing Facilities and Repair Garages, NFPA 52 - Vehicular Gaseous Fuel Systems Code, NFPA 54 - National Fuel Gas Code, NFPA 58 - Liquefied Petroleum Gas Code, NFPA 59 - Utility LP-Gas Plant Code, NFPA 70 - National Electrical Code®, NFPA 72 - National Fire Alarm and Signaling Code, NFPA 96 - Standard for Ventilation Control and Fire Protection of Commercial Cooking Operations, NFPA 99 - Health Care Facilities Code, NFPA 101 - Life Safety Code®, and NFPA 110 - Standard for Emergency and Standby Power Systems; International Code Council (ICC) American National Standards I (ANSI) A117.1 – Accessibility Codes; the *Guidelines for Design and Construction of Health Care Facilities* as published by the Facility Guidelines Institute (FGI); and International Existing Building Code (IEBC).

Revise 61-93.1802 to read:

1802. Local and State Codes and Standards (II)

A. Buildings shall comply with pertinent local and state laws, codes, ordinances and standards with reference to design and construction. No facility shall be licensed unless the Department has assurance that responsible local officials (zoning and building) have approved the facility for code compliance.

B. Buildings designed in accordance with the above-mentioned codes will be acceptable to the Department provided the requirements set forth in this regulation are also met.

Revise 61-93.1804 to read:

1804. Submission of Plans and Specifications (II)

A. Prior to construction for new buildings, additions, major alterations or replacement to existing buildings, a building is licensed for the first time, a building changes license type, or a facility increases occupant load/licensed capacity, plans and specifications shall be submitted to the Department for review. Final plans and specifications shall be prepared by an architect and/or engineer registered in South Carolina and shall bear their seals and signatures. Architectural plans shall also bear the seal of a South Carolina registered architectural corporation. These submissions shall be made in at least three stages: schematic, design development, and final. All plans shall be drawn to scale with the title, stage of submission and date shown thereon. Any construction changes from the approved documents shall be approved by the Department. Construction work shall not commence until a plan has been received from the Department. During construction the owner shall employ a registered architect and/or engineer for supervision and inspections. The Department shall conduct periodic inspections throughout each project.

B. When alterations are contemplated that are new construction, or projects with changes to the physical plant of a licensed facility which has an effect on: the function, use or accessibility of an area; structural integrity; active and passive fire safety systems (including kitchen equipment such as exhaust hoods or equipment required to be under the said hood); door, wall and ceiling system assemblies; exit corridors; which increase the occupant load/licensed capacity; and projects pertaining to any life safety systems, preliminary drawings and

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specifications, accompanied by a narrative (submitted on the Project Information Form, DHEC form 0275) completely describing the proposed work, shall be submitted to the Department.

C. Cosmetic changes utilizing paint, wall covering, floor covering, etc., that are required to have a flame-spread rating or other safety criteria shall be documented with copies of the documentation and certifications, kept on file at the facility and made available to the Department.

D. All subsequent addenda, change orders, field orders, and documents altering the Department review must be submitted. Any substantial deviation from the accepted documents shall require written notification, review and re-approval from the Department.

Add new 61-93.1805 to read:

1805. Construction Inspections.

Construction work that violates applicable codes or standards shall be brought into compliance. All projects shall obtain all required permits from the locality having jurisdiction. The Department will not commence inspection unless the construction has proper permitting.

SECTION 1900 - GENERAL CONSTRUCTION REQUIREMENTS

Delete 61-93.1901.

Renumber 61-93.1902 to 61-93.1901 and revise to read:

1901. Fire-Resistive Rating (I)

The fire-resistive ratings for the various structural components shall comply with the applicable code(s) in Section 1800. Fire-resistive ratings of various materials and assemblies not specifically listed in the codes can be found in publications of recognized testing agencies such as Underwriters Laboratories - Building Materials List and Underwriters Laboratories - Fire Resistance Directory.

Delete sections 61-93.1903, 1904, 1905, 1906, 1907, 1908.

Renumber 61-93.1909 to 61-93.1902 to read:

1902. Curtains and Draperies

In bathrooms and client rooms, window treatments shall provide privacy.

Delete existing Section 2000, Hazardous Elements of Construction, in entirety.

Renumber existing Section 2100, Fire Protection Equipment and Systems, to Section 2000 and revise entire section to read:

SECTION 2000 - FIRE PROTECTION EQUIPMENT AND SYSTEMS

2001. Fire Alarms (I)

A. Each facility shall have a partial, manual, automatic, supervised fire alarm system. The system shall be arranged to transmit an alarm automatically to a third party by an approved method. The alarm system shall notify by audible and visual alarm all areas and floors of the building. The alarm system shall shut down central recirculating systems and outside air units that serve the area(s) of alarm origination as a minimum.

B. There must be a fire alarm pull station in or near each nurse or supervised charge station.

C. All fire, smoke, heat, sprinkler flow, or manual fire alarming devices or systems must be connected to the main fire alarm system and trigger the system when they are activated.

Delete existing Section 2200, Exits, in entirety.

Delete existing Section 2300, Water Supply/Hygiene, in entirety.

Revise existing Section 2400 and renumber to Section 2100, Electrical. Renumber subsections accordingly, to read:

SECTION 2100 - ELECTRICAL

2101. Emergency Electric Service (I)

Emergency electric services shall be provided as follows:

- A. Exit lights, if required;
- B. Exit access corridor lighting;
- C. Illumination of means of egress;
- D. Fire detection and alarm system, if required.

2102. Emergency Generator Service.

A. Residential Treatment Program Facilities and Narcotic Treatment Program Facilities shall have an emergency generator and shall provide certification that construction and installation of emergency generator service complies with requirements of all adopted State, Federal, or local codes, ordinances, and regulations.

B. Residential Treatment Program Facilities and Narcotic Treatment Program Facilities shall have an emergency generator that provides emergency electrical service during interruption of the normal electrical service and shall be provided to the distribution system as follows:

- 1. Exit lights and exit directional signs;
- 2. Exit access corridor lighting;
- 3. Lighting of means of egress and staff work areas;
- 4. Fire detection and alarm systems;
- 5. In patient care areas;
- 6. Signal system;
- 7. Equipment necessary for maintaining telephone service;
- 8. Elevator service that will reach every patient floor when rooms are located on other than the ground floor;
- 9. Fire pump (if applicable);

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10. Equipment for heating patient rooms;
11. Public restrooms;
12. Essential mechanical equipment rooms;
13. Battery-operated lighting and a receptacle in the vicinity of the emergency generator;
14. Alarm systems, water flow alarm devices, and alarms required for medical gas systems;
15. Patient records when solely electronically based.

Delete Section 2500, Heating, Ventilation, and Air Conditioning, in its entirety.

Revise existing Section 2600, Physical Plant, and renumber to Section 2200. Renumber subsections accordingly, to read:

SECTION 2200 - PHYSICAL PLANT

2201. Facility Accommodations/Floor Area (II)

A. For 24-hour facilities, there shall be sufficient living arrangements for everyone residing therein providing for clients' quiet reading, study, relaxation, entertainment or recreation. This shall include bedrooms, bathrooms, living, dining, and recreational areas available for clients' use. Consideration shall be given to the preferences of the clients in determining appropriate homelike touches in the facility client rooms and activity/dining areas.

B. Minimum square footage requirements shall be as follows: (II)

1. Twenty square feet per licensed bed of living and recreational areas combined, excluding bedrooms, halls, kitchens, dining rooms, bathrooms, and rooms not available to the clients. In facilities for mothers with children, there shall be at least 20 square feet per licensed bed and 10 square feet per child of living and recreational areas together.

2. Fifteen square feet of floor space in the dining area per licensed bed. In facilities for mothers with children, dining space shall accommodate 15 square feet per licensed bed and 7.5 square feet per child.

C. All required care/treatment/services furnished at the facility shall be provided in a manner which does not require clients to ambulate from one site to another outside the building, nor which impedes clients from ambulating from one site to another due to the presence of physical barriers.

D. There shall be accommodations available to meet group needs of clients and their visitors.

E. Methods for ensuring visual and auditory privacy between client and staff/volunteers shall be provided as necessary.

2202. Design (I)

A facility shall be planned, designed and equipped to provide and promote the health, safety, and well-being of each client. Facility design shall be such that all clients have access to required services. There shall be 200 gross square feet per licensed bed in facilities 10 beds or less, and an additional 100 gross square feet per licensed bed for each licensed bed over 10.

2203. Furnishings/Equipment (I)

- A. The physical plant shall be maintained free of fire hazards or impediments to fire prevention.
- B. No portable electric or unvented fuel heaters shall be permitted.
- C. Fireplaces and fossil-fuel stoves, e.g., wood-burning, shall have partitions or screens or other means to prevent burns. Fireplaces shall be vented to the outside. "Unvented" type gas logs are not allowed. Gas fireplaces shall have a remote gas shutoff within the room and not inside the fireplace.

2204. Number and Locations (I)

- A. If exit doors and cross-corridor doors are locked, the requirements under Special Locking Arrangements shall be met as applicable to the code listed in Section 1801.
- B. Halls, corridors and all other means of egress from the building shall be maintained free of obstructions.
- C. Those clients that may require physical or verbal assistance to exit the building shall not be located above or below the floor of exit discharge.
- D. Each client room shall open directly to an approved exit access corridor without passage through another occupied space or shall have an approved exit directly to the outside at grade level and accessible to a public space free of encumbrances.

EXCEPTION: When two client rooms share a common "sitting" area that opens onto the exit access corridor.

2205. Water Supply/Hygiene (II)

Client and staff hand-washing lavatories and client showers/tubs shall be supplied with hot and cold water at all times.

2206. Temperature Control (I)

- A. Plumbing fixtures that require hot water and which are accessible to clients shall be supplied with water that is thermostatically controlled to a temperature of at least 100 degrees F. and not to exceed 120 degrees F. at the fixture.
- B. The water heater or combination of heaters shall be sized to provide at least six gallons per hour per bed at the above temperature range. (II)
- C. Hot water supplied to the kitchen equipment/utensil washing sink shall be supplied at 120 degrees F. provided all kitchen equipment/utensils are chemically sanitized. For those facilities sanitizing with hot water, the sanitizing compartment of the kitchen equipment/utensil washing sink shall be capable of maintaining the water at a temperature of at least 180 degrees F.
- D. Hot water provided for washing linen/clothing shall not be less than 160 degrees F. Should chlorine additives or other chemicals which contribute to the margin of safety in disinfecting linen/clothing be a part of the washing cycle, the minimum hot water temperature shall not be less than 110 degrees F., provided hot air drying is used. (II)

2207. Design and Construction of Wastewater Systems (I)

- A. The wastewater system for commercial kitchens shall be in accordance with R.61-25.

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B. Liquid waste shall be disposed of in a wastewater system approved by the local authority, e.g., sewage treatment facility.

2208. Electric Wiring (I)

Wiring shall be inspected at least annually by a licensed electrician, registered engineer, or certified building inspector.

2209. Panelboards (II)

The directory shall be labeled to conform to the actual room designations. Clear access of stored materials shall be maintained to the panel. The panelboard directory shall be labeled to conform to the actual room numbers or designations.

2210. Lighting

A. Spaces occupied by persons, machinery, equipment within buildings, approaches to buildings, and parking lots shall be lighted. (II)

B. Adequate artificial light shall be provided to include sufficient illumination for reading, observation, and activities.

C. Client rooms shall have general lighting in all parts of the room, and shall have at least one light fixture for night lighting. A reading light shall be provided for each client.

D. Hallways, stairs, and other means of egress shall be lighted at all times.

2211. Ground Fault Protection (I)

A. Ground fault circuit-interrupter protection shall be provided for all outside receptacles and bathrooms.

B. Ground fault circuit-interrupter protection shall be provided for any receptacles within six feet of a sink or any other wet location. If the sink is an integral part of the metal splashboard grounded by the sink, the entire metal area is considered part of the wet location.

2212. Exit Signs (I)

A. In facilities licensed for six or more beds, required exits and ways to access thereto shall be identified by electrically-illuminated exit signs bearing the words "Exit" in red letters six inches in height on a white background.

B. Changes in egress direction shall be marked with exit signs with directional arrows.

C. Exit signs in corridors shall be provided to indicate two directions of exit.

2213. Heating, Ventilation, and Air Conditioning (HVAC) (II)

A. The HVAC system shall be inspected at least once a year by a certified/licensed technician.

B. The facility shall maintain a temperature of between 72 and 78 degrees F. in client areas.

C. No HVAC supply or return grill shall be installed within three feet of a smoke detector. (I)

D. Intake air ducts shall be filtered and maintained to prevent the entrance of dust, dirt, and other contaminating materials. The system shall not discharge in such a manner that would be an irritant to the clients/staff/volunteers.

E. Each bath/restroom shall have either operable windows or have approved mechanical ventilation.

2214. Client Rooms

A. Each client room shall be equipped with the following as a minimum for each client:

1. A comfortable single bed having a mattress with moisture-proof cover, sheets, blankets, bedspread, pillow and pillowcases; roll-away type beds, cots, bunkbeds, and folding beds shall not be used. It is permissible to remove a client bed and place the mattress on a platform or pallet, or utilize a recliner, provided the physician or other authorized healthcare provider has approved, and the decision is documented in the ITP. (II)

2. A closet or wardrobe, a bureau consisting of at least three drawers, and a compartmentalized bedside table/nightstand to adequately accommodate each client’s personal clothing, belongings, and toilet articles. Built-in storage is permitted.

EXCEPTION: In existing facilities, if square footage is limited, clients may share these storage areas; however, specific spaces within these storage areas shall be provided particular to each client.

3. A comfortable chair for each client occupying the room. In existing facilities, if the available square footage of the client room will not accommodate a chair for each client or if the provision of multiple chairs impedes client ability to freely and safely move about within their room, at least one chair shall be provided and provisions made to have additional chairs available for temporary use in the client’s room by visitors.

B. If hospital-type beds are used, there shall be at least two lockable casters on each bed, located either diagonally or on the same side of the bed.

C. Beds shall not be placed in corridors, solaria, or other locations not designated as client room areas. (I)

D. No client room shall contain more than three beds. In facilities with mothers with children, no client room shall contain more than one licensed bed and two cribs/beds. (II)

E. No client room shall be located in a basement.

F. Access to a client room shall not be by way of another client room, toilet, bathroom or kitchen .

EXCEPTION: Access through the kitchen is permissible in facilities with five beds or less.

G. Such equipment as bed pans, urinals and hot water bottles as necessary to meet client needs shall be provided. Portable commodes shall be permitted in client rooms only at night or in case of temporary illness. At all other times, they shall be suitably stored. Permanent positioning of a portable toilet at bedside shall only be permitted if the room is private, the commode is maintained in a sanitary condition, and the room is of sufficient size to accommodate the commode. (II)

H. Side rails may be utilized when required for safety and when ordered by a physician or other authorized healthcare provider. (II)

I. In semi-private rooms, when personal care is being given, arrangements shall be made to ensure privacy, e.g., portable partitions or cubicle curtains when needed or requested by a client.

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J. Consideration shall be given to client compatibility in the assignment of rooms for which there is multiple occupancy.

K. At least one private room shall be available in the facility in order to provide assistance in addressing client compatibility issues, client preferences, and accommodations for clients with communicable disease.

2215. Client Room Floor Area

A. Except for facilities of five beds or less, each client room is considered a tenant space and shall be enclosed by one hour fire-resistive construction with a 20-minute fire-rated door, opening onto an exit access corridor. (I)

B. Each client room shall be an outside room with an outside window or door for exit in case of emergency. This window or door may not open onto a common screened porch. (I)

C. The client room floor area is a usable or net area and does not include wardrobes (built-in or freestanding), closets, or the entry alcove to the room. The following allowance of floor space shall be as a minimum: (II)

1. Rooms for only one client: 100 square feet;
2. Rooms for more than one client: 80 square feet per client.

3. In facilities for mothers with children, rooms for client and child: 80 square feet per licensed bed and 40 square feet per child with a maximum of two children per client. When a bed is required in lieu of a crib for a child, the square footage shall be 50 square feet per child.

D. There shall be at least three feet between beds. (II)

2216. Bathrooms/Restrooms (II)

A. Privacy shall be provided at toilets, urinals, bathtubs, and showers.

B. An adequate supply of toilet tissue shall be maintained in each bathroom.

C. In bath/restrooms not designed for the disabled, the restroom floor area shall not be less than 15 square feet.

D. There shall be at least one lavatory in or adjacent to each bathroom/restroom. Liquid soap shall be provided and a sanitary individualized method of drying hands shall be available at each lavatory.

E. Easily cleanable receptacles shall be provided for waste materials. Such receptacles in toilet rooms for women shall be covered.

F. The number of bathrooms/restrooms for the disabled shall be provided whether any of the clients are classified as disabled or not in accordance with the applicable code in Section 1800.

G. All bathroom floors shall be entirely covered with an approved nonabsorbent covering. Walls shall be nonabsorbent, washable surfaces to the highest level of splash.

H. There shall be a mirror above each bathroom lavatory for clients' grooming.

I. In 24-Hour Facilities:

1. Toilets shall be provided in ample number to serve the needs of the clients and staff/volunteers. The minimum number shall be one toilet for each six licensed beds or fraction thereof.

2. All bathtubs, toilets, and showers used by clients shall have approved grab bars securely fastened in a usable fashion.

3. There shall be one bathtub or shower for each eight licensed beds or fraction thereof.

4. Separate bathroom facilities shall be provided for live-in staff/volunteers and/or family. Where there is no live-in staff/volunteers, separate toilet facilities shall be provided for staff/volunteers in facilities with 11 or more beds.

5. Toilet facilities shall be conveniently located for kitchen employees. The doors of all toilet facilities located in the kitchen shall be self-closing.

6. Bath towels and washcloths shall be provided to the clients as needed. Bath linens assigned to specific clients may not be stored in centrally-located bathrooms. Provisions shall be made for each client to properly keep bath linens in his/her room, i.e., on a towel hook/bar designated for each client occupying that room, or bath linens to meet client needs shall be distributed as needed, and collected after use and stored properly, per Section 1408.

EXCEPTION: Bath linens assigned to specific clients for immediate use may be stored in the bathroom provided the bathroom serves a single occupancy (one client) room, or is shared by occupants of adjoining rooms, for a maximum of six clients. A method that distinguishes linen assignment and discourages common usage shall be implemented.

2217. Seclusion Room (II)

A. A room used for seclusion shall have at least 60 square feet of floor space and be free of safety hazards, and appropriately lighted. All areas of the room shall be clearly visible from the outside.

B. There shall not be items or articles in a seclusion room that a client might use to injure him/herself.

C. A mat and bedding shall be provided in the seclusion room unless an exception is authorized by order of a physician or other authorized healthcare provider.

2218. Client Care Unit and Station (Applicable to medical detoxification facilities only) (II)

A. Each client care unit shall have a client care station.

B. A client care unit shall contain not more than 60 licensed beds; and the client care station shall not be more than 150 feet from a client room, and shall be located and arranged to permit visual observation of the unit corridor(s).

C. Each client care station shall contain separate spaces for the storage of wheelchairs and general supplies/equipment for that station.

D. There shall be at, or near each client care station, a separate medicine preparation room with a cabinet with one or more locked sections for narcotics, work space for preparation of medicine, and a sink. As an alternative, a medicine preparation area with counter, cabinet space and a sink shall be required on those units where there is:

1. A unit dose system in which final medication preparation is not performed on the client care station; or

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2. A 24-hour pharmacy on the premises; or
3. Procedures that preclude medication preparation at the client care station.

2219. Doors (II)

- A. All client rooms and bath/restrooms shall have opaque doors for the purpose of privacy.
- B. All glass doors, including sliding or patio type doors shall have a contrasting or other indicator that causes the glass to be observable, e.g., a decal located at eye level.
- C. Exit doors required from each floor shall swing in the direction of exit travel. Doors, except those to spaces such as small closets that are not subject to occupancy, shall not swing into corridors in a manner that obstructs corridor traffic flow or reduces the corridor width to less than one-half the required width during the opening process.

EXCEPTION: Not applicable to facilities with five or less beds not built to institutional standards.

- D. Bath/restroom door widths shall be not less than 32 inches.
- E. Doors to client occupied rooms shall be at least 32 inches wide.
- F. Doors that have locks shall be unlockable and openable with one action.
- G. If client room doors are lockable, there shall be provisions for emergency entry. There shall not be locks that cannot be unlocked and operated from inside the room.
- H. All client room doors shall be solid-core.
- I. Soiled linen storage rooms over 100 square feet shall be in accordance with applicable code in Section 1800.
- J. Seclusion room doors shall have a window through which all parts of the room are observable.

2220. Elevators (II)

Elevators shall be inspected and tested upon installation prior to first use, and annually thereafter by a certified elevator inspector.

2221. Corridors (II)

- A. Corridor width requirements for 24-hour facilities shall be as follows:
 1. Less than six licensed beds - not less than 36 inches;
 2. Six to 10 licensed beds - not less than 40 inches;
 3. Over 10 licensed beds - not less than 44 inches.
- B. Corridors and passageways in all facilities shall be in accordance with the SBC.

2222. Ramps (II)

A. At least one exterior ramp, accessible by all clients, staff, and visitors shall be installed from the first floor to grade.

B. The ramp shall serve all portions of the facility where clients are located.

C. The surface of a ramp shall be of nonskid materials.

D. Ramps shall be constructed in a manner in compliance with the applicable code in Section 1800.

E. Ramps in facilities with 11 or more licensed beds shall be of noncombustible construction. (I)

F. Ramps shall discharge onto a surface that is firm and negotiable by disabled persons in all weather conditions and to a location accessible for loading into a vehicle.

2223. Landings (II)

Exit doorways shall not open immediately upon a flight of stairs. A landing shall be provided that is at least the width of the door and is the same elevation as the finished floor at the exit.

2224. Handrails/Guardrails (II)

Handrails and Guardrails shall be installed and maintained in accordance with the applicable code in Section 1800.

2225. Screens (II)

Windows, doors and openings intended for ventilation shall be provided with insect screens.

2226. Windows

A. The window dimensions and maximum height from floor to sill shall be in accordance with the applicable code in Section 1800.

B. Where clear glass is used in windows, with any portion of the glass being less than 18 inches from the floor, the glass shall be of "safety" grade, or there shall be a guard or barrier over that portion of the window. This guard or barrier shall be of sufficient strength and design so that it will prevent an individual from injuring him/herself by accidentally stepping into or kicking the glass. (II)

2227. Janitor's Closet (II)

There shall be a lockable janitor's closet in 24-hour facilities with 16 or more beds. Each closet shall be equipped with a mop sink or receptor and space for the storage of supplies and equipment.

2228. Storage Areas

A. Adequate general storage areas shall be provided for client and staff/volunteers belongings, equipment, and supplies.

B. Areas used for storage of combustible materials and storage areas exceeding 100 square feet in area shall be provided with an NFPA-approved automatic sprinkler system. (I)

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C. In storage areas provided with a sprinkler system, a minimum vertical distance of 18 inches shall be maintained between the top of stored items and the sprinkler heads. The tops of storage cabinets and shelves attached to or built into the perimeter walls may be closer than 18 inches below the sprinkler heads. In nonsprinklered storage areas, there shall be at least 24 inches of space from the ceiling. (I)

D. All ceilings, floor assemblies, and walls enclosing storage areas of 100 square feet or greater shall be of not less than one-hour fire-resistive construction with 3/4-hour fire-rated door(s) and closer(s). (I)

E. Storage buildings on the premises shall meet the applicable code listed in section 1800 regarding distance from the licensed building. Storage in buildings other than on the facility premises shall be secure and accessible. An appropriate controlled environment shall be provided if necessary for storage of items requiring such an environment.

F. In mechanical rooms used for storage, the stored items shall be located away from mechanical equipment and shall not be a type of storage that might create a fire or other hazard. (I)

G. Supplies/equipment shall not be stored directly on the floor. Supplies/equipment susceptible to water damage/contamination shall not be stored under sinks or other areas with a propensity for water leakage.

H. In facilities licensed for 16 beds or more, there shall be a soiled linen storage room which shall be designed, enclosed, and used solely for that purpose, and provided with mechanical exhaust directly to the outside.

2229. Telephone Service

A. Appropriate telephone services shall be made available in the facility to clients and/or visitors.

B. At least one telephone shall be available on each floor of the facility for use by clients and/or visitors for their private, discretionary use; pay phones for this purpose are acceptable. Telephones capable of only local calls are acceptable for this purpose, provided other arrangements exist to provide client/visitor discretionary access to a telephone capable of long distance service.

C. At least one telephone shall be provided for staff/volunteers to conduct routine business of the facility and to summon assistance in the event of an emergency; pay station phones are not acceptable for this purpose.

2230. Location

A. Transportation. The facility shall be served by roads that are passable at all times and are adequate for the volume of expected traffic.

B. Parking. The facility shall have parking space to reasonably satisfy the needs of clients, staff/volunteers, and visitors.

C. Access to firefighting equipment. Facilities shall maintain adequate access to and around the building (s) for firefighting equipment. (I)

D. NTP facilities shall not operate within 500 feet of:

1. The property line of a church;
2. The property line of a public or private elementary or secondary school;
3. A boundary of any residential district;

4. A public park adjacent to any residential district;
5. The property line of a lot devoted to residential use.

2231. Outdoor Area

A. Outdoor areas deemed to be unsafe due to the existence of unprotected physical hazards such as steep grades, cliffs, open pits, high voltage electrical equipment, high speed or heavily traveled roads, and/or roads exceeding two lanes excluding turn lanes, lakes, ponds, or swimming pools, shall be enclosed by a fence or have natural barriers (shall be of size, shape, and density which effectively impedes travel to the hazardous area) to protect the clients. (I)

B. Where required, fenced areas that are part of a fire exit from the building, shall have a gate in the fence that unlocks in case of emergency per Special Locking Arrangements in the applicable code listed in Section 1800. (I)

C. Mechanical or equipment rooms that open to the outside of the facility shall be kept protected from unauthorized individuals.

D. If a swimming pool is part of the facility, it shall be designed, constructed, and maintained pursuant to R.61-51. (II)

E. There shall be sufficient number of outside tables and comfortable chairs to meet the needs of the client.

Renumber existing Section 2700, Severability, to Section 2300. Renumber subsections accordingly, to read:

SECTION 2300 - SEVERABILITY

2301. General

In the event that any portion of these regulations is construed by a court of competent jurisdiction to be invalid, or otherwise unenforceable, such determination shall in no manner affect the remaining portions of these regulations, and they shall remain in effect, as if such invalid portions were not originally a part of these regulations.

Renumber existing Section 2800, General, to Section 2400. Renumber subsections accordingly, to read:

SECTION 2400 - GENERAL

2401. General

Conditions that have not been addressed in these regulations shall be managed in accordance with the best practices as interpreted by the Department.

Renumber existing PART II, Section 2900, Program Description, to Section 2500 and renumber subsections accordingly, to read:

PART II - OUTPATIENT FACILITIES

SECTION 2500 - PROGRAM DESCRIPTION

2501. General.

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A. Outpatient facilities provide treatment/care/services to individuals who use, abuse, or are dependent upon or addicted to psychoactive substances, and their families, based upon an ITP in a nonresidential setting.

B. Outpatient treatment/care/services include assessment, diagnosis, individual and group counseling, family counseling, case management, crisis management services, and referral. Outpatient services are designed to treat the individual's level of problem severity and to achieve permanent changes in his/her behavior relative to alcohol/drug abuse. These services address major lifestyle, attitudinal and behavioral issues that have the potential to undermine the goals of treatment or the individual's ability to cope with major life tasks without the nonmedical use of alcohol or other drugs. The length and intensity of outpatient treatment varies according to the severity of the individual's illness and response to treatment.

2502. Assessment

A complete written assessment of the client shall be conducted within a time-period determined by the facility, but no later than the third visit. (II)

2503. Individualized Treatment Plan

An ITP in accordance with Section 701.C & D shall be completed within a time-period determined by the facility, but no later than the third visit. (II)

Renumber existing PART III, Section 3000 to Section 2600 and renumber subsections accordingly, to read:

PART III - RESIDENTIAL TREATMENT PROGRAM FACILITIES

SECTION 2600 - PROGRAM DESCRIPTION

2601. General

A. Residential treatment programs utilize a multi-disciplinary staff for clients whose biomedical and emotional/behavioral problems are severe enough to require residential services and who are in need of a stable and supportive environment to aid in their recovery and transition back into the community. Twenty-four-hour observation, monitoring, and treatment shall be available.

B. Residential treatment programs shall provide or make available the following: (II)

1. Room and board including shared responsibility by clients for daily operation of the facility, e.g., cooking, cleaning, and maintenance of house rules as appropriate to the level of residential treatment provided.

2. Specialized professional consultation, supervision and direct affiliation with other levels of treatment;

3. Physician and nursing care and observation based on clinical judgment if appropriate to the level of treatment;

4. Arrangements for appropriate laboratory and toxicology tests as needed;

5. Availability of a physician 24 hours a day by telephone;

6. Counselors to assess and treat adult alcohol and/or other drug dependent clients and obtain and interpret information regarding the needs of these clients. Such counselors shall be knowledgeable of the biological and psychological dimensions of alcohol and/or other drug dependence;

7. Counselors to provide planned regimen of 24-hour professionally-directed evaluation, care and treatment services for addicted persons and their families to include individual, group, and/or family counseling directed toward specific client goals indicated in his/her ITP;

8. Health education services;

9. Educational guidance and educational program referral when indicated;

10. Vocational counseling for any client when indicated. For those not employed, staff/volunteers shall facilitate the client's pursuit of job placement, as appropriate;

11. Work activity participation by clients provided such activities are an integral part of the rehabilitative process, clients are made aware of the necessity of their participation in such activities, and such activities are not a substitute for staff;

12. Leisure time activities, including recreational activities;

13. Planned clinical program activities designed to enhance the client's understanding of addiction;

14. Multi-disciplinary individualized assessments and treatment are provided;

15. Family and significant other services;

16. Living skills training, as needed.

2602. Staffing

A. A staff member/volunteer/designated client shall be present and in charge at all times during daytime hours when clients are present in the facility. A staff member/volunteer/designated client-in-charge shall know how to respond to client needs and emergencies. (I)

B. Number of staff that shall be maintained in all facilities:

1. In each building, there shall be at least one staff member/volunteer/designated client on duty for each 10 clients or fraction there of present during peak activity hours. (II)

2. Required nighttime (after the evening meal) staffing shall be provided by a staff member, volunteer, or a designated client:

a. In each building, there shall be at least one staff member/volunteer/designated client on duty for each 20 clients or fraction thereof.

b. In buildings housing more than 10 clients, a staff member/volunteers/designated client shall be awake and dressed.

3. If a client serves as staff, the facility shall ensure that the following conditions are met: (II)

a. Client is approved by the administrator, in writing, to perform the duties required of a staff member during these particular hours, and s/he agrees in writing to perform them;

b. Client understands and enforces applicable regulatory requirements;

c. Client is trained and able to respond to emergencies;

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d. Client is able to communicate with an on-call staff member;

e. Client is properly oriented to written applicable policies and/or procedures, to include the inservice training requirements in Section 502.

f. The condition of any other clients of the facility may preclude permitting a client to serve in a designated staff role.

2603. Admission (II)

Persons not eligible for admission are:

A. Any person who because of acute mental illness or intoxication presents an immediate threat of harm to him/herself and/or others;

B. Any minor as defined in Section 101.MM. See Section 804 for exceptions for minors;

C. Any person needing detoxification services, hospitalization, or nursing home care.

2604. Assessment (II)

A complete written assessment of the client in accordance with Section 101.H by a multi-disciplinary treatment team shall be conducted within a time-period determined by the facility, but no later than 72 hours after admission.

2605. Individualized Treatment Plan (II)

An ITP in accordance with Section 701.D shall be completed of the client by a multi-disciplinary treatment team within a time-period determined by the facility, but no later than seven days after admission.

2606. Facilities For Mothers With Children (II)

The health needs/care of the child shall be provided in the following manner:

A. Mothers shall provide or arrange for the health needs/care of their children.

B. Children shall be in the mother's care or in a child care program approved by DSS.

C. Arrangements for emergency care for the children shall be provided.

Renumber PART IV, Section 3100, Program Description, to Section 2700 and renumber subsections accordingly. Revise text of existing Section 3101.B (new section 2701.B).

PART IV - DETOXIFICATION FACILITIES

SECTION 2700 - PROGRAM DESCRIPTION

2701. Freestanding Medical Detoxification Facility

Medical detoxification facilities shall provide at a minimum the following treatment and support services: (II)

A. Intake medical examination and screening by a physician or other authorized healthcare provider to determine need for medical services or referral for serious medical complications;

B. Continuing observation of each client's condition to recognize and evaluate significant signs and symptoms of medical distress and take appropriate action. Each client's general condition shall be monitored and his/her vital signs taken at a frequency as determined by the facility, but not less than three times during the first 72 hours of admission to the facility. As an alternative, freestanding medical detoxification facilities shall provide continuing observation of each client's condition to recognize and evaluate significant signs and symptoms of medical distress and take appropriate action. This shall include the use of an emergency medication kit or cart as appropriate provided the following conditions are met:

1. Each facility shall have a nondispensing drug outlet permit issued by the SC Board of Pharmacy;
2. Each facility shall maintain, upon the advice and written approval of the Department's Bureau of Drug Control, the facility's Medical Director, and consultant pharmacist, an emergency medication kit or Cart containing controlled substances that address medical distress and withdrawal symptoms at each client care station for the use of physicians or other legally authorized healthcare providers in treating the emergency needs of clients.
3. The emergency medication kit or cart shall be sealed and stored in a secured area in such a manner as to prevent unauthorized access and to ensure a proper environment for preservation of the medications within, but in such a manner as to allow immediate access.
4. Whenever the emergency medication kit or cart is opened, the use of contents shall be documented by the facility staff and it shall be restocked and resealed by a pharmacist within 48 or the end of the next business day, whichever is longer.
5. Medications used from the emergency medication kit or cart shall be replaced according to facility policy.
6. The contents of the emergency medication kit or cart shall be listed and maintained on the exterior of the emergency medication kit or cart, and shall correspond to the list. A copy of the inventory list shall be maintained at the client care station for quick reference.
7. The facility may determine that one emergency medication kit can be readily accessible to, and adequately meet the needs of two or more client care stations. If such is the case, the facility's written policies shall include the location(s) of the emergency medication kit(s) and the justification for this determination. There shall not be less than one emergency medication kit on each client floor.
8. At least monthly the licensed nurse shall examine the emergency medication kit(s) and controlled medication records and certify to the administrator that this inventory is correct;

C. Medication as appropriate to assist in the withdrawal process;

D. A plan for supervised withdrawal, to be implemented upon admission;

E. Room, dietary service, and other care and supervision necessary for the health and safety of the client;

F. Counseling designed to motivate clients to continue in the treatment process and referral to the appropriate treatment modality.

2702. Social Detoxification Facility

Social detoxification facilities shall provide, at a minimum, the following services:

A. Screening and intake provided by staff/volunteers specially trained to monitor the client's physical condition;

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B. Development of an ITP for supervised withdrawal;

C. Continuing observation of each client's condition to recognize and evaluate significant signs and symptoms of medical distress and take appropriate action;

D. Room, dietary service, and other care and supervision necessary for the maintenance of the client;

E. Counseling designed to motivate clients to continue in the treatment process.

2703. Staffing

A. A staff member/volunteer shall be present and in charge at all times. All staff members/volunteers shall be knowledgeable as to how to respond to emergencies. (I)

B. The staffing arrangement shall be, at a minimum, the following:

1. In each building, there shall be at least one direct care/counselor staff member for each 10 clients or fraction thereof on duty at all times. Staff members/volunteers shall be awake and dressed at all times, able to appropriately respond to client needs, and know how to respond to emergencies. (II)

2. In medical detoxification facilities only, staff/volunteers shall be under the general supervision of a physician or registered nurse; a physician, licensed nurse, or other authorized medical healthcare provider shall be present at all times. (I)

3. In social detoxification centers, there shall be consultation with medical authorities when warranted.

2704. Admission

A. Appropriate admission to a detoxification facility shall be determined by a licensed or certified counselor and subsequently shall be authorized by a physician or other authorized healthcare provider in accordance with Section 1001.A .

B. Persons not eligible for admission are:

1. Any person who, because of acute mental illness or intoxication, presents an immediate threat of harm to him/herself and others. (I)

2. Any person needing hospitalization, residential treatment program care, or nursing home care. (I)

3. Any person under 18 years of age. See Section 804 for exceptions for minors. (II)

4. Anyone not meeting facility requirements for admission.

C. Determination of the type of detoxification needed shall be guided by the definitions outlined in Sections 101.S.1 and 101.S.2.

2705. Assessment (II)

A clinical screening that includes a review of the client's drug abuse/usage and treatment history shall be conducted prior to the delivery of treatment.

2706. Individualized Treatment Plan (II)

An ITP shall be completed for supervised withdrawal within a time-period determined by the facility.

Revise Part V Section 3200 to 2800 and renumber subsections accordingly. Revise existing section 3208.A.8 (renumbered to 2808.A.8) and existing section 3209.G (renumbered to 2809.G), to read.

PART V - NARCOTIC TREATMENT PROGRAMS**SECTION 2800 - PROGRAM DESCRIPTION****2801. General**

A. Narcotic treatment programs (NTP) provide medications for the rehabilitation of persons dependent on opium, morphine, heroin, or any derivative or synthetic drug of that group. Opioid maintenance therapy (OMT) is term that encompasses a variety of pharmacologic and non-pharmacologic treatment modalities, including the therapeutic use of specialized opioid compounds such as methadone and levo-alpha-acetylmethadol (LAAM) to psycho-pharmacologically occupy opiate receptors in the brain, extinguish drug craving, and thus establish a maintenance state. OMT is a separate service that can be provided in any level of care, as determined by the client's needs. Adjunctive non-pharmacologic interventions are essential and may be provided in OMT or through coordination with another addiction treatment provider.

B. An NTP has the following characteristics:

1. Support systems:

- a. Linkage with or access to psychological, medical, and psychiatric consultation;
- b. Linkage with or access to emergency medical and psychiatric affiliations with more intensive levels of care, as needed;
- c. Linkage with or access to evaluation and ongoing primary medical care;
- d. Ability to conduct or arrange for appropriate laboratory and toxicology tests;
- e. Availability of physician to evaluate, prescribe, and monitor use of NTP medication, and of nurses and pharmacists to dispense and administer NTP medication.

2. Staff:

- a. An interdisciplinary team of appropriately trained and certified or licensed addiction professionals, including a medical director, counselors, and the medical staff delineated below;
- b. Licensed medical, nursing, or pharmacy staff who are available to administer medications in accordance with the physician's prescription or orders. The intensity of nursing care is appropriate to the services provided by an outpatient treatment program that uses NTP medication;
- c. A physician, available either in person or by telephone during NTP medication dispensing and clinic operating hours.

3. Therapies:

- a. Interdisciplinary individualized assessment and treatment;

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b. Assessing, prescribing, administering, reassessing and regulating dose levels appropriate to the individual; supervising detoxification from opiates, methadone or LAAM; overseeing and facilitating access to appropriate treatment, including medication for other physical and mental health disorders;

c. Monitored urine testing;

d. Counseling services;

e. Case management;

f. Psycho-education, including HIV/AIDS and other health education services.

2802. Services (II)

A. Services shall be directed toward reducing or eliminating the use of illicit drugs, criminal activity, or the spread of infectious disease while improving the quality of life and functioning of the client. NTP shall follow rehabilitation stages in sufficient duration to meet the needs of the client. These stages include initial treatment up to seven days in duration, early stabilization lasting up to eight weeks, long-term treatment, medical maintenance, and immediate emergency treatment when needed.

B. The NTP shall directly provide, contract or make referrals, for other services based upon the needs of the client.

C. As part of drug rehabilitative services provided by the NTP, each client shall be provided with individual, group and family counseling appropriate to his/her needs. The frequency and duration of counseling provided to clients shall be determined by the needs of the client and be consistent with the ITP. Counseling shall address, as a minimum:

1. Treatment and recovery objectives included in the ITP as well as education regarding HIV and other infectious diseases. HIV testing shall be made available as appropriate, while maintaining client confidentiality. Staff shall be knowledgeable of current procedures regarding the prevention and treatment of clients with HIV and sexually transmitted diseases (STD) to include testing and interpretation of test results;

2. Concurrent alcohol and drug abuse;

3. Involvement of family and significant others with the informed consent of the client;

4. Providing specialized treatment groups;

5. Guidance in seeking alternative therapies.

2803. Support Services

A. The NTP shall ensure that a comprehensive range of support services, including, but not limited to, vocational, educational, employment, legal, mental health and family problems, medical, alcohol dependence or other addictions, HIV or other communicable diseases, pregnancy and prenatal care, and social services are made available to clients who demonstrate a need for such services. Support services may be provided either directly or by appropriate referral. Support services recommended and utilized shall be documented in the client record.

B. When appropriate, the NTP shall recommend that the client enroll in an education program, vocational activity (vocational evaluation, education or skill training) and/or to seek employment. Deviations from compliance with these recommendations shall be documented in the client's record.

C. The NTP shall establish and utilize linkages with community-based treatment facilities, i.e., an established set of procedures for referring clients to physician or other health care providers when the treatment of coexisting disorders become a major concern.

D. The NTP shall establish linkages with the criminal justice system to encourage continuous treatment of individuals incarcerated or on probation and parole.

2804. Services to Pregnant Clients (II)

A. The facility shall make reasonable effort to ensure that pregnant clients receive pre-natal care by a physician and that the physician is notified of the client's participation in the NTP when the facility becomes aware of the pregnancy.

B. The NTP shall provide, through in-house or referral and documented in the ITP, appropriate services/interventions for the pregnant client to include:

1. Physician consultation at least monthly;
2. Nutrition counseling;
3. Parenting training to include newborn care, health and safety, mother/infant interaction, and bonding.

C. Refusal of prenatal care shall be acknowledged through a signed statement from the client.

D. NTP medication dosage levels shall be maintained at an appropriate level for pregnant clients as determined by the NTP physician. (I)

E. When a pregnant client chooses to discontinue participation in the NTP, the program physician, in coordination with the attending obstetrician, shall supervise the termination process.

2805. Services to Adolescents (II)

A. Treatment and counseling shall be developmentally appropriate for the adolescent.

B. Adolescents who require special medical care shall be referred to a physician who has clinical experience with adolescents and addictions. Adolescents shall be monitored for treatment reactions that may be developmentally detrimental. A plan shall be in place in the event that special medical care is required.

2806. Operating Hours

The NTP shall be operational at least six days a week, except for holidays and days closed due to natural disaster. At least one designated staff member/volunteer shall be available "on-call" at all times for client emergencies and the verification of dosage levels.

2807. Admission (II)

A. The NTP shall only admit those clients whose narcotic dependency can be effectively treated by the NTP in accordance with applicable state and federal laws and regulations.

B. Applicants shall be screened in order to determine admission eligibility. The screening process shall include:

1. Evidence of tolerance to an opioid;

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2. Current or past physiological dependence for at least one year prior to admission. The NTP physician may waive the one-year history of addiction when the client seeking admission meets one of the following criteria:

- a. The client has been recently released from a penal or chronic care facility with a high risk of relapse;
- b. The client has been previously treated and is at risk of relapse;
- c. The client is pregnant and does not exhibit objective signs of opioid withdrawal or physiological dependence.

3. Evidence of multiple and daily self-administration of an opioid;

4. Reasonable attempts to confirm that the applicant is not enrolled in one or more other NTPs;

5. Drug history to determine dependence on opium, morphine, heroin or any derivative or synthetic drug of that group. The drug history shall include:

- a. Drug(s) utilized;
- b. Frequency of use;
- c. Amount utilized;
- d. Duration of use;
- e. Age when first utilized;
- f. Route of administration;
- g. Previous treatment(s);
- h. Criminal history related to drug abuse;
- i. Family history of drug abuse and any medical problems.

6. A diagnosis of opioid addiction, referring to the initial screening criteria in Sections 3207.B.1-5 above, and the following behavioral signs:

- a. Unsuccessful efforts to control use;
- b. Large amounts of time obtaining drugs or recovering from the effects of abuse;
- c. Continual use despite harmful consequences;
- d. Obtaining opiates illegally;
- e. Inappropriate use of prescribed opiates;
- f. Harmful/negative effect on social, occupational or recreational activities.

C. Individuals shall not be admitted to the NTP to receive opioids for pain management only.

1. The NTP shall make the diagnostic distinctions between the disease of opioid addiction and the physical dependence associated with the chronic administration of opioids for the relief of pain, also known as pseudo-addiction. The drug seeking manifestations of persons who are opioid addicted for purpose of euphoria are very similar to the same behavioral manifestations of pseudo-addiction of those with chronic pain seeking only pain relief. Relevant criteria to distinguish pseudo-addiction from opioid addiction include:

- a. Unsuccessful efforts to control use, including past failed detoxification efforts;
- b. Large amounts of time spent in activities to obtain drugs, including past criminal involvements;
- c. Written documentation from a pain management physician attesting to the clients need for NTP medication due to the client's physical dependence, resultant tolerance, and that physician's discontinuance of effective opioid pain relief measures with the client.
- d. Continued use, despite having suffered lifestyle consequences of illicit use, e.g., arrests, hospitalizations, family problems, financial setbacks, and employment difficulties.

2. Appropriate referrals by the NTP physician shall be made as necessary, e.g., pain management specialist.

D. Minors may be treated pursuant to Section 804.

E. Prior to accepting an applicant for treatment, the NTP shall determine if the applicant requires special support services, e.g., psychiatric, prenatal, or alcohol/drug counseling.

F. The applicant's identity, including name, address, date of birth, and other identifying data shall be verified (See Section 701.A);

G. No client shall receive his/her initial dose of NTP medication until the program physician has determined that all admission criteria have been met, to include a completed physical examination by the program physician and confirmation of current medication regimen being taken by the applicant, i.e., contact attending physician.

2808. Physical Examination (II)

A. A physical examination conducted by the NTP physician shall be accomplished within 72 hours prior to the first dose of NTP medication and shall consist of the following as a minimum: (I)

- 1. Evidence of communicable/infectious disease, e.g., hepatitis, HIV, STD;
- 2. Pulmonary, liver, renal, and cardiac abnormalities;
- 3. Possible concurrent surgical problems;
- 4. Neurological assessment;
- 5. Vital signs;
- 6. Evidence of clinical signs of addiction, e.g., dermatologic sequella of addiction;
- 7. Examination of head, ears, eyes, nose, throat (thyroid), chest (including heart, lungs and breast), abdomen, extremities, and skin.
- 8. A single-step tuberculin skin test administered within one month prior to or not later than 10 days after admission as described in Section 1404.

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B. The medical laboratory analysis shall be conducted within seven days of admission and shall include:

1. Complete blood count and differential to include multi-phasic blood chemistry profile;

2. Serological test for syphilis;

3. Initial urinalysis for drug profile;

4. Liver profile;

5. If indicated, an electrocardiogram, chest x-ray, Pap smear, biological pregnancy test, and/or screening for sickle cell disease.

2809. Urine Drug Testing (II)

A. Urine drug testing shall be used as a clinical tool for the purposes of diagnosis and in the development of ITP's.

B. Urine drug testing for the presence of NTP medication, benzodiazepines, cocaine, opiates, marijuana, amphetamines, and barbiturates, as well as other drugs, when clinically indicated by the NTP physician, shall be conducted at a frequency as determined by the NTP.

C. Once the results are available, they shall be addressed by the primary counselor with the client, in order to intervene in drug use behavior.

D. The NTP shall establish and implement collection procedures, including random collection of urine samples, to effectively minimize the possibility of falsification of the sample, to include security measures for prevention of tampering.

E. Following admission, the NTP shall ensure that significant treatment decisions are not based solely on the results of a single urine test.

F. Clients on a monthly schedule for whom urine drug testing reports indicate positive results for any illicit drugs, non-prescription drugs, or a negative result for NTP medication, shall be placed on a weekly urine drug test schedule for a period of time as clinically indicated by the NTP physician.

G. Each client granted take-home dosages shall undergo random urine drug testing on a monthly basis or at a frequency clinically indicated by the NTP physician.

H. Only those laboratories certified in accordance with the federal Clinical Laboratories Improvement Amendments shall be utilized by the NTP for urinalysis.

2810. Orientation

Client orientation shall be accomplished within seven days of admission and documented in the client record. The orientation shall include:

A. NTP guidelines, rules, and regulations;

B. Confidentiality;

C. Urine drug testing procedure;

- D. Administering NTP medication;
- E. Signs and symptoms of overdose and when to seek emergency assistance;
- F. Discharge procedures;
- G. Treatment phases;
- H. HIV/AIDS information/education;
- I. Client rights (See Section 900);
- J. Consent for autopsy;
- K. The nature of addictive disorders and recovery including misunderstandings regarding methadone/LAAM treatment;
- L. For pregnant clients, risk to the unborn child.

2811. Psycho-social Assessment (II)

A comprehensive psycho-social assessment shall be completed by the client’s primary counselor once the client is stabilized but not later than 30 days following admission. The assessment shall include:

- A. A description of the historical course of the addiction to include drugs of abuse such as alcohol and tobacco, amount, frequency of use, duration, potency, and method of administration, previous detoxification from NTP medication and/or treatment attempts, and any psychological or social complication.
- B. A health history regarding chronic or acute medical conditions, such as HIV, STD’s, hepatitis (B, C, Delta), TB, diabetes, anemia, sickle cell trait, pregnancy, chronic pulmonary diseases, and renal diseases.
- C. Complete information related to the family of the client.

2812. Individualized Treatment Plan (II)

- A. An ITP shall be developed within 30 days of admission with participation by the client and the primary counselor, as evidenced by their signatures. The ITP content shall be in accordance with Section 701.D.
- B. Client progress in treatment and accomplishment of ITP goals shall be reviewed by the primary counselor not less than every 90 days during the first year of treatment and every six months thereafter. The counselor shall sign and date these reviews.

2813. Emergency Medical Procedures (I)

Emergency medical procedures shall include, but not be limited to:

- A. Client overdose or severe drug reaction;
- B. Names and telephone numbers of individuals (e.g. physician, hospitals, EMT’s) to be contacted in case of an emergency. These names and numbers shall be readily available within the facility;
- C. Emergency dosing of NTP medications.

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2814. Adverse Events

A. The NTP shall establish written procedures which address resolutions to adverse events such as:

1. Physical and verbal threats;
2. Violence;
3. Inappropriate behavior;
4. Medication errors;
5. Deaths;
6. Selling drugs on the premises;
7. Harassment and abuse.

B. Procedures to implement should adverse events occur shall include:

1. Documentation of the event and reporting as required to the Department (see Section 601);
2. Prompt review and investigation;
3. Timely and appropriate corrective action;
4. Monitoring to determine corrective action plan effectiveness.

2815. Readmission

If a client is readmitted to the same NTP, a physical examination will be required by the current NTP physician within 72 hours of admission.

2816. Staffing (II)

A. The NTP physician shall have authority over all medical aspects of care and make treatment decisions in consultation with treatment staff consistent with the needs of the client, clinical protocols, and research findings. At least one physician shall be available during dosing and facility operating hours either in person or by telephone for consultation and for emergencies.

B. A pharmacist or other person licensed to dispense NTP medications pursuant to the SC Code of Laws is responsible for dispensing the amounts of NTP medications administered, and shall record and countersign all changes in dosing schedules.

C. The nursing staff shall include one licensed nurse. The total number of nurses on the staff shall be commensurate with NTP operating hours and the number of clients to be served in order to ensure that adequate nursing care will be provided at all times the facility is in operation. A licensed nurse shall be present at all times clients are in the facility.

D. There shall be an adequate number of qualified counselors on staff to ensure that necessary, appropriate and quality counseling and other rehabilitative services are provided in a timely manner. The NTP shall have a least one full-time counselor on staff for every 50 clients or fraction thereof. Counselors shall be qualified as specified in Section 504.

E. All direct care staff shall have training and experience in addictions and NTP medication treatment.

2817. NTP Medication Management (I)

A. A physician, licensed nurse, or registered pharmacist may administer NTP medication.

B. The NTP physician shall determine the initial and subsequent dosage and schedule, and prescribe such dose and schedule to include changes by verbal or written order to the pharmacist and licensed nurse. However, the verbal order shall be documented, signed, and dated by the NTP physician within 72 hours.

C. The procedure for administering NTP medication shall be as follows:

1. NTP medication, including guest and take-home doses, shall be administered to clients in oral liquid form and in single doses. Take-home bottles shall be labeled in accordance with federal and state law and regulations and shall contain necessary cautionary statements; caps shall be childproof.

2. No dose shall be administered until the client identity has been verified and the dosage compared with the currently ordered and documented dosage level.

3. The initial dose of methadone shall not exceed 30 mg. and the initial total daily dose for the first day shall not exceed 40 mg. unless the NTP physician justifies in the client record that 40 mg. did not suppress the abstinence symptoms after three hours of observation following the initial dose.

4. Ingestion shall be observed and verified by the person authorized to administer the medication.

5. A client's scheduled dose may be temporarily delayed if necessary, e.g., to obtain a urine sample or for counselor consultation. The dose shall not be withheld, however, for failure to comply with the NTP rules or procedures unless the decision is made to terminate the client's participation in the NTP. A dose may be withheld only when the NTP physician determines that such action is medically indicated.

6. There shall be written justification in the client record signed and dated by the NTP physician for doses in excess of 100 mg. of methadone per day after the first day.

D. A client transferring from another NTP facility shall have a physical examination and have his/her dose determined by a physician prior to receiving the first dosage.

E. When the NTP physician prescribes controlled substances other than NTP medications, such prescriptions shall not be administered to any client unless the NTP physician first examines the client and assesses his/her potential for abuse of such medications.

2818. Take-home Medication (II)

A. Take-home NTP medication may be given to clients who demonstrate a need for a more flexible schedule in order to enhance and continue the rehabilitative process. However, since NTP medication is a narcotic subject to abuse if not managed properly, precautions shall be taken to prevent its potential abuse. The NTP physician shall ensure that take-home medication is given to those clients who meet the following criteria for eligibility:

1. Adherence to NTP rules, regulations, and policies;
2. Length of time in the NTP and level of maintenance treatment;
3. Presence of NTP medication in urine samples;

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4. Potential complications from concurrent health problems;
5. Lengthy travel distance to the facility;
6. Progress in maintaining a stable lifestyle as evidenced by:

- a. Absence of abuse of narcotic and non-narcotic drugs;
- b. Absence of alcohol abuse, or determination that the client is no longer abusing alcohol and is in treatment for the alcohol abuse problem;
- c. Regularity of attendance at the NTP, to include required counseling sessions;
- d. Absence of serious behavior problems, including loitering at the NTP;
- e. Absence of known recent criminal activity;
- f. Employment, school attendance, or other appropriate activity;
- g. Assurance that take-home medication can be securely transported and stored by the client for his/her use only.

B. The decision to provide take-home medication to NTP clients and the amount provided shall be based upon and determined by the reasonable clinical judgement of the NTP physician and appropriately documented and recorded in the client's file prior to the initiation of the take-home dose. The NTP physician shall document compliance by the client with each and every one of the aforementioned requirements prior to providing the first take-home dose. (I)

C. The client's take-home status shall be reviewed and documented at least on a quarterly basis by the primary counselor.

D. If a client, due to special circumstances, such as illness, personal or family crisis, travel, or other hardship, is unable to conform to the applicable treatment schedule, s/he may be permitted to receive up to a two-week supply of NTP medication, based on the clinical judgment of the NTP physician. The justification for permitting the adjusted schedule shall be recorded in the client's record by the NTP physician.

E. One-time or temporary (usually not to exceed three days) take-home medication shall be approved by the facility for family or medical emergencies or other exceptional circumstances.

F. A client transferring from another NTP or readmitted after having left the NTP voluntarily and who has complied with facility rules and program policies/procedures may be granted an initial take-home schedule that is no greater than that allowed at the time of transfer or voluntary discharge provided all criteria other than length of treatment are met.

G. A client discharged from another NTP shall only be initially granted take-home privileges from the new admitting NTP provided the requirements of Section 2818.A are met.

H. Take-home medication shall be labeled with the name of the NTP, address, telephone number, and packaged in conformance with state and federal regulations.

I. A diversion control plan shall be established to assure quality care while preventing the diversion of NTP medication from treatment to illicit use. The plan shall include:

1. Clinical and administrative continuous monitoring;
2. Problem identification, correction and prevention;
3. Accountability to the client and community;
4. NTP medication usage and amount accountability.

2819. Guest-Dosing (II)

A. When a client is separated from his/her NTP for an extended period, and the client is in the vicinity of a SC-licensed NTP, guest-dosing may occur provided there is: (I)

1. Authorization in writing from the sending NTP physician;
2. Information from the sending NTP to include at least the following: client name, identifying information, means of identity verification, dates of guest-dosing, amount of each day's dose, number of take-home doses (if any), urinalysis history, and any other information requested by the authorizing treatment NTP.

B. Records of guest-dosing shall be maintained at the NTP providing the guest-dosing.

C. Guest-dose status for a client shall not exceed 28 days unless there are special circumstances, and an extension of time is agreed upon by the two NTP's involved.

2820. Security of Medications (I)

A. The areas where NTP medication stocks are maintained or administered shall be secured. Access to controlled substances, which include NTP medication, shall be limited to persons licensed or registered to order, administer, or dispense those medications.

B. Immediately after administering, the remaining contents of the containers shall be purged (rinsed) to prevent the accumulation of residual NTP medication. The NTP shall ensure that take-home medication bottles are returned to the NTP. All used containers as well as take-home bottles given to clients shall be made inaccessible to unauthorized individuals. Used containers shall be disposed of by the NTP.

2821. Outcome Effectiveness

NTP outcome effectiveness measures shall include:

- A. Improved client functioning, such as reducing or eliminating:
 1. Abuse of licit and illicit drugs;
 2. Criminal behavior;
 3. Behaviors related to the spread of infectious diseases.
- B. Improved quality of life.

2822. Detoxification from NTP Medication (II)

Detoxification from NTP medication shall be initiated only when strongly desired by the client, and shall include:

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- A. A schedule of dosage reduction from NTP medication that the client can tolerate;
- B. Close documented monitoring of client clinical condition which may affect the detoxification process, i.e., symptoms of medial and emotional distress;
- C. A review of the results of a recent pregnancy test;
- D. A review of changes in counseling sessions and other support services during detoxification from NTP medication;
- E. Providing continuing care after detoxification of NTP medication is completed.

2823. Community Liaison

The NTP shall assure that clients do not cause unnecessary disruption to the community, e.g., loitering in the vicinity of the NTP, or disorderly conduct.

Fiscal Impact Statement:

The regulation will have no substantial fiscal or economic impact on the sale or its political subdivisions. Implementation of this regulation will not require additional resources beyond those allowed. There is no anticipated additional cost by the Department or State government due to any inherent requirements of this regulation.

Statement of Need and Reasonableness:

The Department's Bureau of Health Facilities Licensing formulated this statement determined by analysis pursuant to S.C. Code Ann Section 1-23-115 C(1)-(3) and (9)-(11) (2005).

DESCRIPTION OF REGULATION: R.61-93, *Standards for Licensing Facilities that Treat Individuals for Psychoactive Substance Abuse or Dependence*.

Purpose: The purpose of this amendment is to revise the language regarding urine testing and to remove unduly financial burden on entities involved in licensee change. In addition, stylistic changes were included for corrections for clarity and readability, grammar, references, codification and overall improvement of the text of the regulation.

Legal Authority: 1976 Code Section 44-7-260.

Plan for Implementation: Upon approval from the S.C. General Assembly and publication of this amendment as a final regulation in the South Carolina State Register, a copy of Regulation 61-93, that incorporates these revisions, will be made available electronically on the Department's regulation development website at <http://www.scdhec.gov/Agency/RegulationsAndUpdates/LawsAndRegulations/> under the Health Regulations category and subsequently on the South Carolina Legislature Online website in the S.C. Code of Regulations. Printed copies will be available for a fee from the Department's Freedom of Information Office. Staff will educate the regulated community on the provisions of the Act and the requirements of the regulation.

DETERMINATION OF NEED AND REASONABLENESS OF THE REGULATION BASED ON ALL FACTORS HEREIN AND EXPECTED BENEFITS:

The Department last amended R.61-93 May 25, 2001. SC Code Section 1-23-120(J) (Supp. 2012) requires state agencies to perform a review of its regulations every five years and update them if necessary.

Statutory mandates, issues found in the review, and necessity for overall updates render this amendment needed and reasonable. This amendment improves the procedures regarding urine testing for clients in the narcotic treatment program. This amendment also improves the construction requirements regarding the licensee. The amendment increases the quality regarding stylistic changes for clarity and readability.

DETERMINATION OF COSTS AND BENEFITS:

Internal Costs: Implementation of this amendment will not require additional resources. There is no anticipated additional cost by the Department or State government due to any inherent requirements of this amendment.

External Costs: There are no external costs anticipated.

External Benefits: The amendments update standards of licensure, procedures, and requirements for facilities that treat individuals for psychoactive substance abuse or dependence while maintaining the interests of patient health and safety and lessening provider burdens. The amendments will reasonably simplify the narcotic treatment program while providing standards in the interest of patient care and safety for the treatment of individuals for psychoactive substance abuse or dependence.

UNCERTAINTIES OF ESTIMATES:

None.

EFFECT ON THE ENVIRONMENT AND PUBLIC HEALTH:

There will be no effect on the environment.

The amendments will reasonably simplify the narcotic treatment programs while providing standards in the interest of patient care and safety for the treatment of individuals for psychoactive substance abuse or dependence.

DETRIMENTAL EFFECT ON THE ENVIRONMENT AND PUBLIC HEALTH IF THE REGULATION IS NOT IMPLEMENTED:

There would not be a detrimental effect on the environment.

If the revision is not implemented, unnecessary burdens will be placed on facilities that treat individuals for psychoactive substance abuse or dependence.

Statement of Rationale:

The Department revised this regulation pursuant to the S.C. Code Ann. Section 1-23-120(J) (Supp. 2012) requirement that state agencies perform a review of its regulations every five years and update them if necessary. The amendments improve the requirements regarding clients granted take-home dosages and random drug testing. The amendments update the references to building codes, constructions requirements, and fire and life safety codes.

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Document No. 4485

DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL CHAPTER 61

Statutory Authority: 1976 Code Sections 44-1-50 and 48-1-110

61-67. Standards for Wastewater Facility Construction

Synopsis:

Regulation 61-67, *Standards for Wastewater Facility Construction*, establishes standards, for general and technical design requirements, for use by the Department in reviewing Engineering Reports, establishing Reliability Classifications and issuing State construction permits or other approval action as outlined in the regulation. This regulation applies to engineering design and construction of all wastewater treatment facilities and all wastewater collection and transmission facilities that require a construction permit or approval from the Department.

These amendments will reduce unit loading flows in Appendix A by 25 percent based on the knowledge of water savings fixtures and improved designs of sewer collection systems. For ease of implementation, the loading was rounded to the nearest whole number. The revisions also include having a service connection definition similar to the definition for a drinking water service connection, reducing the number of plans and other documents that need to be submitted. Furthermore, revisions include streamlining industrial pump and haul operations and allowing issuance of a treatment plant permit coincident with a discharge permit.

Minor changes were made at R.61-67.100 to remove unnecessary language for clarity and a stylistic change was made in the Table at Appendix A and Section 67.100.E.4.b. (5) and (6). Language related to permit appeals was removed so as to streamline with current law.

A Notice of Drafting for these amendments was published in the *State Register* on April 25, 2014.

Section-by-Section Discussion:

R.61-67.100.B

This paragraph was revised to remove unnecessary language “after the effective date of this regulation” for clarity.

R.61-67.100.D

The definition of a service connection was amended to be consistent with the definition of a service connection for drinking water systems.

R.61-67.100.E.4.a and b

The number of copies of plans, specifications, etc., that are required to be submitted was reduced.

R.61-67.100.E.6

The text of this section on contested permit decisions was deleted and the section is being Reserved.

R.61-67.300.A.7

This section was amended to allow the issuance of a treatment plant permit coincident with a discharge permit.

R.61-67.300.A.8.a

This section was amended to clarify when construction may commence on the construction of a treatment plant permitted coincident with the discharge permit.

R.61-67.300.G.2

This section was amended to streamline industrial pump and haul operations.

R.61-67.300.H.1 and 2

This section was amended to remove the language related to the reduction of unit loadings since this is being changed in Appendix A.

R.61-67.Appendix A

This table was amended to reduce the unit loading flows by 25 percent. For ease of implementation, the loading was rounded to the nearest whole number. A stylistic change is included.

Instructions: Amend R.61-67 pursuant to each individual instruction provided with the text of the amendments below.

Text:

61-67. Standards for Wastewater Facility Construction.

Revise R.61-67.100.B to read:

B. Applicability. This regulation applies to engineering design and construction of all wastewater treatment facilities and all wastewater collection and transmission facilities which require a construction permit or approval from the Department. The Department may approve temporary research and development and other wastewater treatment projects without requiring an engineering report or construction permit when such activity is considered by the Department to be minor in nature.

Revise R.61-67.100.D definition of Service Connection to read:

“Service Connection” means an individual gravity sewer line, or an individual pump station and force main, with domestic or industrial wastewater connecting to a gravity sewer system. Oil/Water Separators, pH Adjustment Systems, and other similar simple industrial wastewater treatment systems (as determined by the Department) will be considered a component of the service connection when a local pretreatment permit is not required. Piping associated with a service connection shall not require a construction permit if the following conditions are met:

a. Individual connections, at the time of connection, have design flow contribution no greater than five (5) percent of the existing wastewater treatment facility’s design capacity or have no generated flows greater than fifty thousand (50,000) gallons per day;

b. Individual connections are to a gravity sewer main;

c. Individual connections only serving a single house, single mobile home, single building, or multiple-building complex under single ownership with no rental units (e.g., schools or industry);

d. Individual connections are not serving a shopping mall, multiple-building complex where there will be several owners or renters (e.g., apartment complex, condominium complex, mobile home park, campground, industrial park, or business park), or marina; and

e. Individual connections that do not have the reasonable ability to serve any additional projects and/or buildings in the future that are not part of a multiple-building complex under single ownership with no rental units (e.g., schools or industry).

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Revise R.61-67.100.E.4 including a. and b. to read:

4. Construction Permit Submittal. The construction permit application shall include the following documentation, where applicable, in order to be considered a complete submittal. Incomplete submittal packages may be returned without processing. The application package may be returned if the determination is made that it conflicts with the applicable 208 Water Quality Management Plan.

a. Standard Submittal. Includes all projects that fall outside the scope of the Delegated Review Program. A separate application shall be made for each wastewater treatment plant addressed.

- (1) A transmittal letter outlining the submittal package;
- (2) A completed application form for a permit to construct, completed in entirety, including one (1) original and one (1) copy;
- (3) Appropriate application fee based on Regulation 61-30, Environmental Protection Fees;
- (4) Three (3) copies of detailed plans signed and sealed by a professional engineer as stated in subsection 67.100.E.2. General layout on plan sheets no larger than thirty (30) inches by forty-two (42) inches. Profiles of sewer lines required for all gravity sewers, all vacuum sewers and force mains of four (4) inches or greater;
- (5) One (1) set of material and construction specifications signed and sealed by a professional engineer as stated in subsection 67.100.E.2. Specifications may be omitted when Department approved standard specifications are to be utilized;
- (6) One (1) set of the appropriate design data and calculations, including flow and pump station calculations and pump curve, when appropriate;
- (7) Three (3) copies of a detailed 8.5 inch by 11 inch location map, separate from the plans;
- (8) Two (2) copies of construction easements unless the project owner has the right of eminent domain;
- (9) If the owner of the project is different from the entity that will be accepting the wastewater for treatment, a letter of acceptance (dated within twelve (12) months of application) from that entity stating their willingness and ability to provide the wastewater treatment that, when applicable, includes the specific number of lots and flow being accepted; and
- (10) If the owner of the project is different from the entity that will be responsible for operating and maintaining the project, a letter (dated within twelve (12) months of application) from that entity acknowledging such responsibility.

b. Delegated Review Program (DRP) Submittal. Includes only those applicable projects submitted to the Department for permitting by a Department approved DRP entity.

- (1) A transmittal letter outlining the submittal package. This transmittal shall clearly identify the project as a delegated program submittal;
- (2) A completed application form for a permit to construct, completed in entirety, including one (1) original and one (1) copy;
- (3) Appropriate application fee based on Regulation 61-30, Environmental Protection Fees;

(4) Two (2) copies of detailed plans signed and sealed by a professional engineer as stated in subsection 67.100.E.2. General layout on plan sheets no larger than thirty (30) inches by forty-two (42) inches. Profiles of sewer lines required for all gravity sewers, all vacuum sewers and force mains of four (4) inches or greater;

(5) One (1) copy of the appropriate design data and calculations, including flow and pump station calculations and pump curve, when appropriate;

(6) One (1) copy of a detailed 8.5 inch by 11 inch location map, separate from the plans;

(7) Two (2) copies of construction easements unless the project owner has the right of eminent domain;

(8) If the owner of the project is different from the entity that will be accepting the wastewater for treatment, a letter of acceptance (dated within twelve (12) months of application) from that entity stating their willingness and ability to provide the wastewater treatment that, when applicable, includes the specific number of lots and flow being accepted;

(9) If the owner of the project is different from the entity that will be responsible for operating and maintaining the project, a letter (dated within twelve (12) months of application) from that entity acknowledging such responsibility;

(10) The 208 Plan certification from the appropriate Council of Governments (COG) for designated 208 areas, or from the Department on the non-designated 208 areas;

(11) Coastal Zone Management Consistency (for projects in Horry, Georgetown, Berkeley, Charleston, Dorchester, Colleton, Beaufort, and Jasper county);

(12) The Department's permit for placement in navigable waters, where applicable; and

(13) The delegated entity shall indicate that a copy of the final approved plans are being returned to the appropriate design engineer.

Delete the text of R.61-67.100.E.6 and Reserve section to read:

6. [Reserved]

Revise R.61-67.300.A.7 to read:

7. No construction permit shall be issued for a wastewater treatment facility, including effluent disposal lines, unless the applicable effluent disposal permit has been issued. Construction may commence only if: a) the applicable effluent disposal permit has not been appealed, or b) the applicable effluent disposal permit becomes effective in a manner which would not require a change to the construction permit.

Revise R.61-67.300.A.8.a to read:

8. Proposed sewer systems shall connect to existing systems with available capacity or to another proposed sewer system, with available capacity (including considerations of infiltration and inflow), which has already received a construction permit from the Department. Where a construction permit has been issued on the downstream components though not yet operational, a construction permit on the proposed sewer system may be issued, but the approval to place in operation shall not be issued until all downstream components have received an approval to place in operation.

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a. Downstream Sewer Systems. Construction permits shall not be issued in cases where adequate capacity in the downstream components of the wastewater facilities is not available to handle the design flow of the proposed project. Adequate capacity for sewer lines and pump stations means that the existing sewer facilities, including the wastewater treatment facility receiving the wastewater, have the capacity as currently permitted. If a downstream treatment system were issued a permit to construct, but construction could not commence consistent with subsection 67.300.A.7, then the wastewater treatment facility permit would not be considered “currently permitted.” An evaluation of available capacity may be made based on factors such as flow projections from previously permitted projects (including considerations of infiltration and inflow).

Revise R.61-67.300.G.2 introductory paragraph only; subitems 300.G.2.a. through e. remain the same:

2. Industrial Wastewater Pump and Haul Operations. This applies to the storage of non-hazardous industrial and/or domestic wastewater generated by an industrial facility which is then hauled to a receiving facility at a rate of greater than one hundred (100) gallons per day or seven hundred (700) gallons per week or three thousand (3,000) gallons per month. One-time/intermittent operations or those on-site operations are exempt from these requirements. On a case-by-case basis, the Department may also consider other exemptions on the requirement to obtain pump and haul approval for certain process wastewaters. Intermittent is defined for this part as less than one shipment of wastewater per month. Notwithstanding the need for Department approval, the facility shall retain hauling operations records for a period of two (2) years.

Revise R.61-67.300.H.1 and 2 to read:

H. Unit Contributory Loadings to All Domestic Wastewater Treatment Facilities. Refer to 61-67 Appendix A for the minimum design loadings that shall be utilized for all domestic wastewater treatment facilities and those industrial wastewater treatment facilities treating strictly domestic wastewater. These loadings shall be used in determining the average daily flow (ADF) for proposed sewer systems.

1. The loadings in 61-67 Appendix A may either be increased or decreased as determined by this Department.

2. A reduction in the loadings in 61-67 Appendix A may be granted in the following circumstances:

a. Consideration to other unit contributory loadings may be granted when properly substantiated by the consulting engineer in its engineering report and/or permit application.

b. For existing systems, a reduction may be granted to the wastewater treatment facility when supported with proper documentation. The proper documentation shall be continuously monitored flow at the wastewater treatment facility for several years, including dry and wet years as determined by rainfall data, unless flows are not representative, as determined by the Department. If approved, the reduction in the unit contributory loading shall be approved for all future projects discharging to the wastewater treatment facility (and would be used to revise the current level of remaining capacity). The decision to reduce the loadings shall be made by this Department on an individual treatment facility basis.

Revise R.61-67 Appendix A to read:

61-67, Appendix A. Unit Contributory Loadings to All Domestic Wastewater Treatment Facilities

Unit Contributory Loadings to All Domestic Wastewater Treatment Facilities	
Type of Establishment	Hydraulic Loading (GPD)
A. Airport: 1. Per Employee	8

2. Per Passenger	4
B. Apartments, Condominiums, Patio Homes: 1. Three (3) Bedrooms (Per Unit) 2. Two (2) Bedrooms (Per Unit) 3. One (1) Bedroom (Per Unit)	300 225 150
C. Assembly Halls: (Per Seat)	4
D. Barber Shop: 1. Per Employee 2. Per Chair	8 75
E. Bars, Taverns: 1. Per Employee 2. Per Seat, Excluding Restaurant	8 30
F. Beauty Shop: 1. Per Employee 2. Per Chair	8 94
G. Boarding House, Dormitory: (Per Resident)	38
H. Bowling Alley: 1. Per Employee 2. Per Lane, No Restaurant, Bar or Lounge	8 94
I. Camps: 1. Resort, Luxury (Per Person) 2. Summer (Per Person) 3. Day, with Central Bathhouse (Per Person) 4. Travel Trailer (Per Site)	75 38 26 131
J. Car Wash: (Per Car Washed)	56
K. Churches: (Per Seat)	2
L. Clinics, Doctor's Office: 1. Per Employee 2. Per Patient	11 4
M. Country Club, Fitness Center, Spa: (Per Member)	38
N. Dentist Office: 1. Per Employee 2. Per Chair 3. Per Suction Unit; Standard Unit 4. Per Suction Unit; Recycling Unit 5. Per Suction Unit; Air Generated Unit	11 6 278 71 0
O. Factories, Industries: 1. Per Employee	19

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2. Per Employee, with Showers	26
3. Per Employee, with Kitchen	30
4. Per Employee, with Showers and Kitchen	34
P. Fairgrounds: (Average Attendance, Per Person)	4
Q. Grocery Stores: (Per Person, No Restaurant or Food Preparation)	19
R. Hospitals:	
1. Per Resident Staff	75
2. Per Bed	150
S. Hotels: (Per Bedroom, No Restaurant)	75
T. Institutions: (Per Resident)	75
U. Laundries: (Self Service, Per Machine)	300
V. Marinas: (Per Slip)	23
W. Mobile Homes: (Per Unit)	225
X. Motels: (Per Unit, No Restaurant)	75
Y. Nursing Homes:	
1. Per Bed	75
2. Per Bed, with Laundry	113
Z. Offices, Small Stores, Business, Administration Buildings: (Per Person, No Restaurant)	19
AA. Picnic Parks: (Average Attendance, Per Person)	8
BB. Prison/Jail:	
1. Per Employee	11
2. Per Inmate	94
CC. Residences: (Per House, Unit)	300
DD. Rest Areas, Welcome Centers:	
1. Per Person	4
2. Per Person, with Showers	8
EE. Rest Homes:	
1. Per Bed	75
2. Per Bed, with Laundry	113

FF. Restaurants: 1. Fast Food Type, Not Twenty Four (24) Hours (Per Seat) 2. Twenty Four (24) Hour Restaurant (Per Seat) 3. Drive-In (Per Car Service Space) 4. Vending Machine, Walk-up Deli or Food Preparation (Per Person)	30 53 30 30
GG. Schools, Day Care: 1. Per Person 2. Per Person, with Cafeteria 3. Per Person, with Cafeteria, Gym and Showers	8 11 15
HH. Service Stations: 1. Per Employee 2. Per Car Served 3. Car Wash (Per Car Washed)	8 8 56
II. Shopping Centers, Large Department Stores, Malls: (Per Person, No Restaurant)	19
JJ. Stadiums, Coliseums: (Per Seat, No Restaurant)	4
KK. Swimming Pools: (Per Person, with Sewer Facilities and Showers)	8
LL. Theaters: Indoor (Per Seat), Drive In (Per Stall)	4

Fiscal Impact Statement:

It is anticipated that these amendments will not create any additional cost to the State. Any cost should be offset by the existing fees received with construction applications received for new wastewater facilities permitted by the Department. Regulation 61-30, *Environmental Protection Fees*, promulgated pursuant to S.C. Code Section 48-2-10 et seq., authorizes the Department to collect fees for certain wastewater construction permits. Therefore, no additional state funding is being requested; existing staff and resources will be utilized to enforce these amendments to the regulations.

Statement of Need and Reasonableness:

The following is based on an analysis of the factors listed in 1976 Code Section 1-23-115(C)(1)-(3) and (9) through (11):

DESCRIPTION OF REGULATION: Amendment of R.61-67, *Standards for Wastewater Facility Construction*.

Purpose: The purpose of this amendment is to reduce unit loading flows in Appendix A by 25 percent based on the knowledge of water savings fixtures and improved designs of sewer collection systems. For ease of implementation, the loading was rounded to the nearest whole number. The revisions also include having a service connection definition similar to the definition for a drinking water service connection, reducing the number of plans and other documents that need to be submitted, revisions to streamline industrial pump and haul operations and allowing issuance of a treatment plant permit coincident with a discharge permit. This revision includes a minor language change for clarification and a stylistic change to the table in Appendix A and Section 67.100.E.4.b. (5) and (6). Language related to permit appeals was removed so as to streamline with current law.

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Legal Authority: This regulation is authorized by 1976 Code Sections 48-1-50 and 48-1-110.

Plan for Implementation: The amendments will make changes to and be incorporated into R.61-67 upon approval of the General Assembly and publication in the *State Register*. The amendments will be implemented in the same manner in which the existing regulations are implemented. An electronic copy of R.61-67, to include these amendments, will be published on the Department's Laws and Regulations website under the Water category at <http://www.scdhec.gov/Agency/RegulationsAndUpdates/LawsAndRegulations/Water> and subsequently on the S.C. Legislature Online website in the S.C. Code of Regulations. Printed copies of the regulation can be purchased at cost through the Department's Freedom of Information Office.

DETERMINATION OF NEED AND REASONABLENESS OF THE REGULATION BASED ON ALL FACTORS HEREIN AND EXPECTED BENEFITS:

1. DHEC has identified areas that need to be revised to bring clarity to the regulation. Revising the applicability portion of the regulation will remove un-necessary language "after the effective date of this regulation."

2. Reducing unit loading flows in Appendix A by 25 percent is based on knowledge of water savings fixtures and improved designs of sewer collection systems. For ease of implementation, the loading was rounded to the nearest whole number. Regarding unit loadings specified in Appendix A, after reviewing data from sewerage systems, current loadings are typically overly conservative resulting in the potential for facilities to be wasting reserve capacity. This can create an economic burden on a local community. Reducing loadings by 25 percent (e.g., lowering the design loading from residential homes from a default number of 400 gallons/day to 300 gallons/day) better approximates the loadings in a sewer system.

3. The current definition of a service connection requires a construction permit for a sewer line when a similar drinking water line does not require a permit. Based on the fact that there have not been concerns historically with the drinking water definition resulting in the conclusion that having the sewer line definition better match the water line definition would help bring consistency to the permitting program. Having a service connection definition similar to the definition for a drinking water service connection will reduce the burden to obtain a sewer construction permit in some cases.

4. With the greater availability of electronic communication, DHEC staff will need fewer copies of certain components of the application package. The proposal reduces the number of plans and other documents DHEC needs to review a construction permit application.

5. Increasing the threshold for an industrial pump and haul approval will reduce the burden on industries when needing to haul small quantities of wastewater to another system. In lieu of an approval, keeping records of waste hauled is a reasonable management method in case DHEC needs this information at a later date.

6. Regarding the issuance of a treatment plant permit that depends on the issuance of a discharge permit (e.g., NPDES permit), the current regulation requires resolution of an appealed discharge permit before issuance of a construction permit for the corresponding treatment plant. This creates a burden because a third party appeal of the construction permit could be addressed along with the discharge permit if the permits could be issued together. Otherwise, a utility or industry would have long delays in resolving all matters about the construction of a new treatment facility. Therefore, this regulation is being revised to allow issuance of both the discharge and construction permit together that will reduce unnecessary burdens on permittees.

The amendments are reasonable because they will clarify the existing regulation, update it based on current technologies and issues, and incorporate into regulation sound engineering practices utilized by the Department for the design of new wastewater collection, transmission, and treatment facilities. This amendment defines a set of common design standards to be utilized for new wastewater facilities approved or permitted by the Department.

The benefit is that these amendments will continue to define a set of common design standards to be utilized for new wastewater facilities approved or permitted by the Department while allowing flexibility for designs in unique circumstances. Properly designed and maintained wastewater facilities will protect public health and safety and the environment of the State. There are no anticipated additional cost to the regulated community because design standards required under these amendments will be consistent with current engineering practices utilized by the Department for new wastewater collection, transmission, and treatment facilities.

DETERMINATION OF COSTS AND BENEFITS:

There are no anticipated additional costs to the State. Regulation 61-30, *Environmental Protection Fees*, promulgated pursuant to S.C. Code Section 48-2-10 et seq., authorizes the Department to collect fees for certain wastewater construction permits. Therefore, no additional state funding is being requested; existing staff and resources will be utilized to enforce these amendments to the regulations. It is anticipated that these amendments will not create any additional cost to the regulated community because the design standards required under these amendments will be consistent with current guidelines utilized by the Department for new wastewater collection, transmission, and treatment facilities.

UNCERTAINTIES OF ESTIMATES:

None.

EFFECT ON ENVIRONMENT AND PUBLIC HEALTH:

There is no anticipated detrimental effect to protection of the environment or health and safety of the public due to implementation of this amendment. The effect should be beneficial because the amendment will ensure properly designed and maintained wastewater facilities which will protect public health and safety and the environment of the State.

DETRIMENTAL EFFECT ON THE ENVIRONMENT AND PUBLIC HEALTH IF THE REGULATION IS NOT IMPLEMENTED:

There is no anticipated detrimental effect to the environment and public health if the amendments to the regulation are not implemented. However, the amendments seek to bring clarity to the regulation; reduce economic burdens on local communities by better approximating the loadings in a sewer system; reduce the burden to obtain a sewer construction permit in certain cases; reduce the amount of paperwork DHEC needs to have in order to review a construction permit application; reduce the burden on industries when needing to haul small quantities of wastewater to another system; and allow simultaneous issuance of a treatment plant permit and a discharge permit, reducing un-necessary burdens on permittees.

Statement of Rationale:

Pursuant to the Governor's Executive Order 2013-02, DHEC evaluated Regulation 61-67 for requirements that may be a burden on the regulated community without a corresponding environmental or public health benefit. There is no anticipated burden devoid of benefit. The amendments seek to bring clarity to the regulation; reduce economic burdens on local communities by better approximating the loadings in a sewer system; reduce the burden to obtain a sewer construction permit in certain cases; reduce the amount of paperwork DHEC needs to have in order to review a construction permit application; reduce the burden on industries when needing to haul small quantities of wastewater to another system; and allow simultaneous issuance of a treatment plant permit and a discharge permit, reducing un-necessary burdens on permittees.

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Document No. 4480
DEPARTMENT OF INSURANCE
CHAPTER 69

Statutory Authority: 1976 Code Sections 1-23-110 et seq., 38-3-110 and 38-9-180

69-14. Insurance Holding Company Systems

Synopsis:

The South Carolina Department of Insurance proposes to amend Regulation 69-14, Insurance Holding Company Systems. The amendments to Regulation 69-14 primarily relate to minimum standards for agreements for cost sharing services and management services, Form E (Pre-Acquisition Notification) and Form F (Enterprise Risk Report) filings. The amendments will be based upon revisions to the National Association of Insurance Commissioners (NAIC) Insurance Holding Company System model regulation (#450) that incorporated provisions related to financial reporting.

Notice of drafting for the proposed regulation was published in the *State Register* on August 22, 2014.

Instructions:

Amend Regulation 69-14, Insurance Holding Company Systems, as drafted below.

Text:

69-14. Insurance Holding Company Systems.

(Statutory Authority: 1976 Code Sections 38-3-110(2), 38-21-300, and 1-23-10 et seq.)

Section I. Forms--General Requirements.

A. Forms A, B, C, D, E and F are intended to be guides in the preparation of the statements required by S. C. Code Sections 38-21-60, 38-21-70, 38-21-125, 38-21-140, 38-21-150, 38-21-225 and 38-21-250. They are not intended to be blank forms which are to be filled in. These statements filed shall contain the number and captions of all items, but the text of the items may be omitted provided the answers thereto are prepared in such a manner as to indicate clearly the scope and coverage of the items. All instructions, whether appearing under the items of the form or elsewhere therein, are to be omitted. Unless expressly provided otherwise, if any item is inapplicable or the answer thereto is in the negative, an appropriate statement to that effect shall be made.

B. One electronic filing for each statement (Forms A, B, C, D, E and F) including exhibits and all other papers and documents filed as a part thereof, shall be filed with the director or his designee. At least one of the copies shall be signed in the manner prescribed on the form. Unsigned copies shall be conformed. If the signature of any person is affixed pursuant to a power of attorney or other similar authority, a copy of such power of attorney or other authority shall also be filed with the statement.

C. If an applicant requests a hearing on a consolidated basis under S.C. Code Section 38-21-90(C), in addition to filing the Form A with the director or his designee, the applicant shall file a copy of Form A with the National Association of Insurance Commissioners (NAIC) in electronic form.

D. Statements should be prepared electronically. Statements shall be easily readable and suitable for review and reproduction. Debits in credit categories and credits in debit categories shall be designated so as to be clearly distinguishable as such on photocopies. Statements shall be in the English language and monetary values shall be stated in United States currency. If any exhibit or other paper or document filed with the statement is in a foreign language, it shall be accompanied by a translation into the English language and any monetary value normally shown in foreign currency shall be converted into United States currency.

Section II. Forms--Incorporation by Reference, Summaries and Omissions.

A. Information required by any item of Form A, Form B, Form D, Form E or Form F may be incorporated by reference in answer or partial answer to any other item. Information contained in any financial statement, annual report, proxy statement, statement filed with a governmental authority, or any other document may be incorporated by reference in answer or partial answer to any item of Form A, Form B, Form D, Form E or Form F provided such document is filed as an exhibit to the statement. Excerpts of documents may be filed as exhibits if the documents are extensive. Documents currently on file with the director or his designee which were filed within three years need not be attached as exhibits to information contained in exhibits or in documents already on file shall clearly identify the material and shall specifically indicate that such material is to be incorporated by reference in answer to the item. Matter shall not be incorporated by reference in any case where such incorporation would render the statement incomplete, unclear or confusing.

B. Where an item requires a summary or outline of the provisions of any document, only a brief statement shall be made as to the pertinent provisions of the document. In addition to such statement, the summary or outline may incorporate by reference particular parts of any exhibit or document currently on file with the director or his designee which was filed within three years and may be qualified in its entirety by such reference. In any case where two or more documents required to be filed as exhibits are substantially identical in all material respects except as to the parties thereto, the dates of execution, or other details, a copy of only one of such documents need be filed with a schedule identifying the omitted documents and setting forth the material details in which such documents differ from the documents a copy of which is filed.

Section III. Forms--Information Unknown or Unavailable and Extension of Time to Furnish.

If it is impractical to furnish any required information, document or report at the time it is required to be filed, there shall be filed with the director or his designee a separate document:

- A. identifying the information, document or report in question;
- B. stating why the filing thereof at the time required is impractical; and

C. requesting an extension of time for filing the information, document or report to a specified date. The request for extension shall be deemed granted unless the director or his designee within sixty days after receipt thereof enters an order denying the request.

Section IV. Forms--Additional Information and Exhibits.

In addition to the information expressly required to be included in Form A, Form B, Form C, Form D, Form E and Form F there shall be added such further material information, if any, as may be necessary to make the information contained therein not misleading. The person filing may also file such exhibits as it may desire in addition to those expressly required by the statement. Such exhibits shall be so marked as to indicate clearly the subject matter to which they refer. Changes to Forms A, B, C, D, E or F shall include on the top of the cover page the phrase: "Change No. (insert number) to" and shall indicate the date of the change and not the date of the original filing.

Section V. Definitions.

A. "Executive officer" means chief executive officer, chief operating officer, chief financial officer, treasurer, secretary, controller, and any other individual performing functions corresponding to those performed by the foregoing officers under whatever title.

B. "Foreign insurer" shall include an alien insurer except where clearly noted otherwise.

C. "Ultimate controlling person" means that person which is not controlled by any other person.

D. Unless the context otherwise requires, other terms found in these regulations and in South Carolina Code Section 38-21-10 are used as defined in Section 38-21-10. Other nomenclature or terminology is defined according to Title 38 of the South Carolina Code, or industry usage if not defined by Title 38 of the South Carolina Code.

Section VI. Subsidiaries of Domestic Insurers.

The authority to invest in subsidiaries under South Carolina Code Section 38-21-30 is in addition to any authority to invest in subsidiaries which may be contained in any other provision of Title 38 of the Code.

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Section VII. Acquisition of Control--Statement Filing.

A person required to file a statement pursuant to South Carolina Code Sections 38-21-60 and 38-21-70 shall furnish the required information on Form A, hereby made a part of this regulation. Such person shall also furnish the required information on Form E, hereby made a part of this regulation and described in Section X of this regulation.

Section VIII. Amendments to Form A.

The applicant shall promptly advise the Director of any changes in the information so furnished on Form A arising subsequent to the date upon which such information was furnished but prior to the Director's disposition of the application.

Section IX. Acquisition of Section 38-21-60 Insurers.

A. If the person being acquired is deemed to be a "domestic insurer" solely because of the provisions of South Carolina Code Section 38-21-60, the name of the domestic insurer on the cover page should be indicated as follows: "ABC Insurance Company, a subsidiary of XYZ Holding Company".

B. Where a Section 38-21-60 insurer is being acquired, references to "the insurer" contained in Form A shall refer to both the domestic subsidiary insurer and the person being acquired.

Section X. Pre-Acquisition Notification

If a domestic insurer, including any person controlling a domestic insurer, is proposing a merger or acquisition pursuant to South Carolina Code Section 38-21-60, that person shall file a pre-acquisition notification form, Form E, which was developed pursuant to South Carolina Code Section 38-21-125(C)(2). Additionally, if a non-domiciliary insurer licensed to do business in this state is proposing a merger or acquisition pursuant to South Carolina Code Section 38-21-125, that person shall file a pre-acquisition notification form, Form E. No pre-acquisition notification form need be filed if the acquisition is beyond the scope of South Carolina Code Section 38-21-125 as set forth in South Carolina Code Section 38-21-125(B)(2). In addition to the information required by Form E, the Director may wish to require an expert opinion as to the competitive impact of the proposed acquisition.

Section XI. Annual Registration of Insurers--Statement Filing.

An insurer required to file an annual registration statement pursuant to South Carolina Code Sections 38-21-130 and 38-21-140 shall furnish the required information on Form B, hereby made a part of these regulations.

Section XII. Summary of Registration--Statement Filing.

An insurer required to file an annual registration statement pursuant to Sections 38-21-130 and 38-21-140 is also required, under Section 38-21-150, to furnish information specified on Form C, hereby made a part of these regulations.

Section XIII. Alternative and Consolidated Registrations.

A. Any authorized insurer may file a registration statement on behalf of any affiliated insurer or insurers which are required to register under Section 38-21-130. A registration statement may include information not required by law regarding any insurer in the insurance holding company system even if such insurer is not authorized to do business in this State. In lieu of filing a registration statement on Form B, the authorized insurer may file a copy of the registration statement or similar report which it is required to file in its state of domicile, provided:

1. the statement or report contains substantially similar information required to be furnished on Form B; and
2. the filing insurer is the principal insurance company in the insurance holding company system.

B. The question of whether the filing insurer is the principal insurance company in the insurance holding company system is a question of fact and an insurer filing a registration statement or report in lieu of Form B on behalf of an affiliated insurer, shall set forth a brief statement of facts which will substantiate the filing insurer's claim that it, in fact, is the principal insurer in the insurance holding company system.

C. Any authorized insurer may utilize the provisions of Sections 38-21-200 and 38-21-210 without obtaining prior approval of the director or his designee. The director or his designee, however, reserves the right to require individual filings if he deems such filings necessary in the interest of clarity, ease of administration or the public good.

Section XIV. Disclaimers of Affiliation and Termination of Registration.

A. A disclaimer of affiliation or a request for termination of registration claiming that a person does not, or will not upon the taking of some proposed action, control another person (hereinafter referred to as the "subject") shall contain the following information:

1. the number of authorized, issued and outstanding voting securities of the subject;
2. with respect to the person whose control is denied and all affiliates of such person, the number and percentage of shares of the subject's voting securities which are held of record or known to be beneficially owned, and the number of such shares concerning which there is a right to acquire, directly or indirectly;
3. all material relationships and bases for affiliation between the subject and the person whose control is denied and all affiliates of such person;
4. a statement explaining why such person should not be considered to control the subject.

B. A request for termination of registration shall be deemed to have been granted unless the Director, within thirty days after he receives the request, notifies the registrant otherwise.

Section XV. Transactions Subject to Prior Notice--Notice Filing.

An insurer required to give notice of a proposed transaction pursuant to South Carolina Code Section 38-21-250 shall furnish the required information on Form D, hereby made a part of these regulations.

A. Agreements for cost sharing services and management services shall at a minimum and as applicable:

1. Identify the person providing services and the nature of such services;
2. Set forth the methods to allocate costs;
3. Require timely settlement, not less frequently than on a quarterly basis, and compliance with the requirements in the Accounting Practices and Procedures Manual;
4. Prohibit advancement of funds by the insurer to the affiliate except to pay for services defined in the agreement;
5. State that the insurer will maintain oversight for functions provided to the insurer by the affiliate and that the insurer will monitor services annually for quality assurance;
6. Define books and records of the insurer to include all books and records developed or maintained under or related to the agreement;
7. Specify that all books and records of the insurer are and remain the property of the insurer and are subject to control of the insurer;
8. State that all funds and invested assets of the insurer are the exclusive property of the insurer, held for the benefit of the insurer and are subject to the control of the insurer;
9. Include standards for termination of the agreement with and without cause;
10. Include provisions for indemnification of the insurer in the event of gross negligence or willful misconduct on the part of the affiliate providing the services;
11. Specify that, if the insurer is placed in receivership or seized by the director or his designee under the Insurers Rehabilitation and Liquidation Act:
 - (a) all of the rights of the insurer under the agreement extend to the receiver or to the director or his designee; and,
 - (b) all books and records will immediately be made available to the receiver or the director or his designee and shall be turned over to the receiver or the director or his designee immediately upon the request of the receiver or of the director or his designee;
12. Specify that the affiliate has no automatic right to terminate the agreement if the insurer is placed in receivership pursuant to the Insurers Rehabilitation and Liquidation Act; and
13. Specify that the affiliate will continue to maintain any systems, programs, or other infrastructure notwithstanding a seizure by the Department under the Insurers Rehabilitation and Liquidation Act, and will

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make them available to the receiver or to the director or his designee, for so long as the affiliate continues to receive timely payment for services rendered.

Section XVI. Enterprise Risk Report

The ultimate controlling person of an insurer required to file an enterprise risk report pursuant to South Carolina Code Section 38-21-225 shall furnish the required information on Form F, hereby made a part of these regulations.

Section XVII. Extraordinary Dividends and Other Distributions.

A. Requests for approval of extraordinary dividends or any other extraordinary distribution to shareholders shall include the following:

1. The amount of the proposed dividend;
2. The date established for payment of the dividend;
3. A statement as to whether the dividend is to be in cash or other property and, if in property, a description thereof, its cost, and its fair market value together with an explanation of the basis for valuation;
4. A copy of the calculations determining that the proposed dividend is extraordinary. The work paper shall include the following information:

(a) The amounts, dates and form of payment of all dividends or distributions (including regular dividends but excluding distributions of the insurer's own securities) paid within the period of twelve consecutive months ending on the date fixed for payment of the proposed dividend for which approval is sought and commencing on the day after the same day of the same month in the last preceding year;

(b) Surplus as regards policyholders (total capital and surplus) as shown in the insurer's most recent annual statement;

(c) If the insurer is a life insurer, the net gain from operations as shown in the insurer's most recent annual statement;

(d) If the insurer is not a life insurer, the net income less net realized capital gains or losses as shown in the insurer's most recent annual statement; and

(e) The dividends paid to stockholders excluding distributions of the insurer's own securities.

5. A balance sheet and statement of income for the period intervening from the last annual statement filed with the Director and the end of the month preceding the month in which the request for dividend approval is submitted; and

6. A brief statement as to the effect of the proposed dividend upon the insurer's surplus and the reasonableness of surplus in relation to the insurer's outstanding liabilities and the adequacy of surplus relative to the insurer's financial needs.

B. Subject to South Carolina Code Section 38-21-270, each registered insurer shall report to the director or his designee all dividends and other distributions to shareholders within five business days following the declaration thereof, and at least ten days prior to the payment thereof, including the same information required by South Carolina Code Section 38-21-260 and Subsections (A)(4) (a)-(e) of this Section.

Section XVIII. Adequacy of Surplus.

The factors set forth in South Carolina Code Section 38-21-260 are not intended to be an exhaustive list. In determining the adequacy and reasonableness of an insurer's surplus no single factor is necessarily controlling. The director or his designee, instead, will consider the net effect of all of these factors plus other factors bearing on the financial condition of the insurer. In comparing the surplus maintained by other insurers, the director or his designee will consider the extent to which each of these factors varies from company to company and in determining the quality and liquidity of investments in subsidiaries, the director or his designee will consider the individual subsidiary and may discount or disallow its valuation to the extent that the individual investments so warrant.

Section XIX. Severability.

If any provision of this regulation or the application thereof to any person or circumstance is for any reason held to be invalid, the remainder of the regulation and the application of such provision to other persons or circumstances shall not be affected thereby.

Section XX. Effective Date.

The amendments to this regulation shall become effective January 1, 2016.

FORM A
STATEMENT REGARDING THE ACQUISITION OF CONTROL OF OR MERGER WITH A DOMESTIC INSURER

 Name of Domestic Insurer

By

 Name of Acquiring Person (Applicant)

Filed with the Insurance Department of

(State of domicile of insurer being acquired)

Dated: _____, 20 ____

Name, Title, Address, Telephone Number and E-mail Address of Individual to Whom Notices and Correspondence Concerning This Statement Should be Addressed:

ITEM 1. INSURER AND METHOD OF ACQUISITION.

State the name and address of the domestic insurer to which this application relates and a brief description of how control is to be acquired.

ITEM 2. IDENTITY AND BACKGROUND OF THE APPLICANT.

(a) State the name and address of the applicant seeking to acquire control over the insurer.

(b) If the applicant is not an individual, state the nature of its business operations for the past five years or for such lesser period as such person and any predecessors thereof shall have been in existence. Briefly describe the business intended to be done by the applicant and the applicant's subsidiaries.

(c) Furnish a chart or listing clearly presenting the identities of the inter-relationships among the applicant and all affiliates of the applicant. Indicate in such chart or listing the percentage of voting securities of each such person which is owned or controlled by the applicant or by any other such person. If control of any person is maintained other than by the ownership or control of voting securities, indicate the basis of such control. As to each person specified in such chart or listing indicate the type of organization (e.g. corporation, trust, partnership) and the state or other jurisdiction of domicile. If court proceedings involving a reorganization or liquidation are pending with respect to any such person, indicate which person, and set forth the title of the court, nature of proceedings and the date when commenced.

ITEM 3. IDENTITY AND BACKGROUND OF INDIVIDUALS ASSOCIATED WITH THE APPLICANT.

On the biographical affidavit, include a third party background check, and state the following with respect to (1) the applicant if (s)he is an individual or (2) all persons who are directors, executive officers or owners of 10% or more of the voting securities of the applicant if the applicant is not an individual.

(a) Name and business address;

(b) Present principal business activity, occupation or employment including position and office held and the name, principal business and address of any corporation or other organization in which such employment is carried on;

(c) Material occupations, positions, offices or employment during the last five years, giving the starting and ending dates of each and the name, principal business and address of any business corporation or other organization in which each such occupation, position, office or employment was carried on; if any such occupation, position, office or employment required licensing by or registration with any federal, state or municipal governmental agency, indicate such fact, the current status of such licensing or registration, and an explanation of any surrender, revocation, suspension or disciplinary proceedings in connection therewith;

(d) Whether or not such person has ever been convicted in a criminal proceeding (excluding minor traffic violations) during the last ten years and, if so, give the date, nature of conviction, name and location of court, and penalty imposed or other disposition of the case.

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ITEM 4. NATURE, SOURCE AND AMOUNT OF CONSIDERATION.

(a) Describe the nature, source and amount of funds or other considerations used or to be used in effecting the merger or other acquisition of control. If any part of the same is represented or is to be represented by funds or other consideration borrowed or otherwise obtained for the purpose of acquiring, holding or trading securities, furnish a description of the transaction, the names of the parties thereto, the relationship, if any, between the borrower and the lender, the amounts borrowed or to be borrowed, and copies of all agreements, promissory notes and security arrangements relating thereto.

(b) Explain the criteria used in determining the nature and amount of such consideration.

(c) If the source of the consideration is a loan made in the lender's ordinary course of business and if the applicant wishes the identity of the lender to remain confidential, he must specifically request that the identity be kept confidential.

ITEM 5. FUTURE PLANS OF INSURER.

Describe any plans or proposals which the applicant may have to declare an extraordinary dividend, to liquidate such insurer, to sell its assets to or merge it with any person or persons or to make any other material change in its business operations or corporate structure or management.

ITEM 6. VOTING SECURITIES TO BE ACQUIRED.

State the number of shares of the insurer's voting securities which the applicant, its affiliates and any person listed in Item 3 plan to acquire, and the terms of the offer, request, invitation, agreement or acquisition, and a statement as to the method by which the fairness of the proposal was arrived at.

ITEM 7. OWNERSHIP OF VOTING SECURITIES.

State the amount of each class of any voting security of the insurer which is beneficially owned or concerning which there is a right to acquire beneficial ownership by the applicant, its affiliates or any person listed in Item 3.

ITEM 8. CONTRACTS, ARRANGEMENTS, OR UNDERSTANDING WITH RESPECT TO VOTING SECURITIES OF THE INSURER.

Give a full description of any contracts, arrangements or understandings with respect to any voting security of the insurer in which the applicant, its affiliates or any person listed in Item 3 is involved, including but not limited to transfer of any of the securities, joint ventures, loan or option arrangements, puts or calls, guarantees of loans, guarantees against loss or guarantees of profits, division of losses or profits, or the giving or withholding of proxies. Such description shall identify the person with whom such contracts, arrangements or understandings have been entered into.

ITEM 9. RECENT PURCHASES OF VOTING SECURITIES.

Describe any purchases of any voting securities of the insurer by the applicant, its affiliates or any person listed in Item 3 during the twelve calendar months preceding the filing of this statement. Include in such description the dates of purchase, the names of the purchasers, and the consideration paid or agreed to be paid therefor. State whether any such shares so purchased are hypothecated.

ITEM 10. RECENT RECOMMENDATIONS TO PURCHASE.

Describe any recommendations to purchase any voting security of the insurer made by the applicant, its affiliates or any person listed in Item 3, or by anyone based upon interviews or at the suggestion of the applicant, its affiliates or any person listed in Item 3 during the twelve calendar months preceding the filing of this statement.

ITEM 11. AGREEMENTS WITH BROKER-DEALERS.

Describe the terms of any agreement, contract or understanding made with any broker-dealer as to solicitation of voting securities of the insurer for tender and the amount of any fees, commissions or other compensation to be paid to broker-dealers with regard thereto.

ITEM 12. FINANCIAL STATEMENTS AND EXHIBITS.

(a) Financial statements, exhibits, and three-year financial projections of the insurer(s) shall be attached to this statement as an appendix, but list under this item the financial statements and exhibits so attached.

(b) The financial statements shall include the annual financial statements of the persons identified in Item 2(c) for the preceding five fiscal years (or for such lesser period as such applicant and its affiliates and any predecessors thereof shall have been in existence), and similar information covering the period from the end of such person's last fiscal year, if such information is available. Such statements may be prepared on either an individual basis, or, unless the Director otherwise requires, on a consolidated basis if such consolidated statements are prepared in the usual course of business.

The annual financial statements of the applicant shall be accompanied by the certificate of an independent public accountant to the effect that such statements present fairly the financial position of the applicant and the results of its operations for the year then ended, in conformity with generally accepted accounting principles or with requirements of insurance or other accounting principles prescribed or permitted under law. If the applicant is an insurer which is actively engaged in the business of insurance, the financial statements need not be certified, provided they are based on the Annual Statement of such person filed with the insurance department of the person's domiciliary state and are in accordance with the requirements of insurance or other accounting principles prescribed or permitted under the law and regulations of such state.

(c) File as exhibits copies of all tender offers for, requests or invitations for, tenders of, exchange offers for, and agreements to acquire or exchange any voting securities of the insurer and (if distributed) of additional soliciting material relating thereto, any proposed employment, consultation, advisory or management contracts concerning the insurer, annual reports to the stockholders of the insurer and the applicant for the last two fiscal years, and any additional documents or papers required by Form A or Regulation 69-14.

ITEM 13. AGREEMENT REQUIREMENTS FOR ENTERPRISE RISK MANAGEMENT

Applicant agrees to provide, to the best of its knowledge and belief, the information required by Form F within fifteen (15) days after the end of the month in which the acquisition of control occurs.

ITEM 14. SIGNATURE AND CERTIFICATION.

Signature and certification required as follows:

SIGNATURE

Pursuant to the requirements of South Carolina Code Sections 38-21-60 and 38-21-70, _____ has caused this application to be duly signed on its behalf in the City of _____ and State of _____ on the ____ day of _____, 20____.

(SEAL)

Name of Applicant

BY

(Name) (Title)

Attest:

(Signature of Officer)

(Title)

CERTIFICATION

The undersigned deposes and says that (s)he has duly executed the attached application dated _____, 20____, for and on behalf of _____ (Name of Applicant); that (s)he is the _____ (Title of Officer) of such company and that (s)he is authorized to execute and file such instrument. Deponent further says that (s)he is familiar with such instrument and the contents thereof, and that the facts therein set forth are true to the best of his/her knowledge, information and belief.

(Signature) _____

(Type or print name beneath) _____

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**FORM B
INSURANCE HOLDING COMPANY SYSTEM ANNUAL
REGISTRATION STATEMENT**

Filed with the Insurance Department of the State of _____

By

Name of Registrant

On Behalf of Following Insurance Companies

Name

Address

Date: _____, 20____

Name, Title, Address, Telephone Number and E-mail Address of Individual to Whom Notices and Correspondence Concerning This Statement Should Be Addressed:

ITEM 1. IDENTITY AND CONTROL OF REGISTRANT.

Furnish the exact name of each insurer registering or being registered (hereinafter called "the Registrant"), the home office address and principal executive offices of each; the date on which each Registrant became part of the insurance holding company system; and the method(s) by which control of each Registrant was acquired and is maintained.

ITEM 2. ORGANIZATIONAL CHART.

Furnish a chart or listing clearly presenting the identities of and interrelationships among all affiliated persons within the insurance holding company system. The chart or listing should show the percentage of each class of voting securities of each affiliate which is owned, directly or indirectly, by another affiliate. If control of any person within the system is maintained other than by the ownership or control of voting securities, indicate the basis of such control. As to each person specified in such chart or listing indicate the type of organization (e.g., corporation, trust, partnership) and the state or other jurisdiction of domicile.

ITEM 3. THE ULTIMATE CONTROLLING PERSON.

As to the ultimate controlling person in the insurance holding company system furnish the following information:

- (a) Name.
- (b) Home office address.
- (c) Principal executive office address.
- (d) The organizational structure of the person, i.e., corporation, partnership, individual, trust, etc.
- (e) The principal business of the person.
- (f) The name and address of any person who holds or owns 10% or more of any class of voting security, the class of such security, the number of shares held of record or known to be beneficially owned, and the percentage of class so held or owned.
- (g) If court proceedings involving a reorganization or liquidation are pending, indicate the title and location of the court, the nature of proceedings and the date when commenced.

ITEM 4. BIOGRAPHICAL INFORMATION.

If the ultimate controlling person is a corporation, an organization, a limited liability company, or other legal entity, furnish the following information for the directors and executive officers of the ultimate controlling person: the individual's name and address, his or her principal occupation and all offices and positions held during the past five years, and any conviction of crimes other than minor traffic violations. If the ultimate controlling person is an individual, furnish the individual's name and address, his or her principal occupation and all offices and positions held during the past 5 years, and any conviction of crimes other than minor traffic violations.

ITEM 5. TRANSACTIONS AND AGREEMENTS.

Briefly describe the following agreements in force, and transactions currently outstanding or which have occurred during the last calendar year between the Registrant and its affiliates:

- (1) loans, other investments, or purchases, sales or exchanges of securities of the affiliates by the Registrant or of the Registrant by its affiliates;
- (2) purchases, sales or exchanges of assets;
- (3) transactions not in the ordinary course of business;
- (4) guarantees or undertakings for the benefit of an affiliate which result in an actual contingent exposure of the Registrant's assets to liability, other than insurance contracts entered into in the ordinary course of the Registrant's business;
- (5) all management agreements, service contracts and all cost-sharing arrangements;
- (6) leases;
- (7) reinsurance agreements;
- (8) dividends and other distributions to shareholders;
- (9) consolidated tax allocation agreements;
- (10) any pledge of the Registrant's stock and/or of the stock of any subsidiary or controlling affiliate, for a loan made to any member of the insurance holding company system; and
- (11) contributions by the Registrant to the surplus of an affiliate.

No information need be disclosed if such information is not material for purposes of South Carolina Code Section 38-21-160. Sales, purchases, exchanges, loans or extensions of credit, investments or guarantees involving one-half of 1% or less of the Registrant's admitted assets as of the previous 31st day of December shall not be deemed material, unless the Director by order or regulation provides otherwise. The description shall be in a manner as to permit the proper evaluation thereof by the Director, and shall include at least the following: the nature and purpose of the transaction, the nature and amounts of any payments or transfers of assets between the parties, the identity of all parties to such transaction, and relationship of the affiliated parties to the Registrant.

ITEM 6. LITIGATION OR ADMINISTRATIVE PROCEEDINGS.

A brief description of any litigation or administrative proceedings of the following types, either then pending or concluded within the preceding fiscal year, to which the ultimate controlling person or any of its directors or executive officers was a party or of which the property of any such person is or was the subject; give the names of the parties and the court or agency in which such litigation or proceeding is or was pending:

- (a) Criminal prosecutions or administrative proceedings by any government agency or authority; and
- (b) Proceedings which may have a material effect upon the solvency or capital structure of the ultimate holding company including, but not necessarily limited to, bankruptcy, receivership or other corporate reorganizations.

ITEM 7. STATEMENT REGARDING PLAN OR SERIES OF TRANSACTIONS.

The insurer shall furnish a statement that transactions entered into since the filing of the prior year's annual registration statement are not part of a plan or series of like transactions, the purpose of which is to avoid statutory threshold amounts and the review that might otherwise occur.

ITEM 8. FINANCIAL STATEMENTS AND EXHIBITS.

(a) Financial statements and exhibits should be attached to this statement as an appendix, but list under this item the financial statements and exhibits so attached.

(b) If the ultimate controlling person is a corporation, an organization, a limited liability company, or other legal entity, the financial statements shall include the annual financial statements of the ultimate controlling person in the insurance holding company system as of the end of the person's latest fiscal year.

If at the time of the initial registration, the annual financial statements for the latest fiscal year are not available, annual statements for the previous fiscal year may be filed and similar financial information shall be filed for any subsequent period to the extent such information is available. Such financial statements may be prepared on either an individual basis, or unless the Director otherwise requires, on a consolidated basis if such consolidated

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statements are prepared in the usual course of business. Other than with respect to the foregoing, such financial statements shall be filed in a standard form and format adopted by the National Association of Insurance Commissioners, unless an alternative form is accepted by the Director or his designee. Documentation and financial statements filed with the Securities and Exchange Commission or audited GAAP financial statements shall be deemed to be an appropriate form and format.

Unless the Director otherwise permits, the annual financial statements shall be accompanied by the certificate of an independent public accountant to the effect that such statements present fairly the financial position of the ultimate controlling person and the results of its operations for the year then ended, in conformity with generally accepted accounting principles or with requirements of insurance or other accounting principles prescribed or permitted under law. If the ultimate controlling person is an insurer which is actively engaged in the business of insurance, the annual financial statements need not be certified, provided they are based on the Annual Statement of such insurer filed with the insurance department of the insurer's domiciliary state and in accordance with requirements of insurance or other accounting principles prescribed or permitted under the law and regulations of such state.

Any ultimate controlling person who is an individual may file personal financial statements that are reviewed rather than audited by an independent public accountant. The review shall be conducted in accordance with standards for review of personal financial statements published in the *Personal Financial Statements Guide* by the American Institute of Certified Public Accountants. Personal financial statements shall be accompanied by the independent public accountant's Standard Review Report stating that the accountant is not aware of any material modifications that should be made to the financial statements in order for the statements to be in conformity with generally accepted accounting principles.

(c) Exhibits shall include copies of the latest annual reports to shareholders of the ultimate controlling person and proxy material used by the ultimate controlling person and any additional documents or papers required by Form B or Regulation 69-14.

ITEM 9. FORM C REQUIRED.

A Form C, Summary of Changes to Registration Statement, must be prepared and filed with this Form B.

ITEM 10. SIGNATURE AND CERTIFICATION.

Signature and certification required as follows:

SIGNATURE

Pursuant to the requirements of South Carolina Code Sections 38-21-130 and 38-21-140, the Registrant has caused this annual registration statement to be duly signed on its behalf in the City of _____ and State of _____ on the ____ day of _____, 20____.

(SEAL)

Name of Registrant

BY

(Name) (Title)

Attest:

(Signature of Officer)

(Title)

CERTIFICATION

The undersigned deposes and says that (s)he has duly executed the attached annual registration statement dated _____, 20____, for and on behalf of _____ (Name of Company); that (s)he is the _____ (Title of Officer) of such company and that (s)he is authorized to execute and file such instrument. Deponent further says that (s)he is familiar with such instrument and the contents thereof, and that the facts therein set forth are true to the best of his/her knowledge, information and belief.

(Signature) _____

(Type or print name beneath) _____

**FORM C
SUMMARY OF CHANGES TO REGISTRATION STATEMENT**

Filed with the Insurance Department of the State of _____
By _____

Name of Registrant

On Behalf of Following Insurance Companies

Name _____ Address _____

Date: _____, 20____

Name, Title, Address, Telephone Number and E-mail Address of Individual to Whom Notices and Correspondence Concerning This Statement Should Be Addressed:

Furnish a brief description of all items in the current annual registration statement which represent changes from the prior year's annual registration statement. The description shall be in a manner as to permit the proper evaluation thereof by the Director, and shall include specific references to Item numbers in the annual registration statement and to the terms contained therein.

Changes occurring under Item 2 of Form B insofar as changes in the percentage of each class of voting securities held by each affiliate is concerned, need only be included where such changes are ones which result in ownership or holdings of 10 percent or more of voting securities, loss or transfer of control, or acquisition or loss of partnership interest.

Changes occurring under Item 4 of Form B need only be included where: an individual is, for the first time, made a director or executive officer of the ultimate controlling person; a director or executive officer terminates his or her responsibilities with the ultimate controlling person; or in the event an individual is named president of the ultimate controlling person.

If a transaction disclosed on the prior year's annual registration statement has been changed, the nature of such change shall be included. If a transaction disclosed on the prior year's annual registration statement has been effectuated, furnish the mode of completion and any flow of funds between affiliates resulting from the transaction.

The insurer shall furnish a statement that transactions entered into since the filing of the prior year's annual registration statement are not part of a plan or series of like transactions whose purpose it is to avoid statutory threshold amounts and the review that might otherwise occur.

SIGNATURE AND CERTIFICATION

Signature and certification required as follows:

SIGNATURE

Pursuant to the requirements of South Carolina Code Section 38-21-150, the Registrant has caused this summary of registration statement to be duly signed on its behalf in the City of _____ and State of _____ on the ____ day of _____, 20____.

(SEAL)

Name of Registrant

BY

(Name) (Title)

Attest:

(Signature of Officer)

(Title)

CERTIFICATION

The undersigned deposes and says that (s)he has fully executed the attached summary of registration statement dated _____, 20____, for and on behalf of _____ (Name of Company); that (s)he is the _____ (Title of Officer) of such company and that (s)he is authorized to execute and file such instrument. Deponent further says that (s)he is familiar with such

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instrument and the contents thereof, and that the facts therein set forth are true to the best of his/her knowledge, information and belief.

(Signature) _____
(Type or print name beneath) _____

FORM D PRIOR NOTICE OF A TRANSACTION

Filed with the Insurance Department of the State of _____
By

Name of Registrant

On Behalf of Following Insurance Companies

Name _____ Address _____

Date: _____, 20____.

Name, Title, Address, Telephone Number and E-mail Address of Individual to Whom Notices and Correspondence Concerning This Statement Should Be Addressed:

ITEM 1. IDENTITY OF PARTIES TO TRANSACTION.

Furnish the following information for each of the parties to the transaction:

- (a) Name.
- (b) Home office address.
- (c) Principal executive office address.
- (d) The organizational structure, i.e., corporation, partnership, individual, trust, etc.
- (e) A description of the nature of the parties' business operations.
- (f) Relationship, if any, of other parties to the transaction to the insurer filing the notice, including any ownership or debtor/creditor interest by any other parties to the transaction in the insurer seeking approval, or by the insurer filing the notice in the affiliated parties.
- (g) Where the transaction is with a non-affiliate, the name(s) of the affiliate(s) which will receive, in whole or in substantial part, the proceeds of the transaction.

ITEM 2. DESCRIPTION OF THE TRANSACTION.

Furnish the following information for each transaction for which notice is being given:

- (a) A statement as to whether notice is being given under South Carolina Code Sections 38-21-250(B)(1), (2), (3), (4) or (5).
- (b) A statement of the nature of the transaction.
- (c) A statement of how the transaction meets the 'fair and reasonable' standard of South Carolina Code Section 38-21-250(A)(1); and
- (d) The proposed effective date of the transaction.

ITEM 3. SALES, PURCHASES, EXCHANGES, LOANS, EXTENSIONS OF CREDIT, GUARANTEES OR INVESTMENTS.

Furnish a brief description of the amount and source of funds, securities, property or other consideration for the sale, purchase, exchange, loan, extension of credit, guarantee, or investment, whether any provision exists for purchase by the insurer filing notice, by any party to the transaction, or by any affiliate of the insurer filing notice, a description of the terms of any securities being received, if any, and a description of any other agreements relating to the transaction such as contracts or agreements for services, consulting agreements and the like. If the transaction involves other than cash, furnish a description of the consideration, its cost and its fair market value, together with an explanation of the basis for evaluation.

If the transaction involves a loan, extension of credit or a guarantee, furnish a description of the maximum amount which the insurer will be obligated to make available under such loan, extension of credit or guarantee, the date on which the credit or guarantee will terminate, and any provisions for the accrual of or deferral of interest.

If the transaction involves an investment, guarantee or other arrangement, state the time period during which the investment, guarantee or other arrangement will remain in effect, together with any provisions for extensions or renewals of such investments, guarantees or arrangements. Furnish a brief statement as to the effect of the transaction upon the insurer's surplus.

No notice need be given if the maximum amount which can at any time be outstanding or for which the insurer can be legally obligated under the loan, extension of credit or guarantee is less than, (a) in the case of non-life insurers, the lesser of 3% of the insurer's admitted assets or 25% of surplus as regards policyholders or, (b) in the case of life insurers, 3% of the insurer's admitted assets, each as of the 31st day of December next preceding.

ITEM 4. LOANS OR EXTENSIONS OF CREDIT TO A NON-AFFILIATE.

If the transaction involves a loan or extension of credit to any person who is not an affiliate, furnish a brief description of the agreement or understanding whereby the proceeds of the proposed transaction, in whole or in substantial part, are to be used to make loans or extensions of credit to, to purchase the assets of, or to make investments in, any affiliate of the insurer making such loans or extensions of credit, and specify in what manner the proceeds are to be used to loan to, extend credit to, purchase assets of or make investments in any affiliate. Describe the amount and source of funds, securities, property or other consideration for the loan or extension of credit and, if the transaction is one involving consideration other than cash, a description of its cost and its fair market value together with an explanation of the basis for evaluation. Furnish a brief statement as to the effect of the transaction upon the insurer's surplus.

No notice need be given if the loan or extension of credit is one which equals less than, in the case of nonlife insurers, the lesser of 3% of the insurer's admitted assets or 25% of surplus as regards policyholders or, with respect to life insurers, 3% of the insurer's admitted assets, each as of the 31st day of December next preceding.

ITEM 5. REINSURANCE.

If the transaction is a reinsurance agreement or modification thereto, as described by South Carolina Code Section 38-21-250(B)(3)(b) or a reinsurance pooling agreement or modification thereto as described by South Carolina Code Section 38-21-250(B)(3)(a), furnish a description of the known and/or estimated amount of liability to be ceded and/or assumed in each calendar year, the period of time during which the agreement will be in effect, and a statement whether an agreement or understanding exists between the insurer and non-affiliate to the effect that any portion of the assets constituting the consideration for the agreement will be transferred to one or more of the insurer's affiliates. Furnish a brief description of the consideration involved in the transaction, and a brief statement as to the effect of the transaction upon the insurer's surplus.

No notice need be given for reinsurance agreements or modifications thereto if the reinsurance premium or a change in the insurer's liabilities, or the projected reinsurance premium or change in the insurer's liabilities in any of the next three years, in connection with the reinsurance agreement or modification thereto is less than 5% of the insurer's surplus as regards policyholders, as of the 31st day of December next preceding. Notice shall be given for all reinsurance pooling agreements including modifications thereto.

ITEM 6. MANAGEMENT AGREEMENTS, SERVICE AGREEMENTS AND COST-SHARING ARRANGEMENTS.

For management and service agreements, furnish:

- (a) a brief description of the managerial responsibilities, or services to be performed.
- (b) a brief description of the agreement, including a statement of its duration, together with brief descriptions of the basis for compensation and the terms under which payment or compensation is to be made.

For cost-sharing arrangements, furnish:

- (a) a brief description of the purpose of the agreement.
- (b) a description of the period of time during which the agreement is to be in effect.
- (c) a brief description of each party's expenses or costs covered by the agreement.
- (d) a brief description of the accounting basis to be used in calculating each party's costs under the agreement.
- (e) A brief statement as to the effect of the transaction upon the insurer's policyholder surplus;

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(f) A statement regarding the cost allocation methods that specifies whether proposed charges are based on "cost or market." If market based, rationale for using market instead of cost, including justification for the company's determination that amounts are fair and reasonable; and

(g) A statement regarding compliance with the *NAIC Accounting Practices and Procedure Manual* regarding expense allocation.

ITEM 7. ALL OTHER TRANSACTIONS DETERMINED BY THE DIRECTOR TO BE MATERIAL, INCLUDING, BUT NOT LIMITED TO, REAL OR PERSONAL PROPERTY LEASES.

For leases, furnish:

- (a) a brief description of the purpose of the lease.
- (b) a description of the period of time during which the lease agreement is to be in effect.
- (c) the aggregate payments to be made during the term of the lease.
- (d) copy of the lease agreement.

ITEM 8. SIGNATURE AND CERTIFICATION.

Signature and certification required as follows:

SIGNATURE

Pursuant to the requirements of South Carolina Code Section 38-21-250, _____ has caused this notice to be duly signed on its behalf in the City of _____ and State of _____ on the ____ day of _____, 20 ____.

(SEAL)
Name of Applicant
BY
(Name) (Title)

Attest:
(Signature of Officer)
(Title)

CERTIFICATION

The undersigned deposes and says that (s)he has fully executed the attached notice dated _____, 20 ____, for and on behalf of _____ (Name of Applicant); and (s)he is the _____ (Title of Officer) of such company and that (s)he is authorized to execute and file such instrument. Deponent further says that (s)he is familiar with such instrument and the contents thereof, and that the facts therein set forth are true to the best of his/her knowledge, information and belief.

(Signature) _____
(Type or print name beneath) _____

**FORM E
PRE-ACQUISITION NOTIFICATION FORM
REGARDING THE POTENTIAL COMPETITIVE IMPACT
OF A PROPOSED MERGER OR ACQUISITION BY A
NON-DOMICILIARY INSURER DOING BUSINESS IN THIS
STATE OR BY A DOMESTIC INSURER**

Name of Applicant

Name of Other Person
Involved in Merger or
Acquisition

Filed with the Insurance Department of the state of _____

Dated: _____, 20 _____

Name, title, address, telephone number and e-mail address of person completing this statement:

ITEM 1. NAME AND ADDRESS

State the names and addresses of the persons who hereby provide notice of their involvement in a pending acquisition or change in corporate control.

ITEM 2. NAME AND ADDRESSES OF AFFILIATED COMPANIES

State the names and addresses of the persons affiliated with those listed in Item 1. Describe their affiliations.

ITEM 3. NATURE AND PURPOSE OF THE PROPOSED MERGER OR ACQUISITION

State the nature and purpose of the proposed merger or acquisition.

ITEM 4. NATURE OF BUSINESS

State the nature of the business performed by each of the persons identified in response to Item 1 and Item 2.

ITEM 5. MARKET AND MARKET SHARE

State specifically what market and market share in each relevant insurance market the persons identified in Item 1 and Item 2 currently enjoy in this state. Provide historical market and market share data for each person identified in Item 1 and Item 2 for the past five years and identify the source of such data. Provide a determination as to whether the proposed acquisition or merger, if consummated, would violate the competitive standards of the state as stated in South Carolina Code Section 38-21-125(D). If the proposed acquisition or merger would violate competitive standards, provide justification of why the acquisition or merger would not substantially lessen competition or create a monopoly in the state.

For purposes of this question, market means direct written insurance premium in this state for a line of business as contained in the annual statement required to be filed by insurers licensed to do business in this state.

**FORM F
ENTERPRISE RISK REPORT**

Filed with the Insurance Department of the State of _____

By _____

Name of Registrant/Applicant

On Behalf of/Related to Following Insurance Companies

Name Address

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Date: _____, 20____

Name, Title, Address, Telephone Number and E-mail Address of Individual to Whom Notices and Correspondence Concerning This Statement Should Be Addressed:

ITEM 1. ENTERPRISE RISK

The Registrant/Applicant, to the best of its knowledge and belief, shall provide information regarding the following areas that could produce enterprise risk as defined in South Carolina Code Section 38-21-10, provided such information is not disclosed in the Insurance Holding Company System Annual Registration Statement filed on behalf of itself or another insurer for which it is the ultimate controlling person:

- (a) Any material developments regarding strategy, internal audit findings, compliance or risk management affecting the insurance holding company system;
- (b) Acquisition or disposal of insurance entities and reallocating of existing financial or insurance entities within the insurance holding company system;
- (c) Any changes of shareholders of the insurance holding company system exceeding ten percent (10%) or more of voting securities;
- (d) Developments in various investigations, regulatory activities or litigation that may have a significant bearing or impact on the insurance holding company system;
- (e) Business plan of the insurance holding company system and summarized strategies for next 12 months;
- (f) Identification of material concerns of the insurance holding company system raised by supervisory college, if any, in last year;
- (g) Identification of insurance holding company system capital resources and material distribution patterns;
- (h) Identification of any negative movement, or discussions with rating agencies which may have caused, or may cause, potential negative movement in the credit ratings and individual insurer financial strength ratings assessment of the insurance holding company system (including both the rating score and outlook);
- (i) Information on corporate or parental guarantees throughout the holding company and the expected source of liquidity should such guarantees be called upon; and
- (j) Identification of any material activity or development of the insurance holding company system that, in the opinion of senior management, could adversely affect the insurance holding company system.

The Registrant/Applicant may attach the appropriate form most recently filed with the U.S. Securities and Exchange Commission, provided the Registrant/Applicant includes specific references to those areas listed in Item 1 for which the form provides responsive information. If the Registrant/Applicant is not domiciled in the U.S., it may attach its most recent public audited financial statement filed in its country of domicile, provided the Registrant/Applicant includes specific references to those areas listed in Item 1 for which the financial statement provides responsive information.

ITEM 2. OBLIGATION TO REPORT.

If the Registrant/Applicant has not disclosed any information pursuant to Item 1, the Registrant/Applicant shall include a statement affirming that, to the best of its knowledge and belief, it has not identified enterprise risk subject to disclosure pursuant to Item 1.

Fiscal Impact Statement:

There will be no increased costs to the state or its political subdivisions.

Statement of Rationale:

The amendments to the regulation are needed to set forth updated standards for financial reporting for Insurance Holding Company Systems. The National Association of Insurance Commissioners (NAIC) adopted revisions to the NAIC Model Rule (Regulation #450) for Insurance Holding Company Systems to incorporate the new Form F (enterprise risk report). The proposed amendments will also add to the regulation Form E (pre-acquisition notice). Form E is a requirement in the statute but had not previously been in the regulation. The proposed amendments to Regulation 69-14 will be based upon the amendments to the NAIC Model regulation.

Document No. 4556
DEPARTMENT OF LABOR, LICENSING AND REGULATION
 CHAPTER 10
 Statutory Authority: 1976 Code Sections 40-1-50, 40-1-70 and 40-77-70

10-18. Board of Registration for Geologists.

Synopsis:

The South Carolina Department of Labor, Licensing and Regulation proposes to correct Regulation 10-18(A)(2) changing the application fee for a Professional Geologist from \$400 to \$200 to correct a scrivener’s error.

A Notice of Drafting was published in the *State Register* on September 26, 2014.

Instructions:

Regulation 10-18 is amended as shown below.

Text:

10-18. Board of Registration for Geologists.

The Board shall charge the following fees:

A. Application Fees	
1. Geologist-in-Training	\$75
2. Professional Geologist	\$200
B. Renewal Fees	
1. Professional Geologist	\$300
2. Late Renewal from July 1-December 31:	Renewal plus fifty (50%) percent penalty fee
3. Reactivation of Registration	\$300 plus renewal fee
C. Replacement Certificate	\$10
D. Examination Appeal	\$50 + actual costs charged by testing organization
E. Roster fee	\$10
F. Temporary Registration	\$300

Fiscal Impact Statement:

There will be no cost incurred by the State or any of its political subdivisions for this regulation.

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Statement of Rationale:

The updated regulation will amend a scrivener's error.

Document No. 4554
DEPARTMENT OF LABOR, LICENSING AND REGULATION
CHAPTER 10
Statutory Authority: 1976 Code Sections 40-1-50 and 40-1-70

10-25. Board of Nursing.

Synopsis:

The South Carolina Department of Labor, Licensing and Regulation proposes to move the remaining fees from Regulation 91-31 to Regulation 10-25.

A Notice of Drafting was published in the *State Register* on November 28, 2014.

Instructions:

Regulation 10-25 is amended as shown below.

Text:

10-25. Board of Nursing.

The Board shall charge the following fees:

a. R.N. Examination:	\$90
R.N. Endorsement:	\$100
R.N. Re-examination:	\$65
L.P.N. Examination:	\$70
L.P.N. Endorsement:	\$100
L.P.N. Re-examination:	\$45
R.N. and L.P.N. Renewals:	\$75
R.N. and L.P.N. Reinstatements:	\$60
R.N. and L.P.N. Reactivation:	\$50
R.N. and L.P.N. Reinstatement of Disciplined License:	\$150
Name change only on records:	\$0
Verification to another state (A.P.R.N., R.N. and L.P.N.):	\$5
Certification Exam Verification:	\$5
VISA Screen Verification:	\$5
Temporary permit:	\$10
Official Inactive Status:	\$15
APRN Initial Fee (current S.C. licensee only):	\$30
APRN Renewal:	\$105
APRN Endorsement:	\$140
APRN Reinstatement:	\$90
APRN Reactivation:	\$70
Application for Prescriptive Authority:	\$20
Renewal of Prescriptive Authority:	\$145
Returned check charge:	\$30

Names, addresses and authorized statistical data of licensed nurses may be released upon written request of agencies, individuals, and organizations. This service will be provided electronically or via CD for a cost of \$10.00.

Refund of fees will be made at the discretion of the Board.

Fiscal Impact Statement:

There will be no cost incurred by the State or any of its political subdivisions for this regulation.

Statement of Rationale:

The updated regulation will amend a scrivener’s error.

Document No. 4535
DEPARTMENT OF LABOR, LICENSING AND REGULATION
 CHAPTER 10
 Statutory Authority: 1976 Code Sections 40-1-50 and 40-1-70

10-37. Real Estate Commission.

Synopsis:

The South Carolina Department of Labor, Licensing and Regulation proposes to add the fees from Real Estate Commission Regulation 105-12 to Regulation 10-37 to correct a scrivener’s error. Specifically, the fees from Regulation 105-12 should be added to Regulation 10-37. They were inadvertently omitted when the fees for all boards and commissions were moved into the newly-created Chapter 10 during the 2013-2014 legislative session.

A Notice of Drafting was published in the *State Register* on October 24, 2014.

Instructions:

Regulation 10-37 is amended as shown below.

Text:

10-37. Real Estate Commission.

The Board shall charge the following fees:

A. New License:

- | | |
|---|-----------------|
| 1. Broker-in-Charge/Property Manager-in-Charge (biennial) | \$250 |
| 2. Broker/Property Manager (biennial) | \$125 |
| 3. Salesperson (Provisional), (annual) | \$25 |
| 4. Credit report for applicant by reciprocity | \$10 |
| 5. Salesperson applicant from non-reciprocity states | \$50 (biennial) |

B. Renewal:

- | | |
|---|-------|
| 1. Broker-in-Charge/Property Manager-in-Charge (biennial) | \$75 |
| 2. Broker/Property Manager (biennial) | \$55 |
| 3. Salesperson (biennial) | \$45 |
| 4. Inactive Status (biennial) | \$120 |

5. The late renewal fee is \$25 per month, beginning July 1st through December 31st. After December 31st, the licensee must reapply.

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6. Timeshare Salesperson:	\$30
C. Licensing Transactions:	
1. Upgrade of Salesman Provisional License	\$25
2. License Transfer	\$0
3. Duplicate License	\$10
4. Certification of Licensure	\$5
5. Personal Name Change	\$10
6. Change of License Status	
a. BIC/PMIC to Broker/Property Manager	\$10
b. Activate License (same classification) from Inactive	\$10
c. Company Name or Address Change	\$10
(\$10 per licensee or maximum of \$250 an office)	
D. Examination Process	
1. Application	\$25
2. Credit Report	\$10
3. Examination is payable directly to examination vendor.	
E. Provider, Course, and Instructor Fees	
1. Course provider approval	\$200
2. Course provider renewal	\$100
3. Course approval	\$100
4. Course approval renewal	\$50
5. Instructor approval	\$100
6. Instructor approval	\$50
7. Late renewal (after August 31st) for provider, course, or instructor	\$50

The education year is September 1st of even-numbered years through August 31st.

Fiscal Impact Statement:

There will be no cost incurred by the State or any of its political subdivisions for this regulation.

Statement of Rationale:

The updated regulation will centralize fee schedules and remove duplicative and outdated information.

Document No. 4499

DEPARTMENT OF LABOR, LICENSING AND REGULATION

BOARD OF ARCHITECTURAL EXAMINERS

CHAPTER 11

Statutory Authority: 1976 Code Sections 40-1-50, 40-1-70, 40-3-50, and 40-3-60

11-5. Applications and Fees

Synopsis:

The South Carolina Department of Labor, Licensing and Regulation proposes to amend Regulation 11-5 to remove the existing schedule of fees, cross-reference the fees in their new location in Chapter 10, and include in the regulation a link to the Board's website where the fees will also appear.

A Notice of Drafting was published in the *State Register* on September 26, 2014.

Instructions:

Regulation 11-5 is amended as shown below.

Text:

11-5. Applications and Fees.

A. All applications must be accompanied by an application fee in the form of a check or money order made payable to South Carolina Board of Architectural Examiners. Applications will be reviewed by the Board within ninety (90) days of receipt. If after review by the Board an application is approved, the applicant shall be advised in writing.

B. The Board may charge fees as shown in South Carolina Code of Regulations Chapter 10-3 and on the South Carolina Board of Architectural Examiners website at <http://lir.sc.gov/POL/Architects>.

Fiscal Impact Statement:

There will be no cost incurred by the State or any of its political subdivisions for this regulation.

Statement of Rationale:

The updated regulation will centralize fee schedules and remove duplicative and outdated information.

Document No. 4500
DEPARTMENT OF LABOR, LICENSING AND REGULATION
STATE ATHLETIC COMMISSION
 CHAPTER 20

Statutory Authority: 1976 Code Sections 40-1-50, 40-1-70, 40-81-40, and 40-81-70

- 20-4.10. License Fees.
- 20-23.11. License Fees.
- 20-24.10. License Fees.
- 20-27.23. Fees.

Synopsis:

The South Carolina Department of Labor, Licensing and Regulation proposes to amend Regulations 20-4.10, 20-23.11, 20-24.10, and 20-27.33 to remove the existing schedule of fees, cross-reference the fees in their new location in Chapter 10, and include in the regulations a link to the Commission’s website where the fees will also appear.

A Notice of Drafting was published in the *State Register* on September 26, 2014.

Instructions:

Regulations 20-4.10, 20-23.11, 20-24.10, and 20-27.33 are amended as shown below.

Text:

20-4.10. License Fees.

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The Commission may charge fees as shown in South Carolina Code of Regulations Chapter 10-4 and on the South Carolina State Athletic Commission website at <http://llr.sc.gov/POL/Athletic/>.

20-23.11. License Fees.

The Commission may charge fees as shown in South Carolina Code of Regulations Chapter 10-4 and on the South Carolina State Athletic Commission website at <http://llr.sc.gov/POL/Athletic/>.

20-24.10. License Fees.

The Commission may charge fees as shown in South Carolina Code of Regulations Chapter 10-4 and on the South Carolina State Athletic Commission website at <http://llr.sc.gov/POL/Athletic/>.

20-27.23. Fees.

The Commission may charge fees as shown in South Carolina Code of Regulations Chapter 10-4 and on the South Carolina State Athletic Commission website at <http://llr.sc.gov/POL/Athletic/>.

Fiscal Impact Statement:

There will be no cost incurred by the State or any of its political subdivisions for these regulations.

Statement of Rationale:

The updated regulations will centralize fee schedules and remove duplicative and outdated information.

Document No. 4536
DEPARTMENT OF LABOR, LICENSING AND REGULATION
STATE ATHLETIC COMMISSION
CHAPTER 20
Statutory Authority: 1976 Code Sections 40-1-70 and 40-81-70

Synopsis:

To satisfy the requirements of licensure for professional boxing, wrestling, kick boxing, and off the street boxing, Regulations 20-1.1 through 20-4.9, Regulations 20-4.12 through 20-22.8, Regulation 20-22.10, Regulations 20-22.13 through 20-23.8, Regulations 20-23.12 through 20-25.1, and Regulations 20-27.01 through Regulations 20-27.22 are amended, and Regulations 20-27.24 through Regulations 20-27.82 are added in conformance with the State Athletic Commission Practice Act.

A Notice of Drafting was published in the *State Register* on September 26, 2014.

Instructions:

Regulations 20-1.1 through 20-4.9, Regulations 20-4.12 through 20-22.8, Regulation 20-22.10, Regulations 20-22.13 through 20-23.8, Regulations 20-23.12 through 20-25.1, and Regulations 20-27.01 through Regulations 20-27.22 are amended as shown below. Regulations 20-27.24 through Regulations 20-27.82 are added as shown below.

Text:

SUBCHAPTER 1

DEFINITIONS, BOXING WEIGHTS AND CLASSES

20-1.1. Definitions.

The following words and terms, when used in the Chapter shall have the following meanings, unless the context clearly indicates otherwise.

(1) "Administrator" means the person appointed by the Director of the Department of Labor, Licensing and Regulation to administer the affairs of the State Athletic Commission.

(2) "Admissions" means the amount paid for seats to witness an event or exhibition or any fee charged for presenting an event or exhibition including, but not limited to, complimentary tickets given in exchange for services. This term does not include admission for contestants, officials, representatives of the commission, and the media.

(3) "Announcer" means any person who is licensed by the commission and is designated by the promoter to introduce the participants and provide information to the public at the event or exhibition.

(4) "Bout" means the individual contest between two contestants for a scheduled number of rounds.

(5) "Boxer" means a person who competes for a purse or compensation in boxing matches, contests, or exhibitions.

(6) "Boxing" means any form of event or exhibition in which a person delivers blows to another, with any part of the arm below the shoulder, including the hand, which may be reasonably expected to disable or inflict injury.

(7) "Chief Ring Official" means the referee designated by the Commission Representative as being responsible for the directing of event officiating, presentation and explanation of competition rules, and the evaluation of combatants for sufficient skills to safely compete in Commission sanctioned bouts.

(8) "Commission" means the State Athletic Commission.

(9) "Commission Designee" means the person(s) granted and delegated specific authority to review and approve fight cards, bout pairings, non-routine applications or age waiver petitions on behalf of the Commission.

(10) "Commission Representative" means that individual designated by the Administrator to supervise a particular match, contest, exhibition or event in this state.

(11) "Contestant" means anyone who competes in an event or participates in an exhibition regulated by the State Athletic Commission.

(12) "Department" means the Department of Labor, Licensing and Regulation.

(13) "Director" means the Director of the Department of Labor, Licensing and Regulation or the director's official designee.

(14) "Emergency medical technician" means a person who is certified by the Department of Health and Environmental Control pursuant to the Emergency Medical Services Act.

(15) "Event" means an occurrence, bout, show, or contest regulated by the State Athletic Commission in which any contestant displays or exhibits athletic skills in competition.

(16) "Exhibition" means an occurrence in which the participant shows, displays, or performs without striving to win. Exhibitions are not allowed within the confines of an event sanctioned by the SC Athletic Commission, with the exception of professional wrestling.

(17) "License" means the written approval given, upon application, by the Commission to a person, club, corporation, organization, or association to participate in or promote events or exhibitions regulated by the State Athletic Commission.

(18) "Manager" means a person who does any of the following:

(a) by contract with a person undertakes or has undertaken to represent in any way the interest in which a contestant is to participate and receive monetary or other compensation for his/her services without regard to the source of the compensation; except that the term "Manager" shall not be construed to mean any attorney licensed to practice in this state, whose participation in such activities is restricted solely to his/her representing the interests of a contestant as his/her client.

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(b) directs or controls the professional activities of a contestant;

(c) receives or is entitled to receive a share of the gross purse or gross income of an event .

(19) "Matchmaker" means a person who undertakes to obtain agreements between managers or contestants, or both, for the purpose of securing contestants for a professional boxing, professional kickboxing, or mixed martial arts event regulated by the State Athletic Commission.

(20) "Off The Street Boxing" means a competition in which contestants who have no professional experience as boxers compete in a series of boxing matches. The term does not include an amateur contest or exhibition that complies with the provisions of Section 40-81-500.

(21) "Official" means the judges, referees, timekeepers, and other persons assigned by the administrator and necessary to conduct an event or exhibition.

(22) "Participant" means a person who acts as a promoter, boxer, wrestler, judge, referee, manager, contestant, trainer, second, timekeeper, announcer, matchmaker, security, or medical personnel in connection with an event or exhibition regulated by the State Athletic Commission.

(23) "Passport" means a boxer's official fight record.

(24) "Permit" means the written approval given, upon application, by the commission to a promoter to hold and conduct an event or exhibition regulated by the State Athletic Commission at a specific time, date, and location.

(25) "Person" means an individual, group of individuals, business, corporation, partnership, association, or collective entity.

(26) "Physician" means a person licensed to practice medicine or osteopathy in this State.

(27) "Promoter" means a person, club, corporation, organization, or association which promotes, advertises, presents, conducts, holds, or gives a professional boxing, professional kickboxing, mixed martial arts, or wrestling event or exhibition in this State.

(28) "Promoter's representative" means a person who is designated in writing by the promoter to ensure compliance with this chapter and who has binding authority for all promoters.

(29) "Purse" means the total amount paid by a promoter to the contestants and officials for participating in an event.

(30) "Ringside physician" is the physician responsible for examining the contestant before, during, and after each event and who is present at ringside for the entire event or exhibition.

(31) "Second" means a person who is licensed by the Commission to serve in the corner of a contestant during the bout.

(32) "Technical knockout" means a victory with immediate termination of the bout or match, ordered by the referee, when it appears that one contestant is unable to continue.

(33) "Trainer" means any person who is licensed by the commission and trains individuals to compete in professional boxing, professional kickboxing, or mixed martial arts events.

(34) "Weapon" means anything that is not a part of the human body, excluding boxing gloves and other commission-approved equipment used in combative sports.

20-1.2. Classes of Boxers.

1. Boxers shall be divided into the following classes:

- | | |
|------------------------|------------------------|
| a. Mini Flyweight | up to 105 pounds |
| b. Light Flyweight | over 105 to 108 pounds |
| c. Flyweight | over 108 to 112 pounds |
| d. Super Flyweight | over 112 to 115 pounds |
| e. Bantam Weight | over 115 to 118 pounds |
| f. Super Bantam Weight | over 118 to 122 pounds |
| g. Featherweight | over 122 to 126 pounds |
| h. Super Featherweight | over 126 to 130 pounds |
| i. Lightweight | over 130 to 135 pounds |
| j. Super Lightweight | over 135 to 140 pounds |
| k. Welterweight | over 140 to 147 pounds |
| l. Super Welterweight | over 147 to 154 pounds |

- | | |
|-----------------------|------------------------|
| m. Middleweight | over 154 to 160 pounds |
| n. Super Middleweight | over 160 to 168 pounds |
| o. Light Heavyweight | over 168 to 175 pounds |
| p. Cruiserweight | over 175 to 200 pounds |
| q. Heavyweight | over 200 pounds |

NOTE: Women's weight classes shall be the same as male boxers.

20-1.3. Weigh-In Procedures.

Weigh-ins within 24 hours

When weigh-ins occur within twenty-four (24) hours, but not less than twelve (12) hours prior to an event's scheduled start time, the boxer shall not exceed the weight specified on the boxer/promoter contract. If a boxer exceeds the weight specified in the boxer/promoter contract, the supervising commission shall cancel the contest unless the boxer:

1. Loses the weight exceeded in the boxer/promoter contract at least twelve (12) hours prior to the event's scheduled start time;
2. Loses all but two (2) pounds of the weight exceeded in the boxer/promoter contract at least twelve (12) hours prior to the event's scheduled start time and loses the final two (2) pounds at least six (6) hours prior to the event's scheduled start time; or,
3. Renegotiates the boxer/promoter contract.

Weigh-ins within 12-Hours

Boxers who weigh-in twelve (12) to twenty-four (24) hours prior to the scheduled event shall be required to re-weigh two (2) hours prior to the scheduled event start time and will not be allowed to exceed the weight specified in the boxer/promoter contract by more than ten (10) pounds.

When weigh-ins occur less than twelve (12) hours prior to an event's scheduled start time, the boxer shall not exceed the weight specified in the boxer/promoter contract. For safety purposes, no boxer shall be permitted to lose MORE THAN two (2) pounds within twelve (12) hours of a contest. If a boxer weighs more than two (2) pounds over the weight specified in the boxer/promoter contract, the Commission Representative shall cancel the contest unless the boxer:

1. Loses up to two (2) pounds at least six (6) hours prior to an event's scheduled start time and renegotiates the boxer/promoter contract; or,
2. Renegotiates the boxer/promoter contract.

20-1.4. Weighing of Boxers.

1. Weighing of all boxers for all shows must take place at a time and place designated by the Commission. This would normally be on the same day that the event is to be held.
2. Weights must be determined by the Commission Representative.
3. Opponents should be weighed in the presence of each other.
4. Members of the press, in addition to the responsible handlers of the boxers, shall be permitted to attend the weigh-in.
5. All boxers must weigh-in wearing shorts only, or for female boxers, shorts and a Commission Representative approved athletic tee shirt or sports bra which will be permitted to be worn during the bout.
6. Any boxer who fails to appear for the official weigh-in, within the time stipulated on the club contract, shall be subject to disciplinary action as provided for by statute or these regulations.

SUBCHAPTER 2

RING EQUIPMENT

20-2.1. Ring Dimensions; Floor Coverings.

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1. The boxing ring shall not be less than sixteen (16) feet or more than twenty-four (24) feet on each side square within the ring ropes.
2. The platform must extend beyond the ropes for a distance of at least eighteen (18) inches.
3. The ring posts shall be at least eighteen (18) inches away from the ring ropes.
4. The ring floor, both within and outside the ropes, must be padded to a thickness approved by the Commission's Representative. Padding must be felt matting or other soft material that will not lump and must be approved by the Commission's Representative.
5. There must be a top covering of canvas, duck or similar material tightly stretched and laced to the ring platform.
6. On the floor there must be a layer of Celotex Building Board Number 2 or a similar material approved by the Commission's Representative.

20-2.2. Height of Ring.

The ring shall not be more than four (4) feet above the floor of the building and shall be provided with suitable steps for the use of contestants and approved ringside officials.

20-2.3. Ring Posts.

1. Ring posts shall not be less than three inches in diameter and may extend from the floor of the ring to a height of no more than fifty-eight (58) inches and shall be properly padded.
2. Nothing shall be attached to the ring post without approval from the Commission Representative.

20-2.4. Ring Ropes.

1. There shall be at least four (4) ropes, not less than one (1) inch in diameter, which shall be well padded at all times.
2. The lower rope shall be not more than eighteen (18) inches above the ring floor and the top rope fifty-two (52) inches above the ring floor.

20-2.5. Gong or Bell.

1. The gong or bell must not be higher than floor level of the ring platform.
2. The bell or gong must have a clear tone so that the contestants can easily hear the bell or gong.

20-2.6. Timekeeper's Chair.

The timekeeper's chair must be sufficiently elevated to give him/her a clear view of the ring.

20-2.7. Stopwatch.

The licensed timekeeper at every boxing show shall have an approved and accurate stopwatch.

20-2.8. Gloves; Additional Articles.

1. An ample supply of boxing gloves must be kept on hand by every promoter.
2. Each glove must weigh at least eight (8) ounces.
3. All gloves must be in good condition or they must be discarded.
4. The Commission may require a brand new set of gloves for any event. Thumbless gloves may be used with consent of both contestants and at the discretion of the Commission Representative.
5. All gloves must pass the inspection of the referee and/or the Commission's Representative.
6. The promoter shall provide a sufficient number of water buckets for the use of all contestants.

7. Promoters shall also provide powdered resin for canvas, stools, water bottles and such other articles that are required for conducting the contests.

8. A bucket or water bottle used by a contestant shall not be used again by another contestant.

20-2.9. Scales.

Scales used for weighing-in boxers shall be provided by or otherwise approved by the Commission's Representative.

20-2.10. Ring to Be Clear of Obstructions.

1. The entire ring platform shall be cleared of all obstructions, including such articles as buckets and stools at the beginning of a round, as indicated by the gong. None of these articles shall be placed on the ring floor until the gong has ended the round.

2. Nothing shall be placed on the ring apron, unless approved by the Commission Representative.

3. No one shall be seated within six (6) feet of the ring unless approved by the Commission Representative.

20-2.11. Tape and Bandages.

1. The bandage on a boxer's hand or wrist shall be soft surgical bandage of gauze quality not over two (2) inches wide and twenty (20) yards in length for each hand. It shall be wrapped on each hand smoothly and evenly and without zigzagging, lumping or curling.

2. The bandage shall be held in place by eight (8) feet of surgeon's adhesive tape in a width of one and one half (1.5) inches, which shall be wrapped smoothly and evenly, without zigzagging, lumping or curling.

3. Bandage and tape shall be placed on the hands of a boxer in the presence of the Commission Representative.

4. The application of a greater amount of bandage or tape must be approved by the Commission Representative. In such case, the opponent shall have the same consideration.

20-2.12. Adhesive Tape for Protection of Hands.

If both boxers agree, the Commission Representative may authorize small strips of tape between the fingers of a boxer to be placed directly on each hand for protection near the wrist. Said tape may cross the back of the hand twice but shall not extend within one (1) inch of the knuckles when the hand is clenched in a fist.

20-2.13. Adjustment of Bandages and Tape.

All bandages and tape shall be adjusted in the dressing room in the presence of the Commission's Representative who shall initial such wrappings. Under no condition are bandages to be placed on the hands of the contestants until authorized by the Commission's Representative.

20-2.14. Round Cards.

Each promoter may provide a sufficient supply of white, square shaped round cards, numbered on both sides from 1 to 15. These shall be visible to all spectators from the ring.

20-2.15. Steps to Boxing Ring.

In addition to the set of steps installed in each boxer's corner, a third set of steps leading to the boxing ring may be required by the Commission Representative for use exclusively by the attending physician, referee, ring announcer, round card carriers, and such other persons approved by the Commission's representative for introductions. All steps must be operational and clear of any and all obstructions.

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20-2.16. Mouth Pieces.

The promoter must have--at ringside--an adequate supply (not less than six) sterilized mouth pieces that can be formed to fit.

No boxer shall be permitted to perform in any contest without wearing a form fitting mouth piece. It is suggested that each boxer have a spare mouth piece in the event the one he/she is wearing breaks. Boxers are not allowed to share mouthpieces.

SUBCHAPTER 3

RING SAFETY

20-3.1. Ring Floor Material.

Every ring used for boxing shall be equipped with a one (1) inch layer of Celotex Building Board Number 2 or a similar approved substance. Said application shall be between the floor of the ring and the canvas-covered padding.

20-3.2. Ring Padding.

Ring padding shall be at a thickness approved by the Commission Representative and shall be covered by a clean, unbroken canvas. Padding shall be periodically checked to guard against loss of effectiveness through constant use.

20-3.3. Ring Aprons.

Ring aprons which extend beyond the ropes must be properly padded and shall have Celotex Building Board Number 2 or similar substance approved by the Commission Representative between the padding and the floor.

20-3.4. Ropes, Tops of Ring Posts.

1. Steps leading into the ring shall be in diagonally opposite corners of the ring.
2. A ring stool shall be made available for each corner.

20-3.5. Emergency Equipment and Medical Personnel.

The promoter shall arrange for and provide, in addition to a ring side physician, emergency medical equipment and a certified EMT attendant to be present at ringside prior to the start of and throughout each contest. The physician must be present a minimum of two (2) hours prior to the start of the event. The ambulance and a minimum of one (1) EMT personnel must be onsite when the venue is open to the public. Ringside seating shall be provided for medical personnel by the promoter.

20-3.6. Participation of Suspended Boxer.

Any boxer suspended or serving a rest period must not participate in any event without commission approval.

20-3.7. Compulsory and Discretionary Eight Count; Three Knockdowns in One Round.

1. A compulsory count of eight (8) must be taken by every boxer who is knocked down by a punch and he/she must take the count whether reclining or standing.
2. The referee may declare a standing eight (8) count at any time.
3. In the interest of safeguarding the health and welfare of a boxer engaged in ring combat, three (3) knockdowns in any one round shall be regarded as a technical knockout and the referee shall halt a contest. The

referee is counseled that a man's condition may justify stopping a contest in less than three (3) knockdowns. The referee will exercise his/her judgment to determine whether or not any one of all such knockdowns shall be the results of decisive blows by the opponent. If in the referee's judgment the knockdowns have been indecisive and clearly with no injurious effect upon the boxer, the contest may be continued with the boxer's welfare always paramount.

20-3.8. Use of Drugs and Stimulants.

The Commission has the authority to require any participant to submit to tests for the presence of unauthorized substances, as listed, including but not limited to, the most recent prohibited list maintained by the World Anti-Doping Agency. The use of any drugs, alcohol or stimulants, or injections in any part of the body, either before or during a match, by or in behalf of any boxer is adequate grounds for revoking his/her license, as well as the license of the person administering the same.

20-3.9. Other Substances.

1. Substances such as Monsel's solution and other iron or bismuth compounds, collodion, silver nitrate, ammonia or smelling salts are prohibited. The use of such modalities will result in disqualification, suspension or fine of the boxer, manager and/or trainer. The Commission or the ringside physician may specify which substances may be used.

2. The use of excessive lubricant on the body, arms or face of a boxer is prohibited.

3. Only water shall be administered by seconds to a boxer between rounds. Honey, electrolyte solutions, glucose, sugar or any other substance mixed with water is prohibited.

20-3.10. Vision.

No license shall be issued to any applicant for a boxer's license whose vision is so poor as to cause any examining physician to recommend that no license be granted.

20-3.11. Head Injury.

A boxer's license may be denied to a boxer who has suffered cerebral hemorrhage or any other serious head or jaw injury.

20-3.12. Abdominal Guard.

All boxers must wear a foul-proof abdominal guard and cup which shall be examined and approved before all bouts by the Commission Representative.

20-3.13. Submission of Boxer's Record.

A boxer is required to submit to the Commission a true record of his/her performances.

20-3.14. Refreshment Containers.

No refreshments, drinks or food may be sold at any regulated event except in paper or plastic containers.

20-3.15. Examinations.

The Commission or Commission Representative may order an examination of boxers at any time for the purpose of determining whether such boxers are fit and qualified to engage in future matches or exhibitions.

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20-3.16. Maintaining Order.

Every promoter holding a permit to conduct a boxing match shall provide for suitable security, with at least one (1) commissioned police officer and based on the seating capacity for that particular event.

20-3.17. Boxer's Record; Suspension.

1. A boxer who sustains a succession of six (6) defeats or a series of knockouts or technical knockouts in any state or jurisdiction may be subject to licensure denial or suspension.
2. If a boxer is suspended in any other state, such suspension shall be in effect in this state.
3. The promoter shall be responsible for providing the Commission with full details of the boxer's record.

20-3.18. Determination of Physical Circumstances.

The Commission's policy is that a referee's competency is accepted, but the referee shall, at all times, avail himself/herself of the trained and expert judgment of a physician's greater knowledge of a boxer's well-being; and he/she should, at all times, feel free to call upon the physician to counsel him/her as to the advisability of permitting a boxer to continue or terminate a contest because of physical circumstances. The ringside physician may examine a boxer at any time he/she feels it necessary and may direct the referee to halt a contest if in his/her opinion the boxer is unable to continue.

20-3.19. Physician's Recommendations.

Physicians approved by the Commission are required to file recommendations on all boxers who reveal inadequate ability for further competition due to medically related concerns.

20-3.20. Examination and Suspension after Knockout.

- (A) Sixty (60) day suspension for a knockout "KO".
- (B) Thirty (30) day suspension for a technical knockout "TKO".
- (C) The Commission may require the contestant to submit a neurological examination by a neurologist, a CAT scan (CT), or MRI examination of the area(s) of injury to the Commission at least seventy-two (72) hours prior to being licensed as a contestant, when the contestant:
 - (1) Has lost three (3) bouts in a row by KO or TKO; or
 - (2) Has lost six (6) bouts in a row; or
 - (3) Has an extensive losing record.

SUBCHAPTER 4

LICENSES AND PERMITS FOR BOXING

20-4.1. General Requirement.

1. No person, club, corporation or association may be a participant in boxing bouts in the State of South Carolina without first having obtained a license from the State Athletic Commission.
2. Additionally, no promoter may hold or conduct boxing bouts without first having obtained a permit for the specific event.

20-4.2. Application.

1. Applications for licenses and permits as required herein shall be made under oath and upon forms prescribed by the Commission. The license application must include a photograph showing a frontal view of the applicant's

head and shoulders. The license application must be made at least one (1) week before a scheduled event, except as authorized by the Commission Designee.

2. Boxers who apply for a license shall include a statement of experience and medical history and a valid boxing federal identification (ID).

3. Every application made by a club, association, or corporation shall include the names and addresses of all officers, and/or partners.

20-4.3. Period of Validity.

Licenses for boxing are valid for one year, not to exceed one year, and will expire on December 31st of each calendar year.

20-4.4. Documents.

All papers and documents filed with the Commission shall be the property of the Commission.

20-4.5. Suspensions.

Promoters shall not permit any person under suspension to take part whatsoever as a participant or in arranging or conducting matches, or work during the period of suspension; however, a contestant who has been suspended because of a cut or knockout may serve as a second if he/she is properly licensed, or a promoter or matchmaker may arrange a bout which includes a suspended contestant if the contestant's term of suspension ends before the bout's scheduled date.

20-4.6. Sale or Transfer of License.

No license or permit may be sold or transferred.

20-4.7. Promoter Responsibility.

All promoters holding licenses and permits shall be absolutely responsible to the Commission for all matches held, given or conducted under such license and permit.

20-4.8. Permit Application and Fee.

1. Every promoter must have a current license to conduct, hold or give boxing matches and must apply to the Commission for a permit. The application for such permit must be in the Commission office at least fourteen (14) days before the scheduled date of the event. If the promoter does not meet such deadline, the Commission will not issue a permit until the promoter pays the mandatory fine required by law.

2. No permit may be issued unless the application includes:

- a. The names of all participants.
- b. Evidence that a policy of medical and hospital insurance satisfactory to the Commission covers every boxer.
- c. Proof acceptable to the Commission Representative of a surety bond in an amount not less than five-thousand dollars or certified funds sufficient to cover the total purse or fee for each scheduled contestant and official.
- d. Pays the required permit fee, which shall be nonrefundable.

3. Additionally, upon the request of the Commission or Commission Representative, each promoter shall provide the Commission with copies of every contract between boxers, managers and with the promoter covering all contestants in the match for which permit is made.

4. Promoters must pay to the Commission the higher amount of either five percent (5%) of the total gross admissions received at the event or a twenty-five (\$25.00) dollar minimum gate fee within thirty (30) days after the event. Failure to pay the required gate fee within the time specified herein will result in the promoter being

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assessed a two hundred fifty (\$250.00) dollar administrative fine, and an additional two hundred fifty (\$250.00) dollar fine every thirty (30) days thereafter up to a maximum amount of one thousand (\$1,000.00) dollars. An event permit shall not be issued to a promoter with an outstanding unpaid gate fee or fine. Promoters will be subject to disciplinary action by the Commission for any attempt to circumvent payment of the gate fee.

5. Promoters must pay to the Commission a sanctioning fee as determined by the Commission to cover the cost of inspections in the enforcement of compliance with this chapter and South Carolina Code of Laws Title 40 Chapter 81.

20-4.9. Passport (Boxers Fight Record).

The Commission may require all boxers to register for passports (Boxers Fight Record).

20-4.12. Refunds for License and Permit Fees.

Fees paid for licenses and permits shall not be refundable.

SUBCHAPTER 5

BOXERS

20-5.1. Physical Examination.

1. The Commission may require any boxer applying for a license to be examined by a physician or physicians.
2. The Commission may order examinations of boxers at any time for the purpose of determining whether such boxers are fit and qualified to engage in future events.

20-5.2. Age.

1. The minimum and maximum ages for professional boxing in South Carolina are eighteen to forty (18 -40) years old. The maximum age may be waived by the Commission designee for a specific contestant. A professional boxer petitioning for an age waiver must submit a complete application along with all medical records, official fight records and any other documentation required by the Commission to the Administrator at least thirty (30) days prior to the scheduled bout. A waiver to participate as an over-age contestant shall be valid for the duration of the current licensure period.

20-5.3. Boxer as Self-Manager.

Any boxer who has attained his/her eighteenth (18th) birthday and is not under contract to a manager can make his/her own matches, sign contracts, and handle his/her own affairs.

20-5.4. First Appearance; Proof of Age.

1. Any boxer making application for his/her first South Carolina license must provide positive proof of his/her age.
2. Unless positive proof of age is provided, the Commission shall not issue a license to the applicant.

20-5.5. Boxer-Manager Contract Forms.

All boxers with managers must have boxer-manager contract forms and their managers must be licensed with the Commission. One (1) copy of a completed, executed contract form shall be given to the manager, one to the boxer, and one copy shall be furnished to Commission upon its request.

20-5.6. Release from Contract.

Release of a boxer by a manager from a boxer-manager contract shall be in writing and shall be furnished to Commission upon its request.

20-5.7. Parties to Contract to be Licensed.

1. Both parties to a boxer-manager contract must be licensed by the State Athletic Commission or the contract shall not become effective.
2. The Commission may recognize contracts on file in cooperating states.

20-5.8. Club Contract.

No boxer shall participate in any bout without signing a promoter or club contract. If the boxer has a manager, the signatures of both the boxer and manager should appear on the club contract. A copy of such contract must be furnished to the Commission upon request.

20-5.9. Payment to Boxer as Exclusive Signer of Club Contract.

When a boxer exclusively signs the club contract for a bout, the promoter shall pay to him/her the full purse specified in the contract.

20-5.10. Failure to Appear for Weigh-In.

Any boxer who fails to appear for the official weigh-in within the time specified by the Commission shall be subject to disciplinary action as provided for by statute or these regulations.

20-5.11. Failure to Appear for Bout.

Any boxer who fails to appear for a bout shall be subject to disciplinary action as provided for by statute or these regulations.

20-5.12. Failure to Give Satisfactory Performance.

If a boxer, in the judgment of a Commission Representative and the Chief Ring Official, fails to give a satisfactory performance or demonstrates insufficient skills to safely compete as a professional boxer, the boxer may be suspended.

A boxer suspended for failure to give a satisfactory performance or insufficient skills may petition to the Commission for reinstatement.

20-5.13. Boxer with Suspended Manager.

1. A boxer whose manager has been suspended may continue boxing independently during the term of such suspension, signing all contracts for matches.
2. No payment of a boxer's earnings may be made by any licensed club to a manager under suspension but the purse in full shall be paid to the boxer.

20-5.14. Number of Rounds.

Boxers can be matched at four (4), six (6), eight (8), ten (10), or twelve (12) rounds. The Commission may limit the number of rounds at its discretion.

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20-5.15. Foul.

1. The following are fouls in boxing, and boxers committing any of these infractions are subject to penalty as the referee sees fit:

- a. Hitting below the belt;
- b. Hitting an opponent who is down or who is getting up after being down;
- c. Holding an opponent with one hand and hitting with the other;
- d. Holding or deliberately maintaining a clinch;
- e. Wrestling or kicking;
- f. Any unsportsmanlike trick or action causing injury to an opponent;
- g. Butting with the head or shoulder or using the knee;
- h. Hitting with the open glove, or with the butt of the hand, the wrist, or the elbow; all backhand blows;
- i. Roughing at the ropes;
- j. Use of the kidney punch, which consists of punching in the back or kidney area;
- k. Use of the rabbit punch, which is defined as punching to the back of the head or neck;
- l. Jabbing opponent's eyes with the thumb of the glove;
- m. The use of abusive language in the ring;
- n. Hitting on the break;
- o. Hitting after the bell has sounded ending the round;
- p. Intentionally spitting at an opponent or spectators.

20-5.16. Time Between Bouts.

For boxers there shall be an interval of seven (7) days between the dates of the bouts or for such time as shall be determined at the discretion of the Commission. There shall be a mandatory interval of thirty (30) days between bouts after a boxer's participation in any bout lasting ten or more rounds.

20-5.17. Inability to Perform Contract Due to Injuries or Illness.

Whenever a licensed contestant, because of injuries or illness, is unable to take part in a contest for which he/she is under a contract or bout agreement, he/she (or his/her manager) must immediately report the specific injury or illness to a Commission Representative. Contestants with an injury or illness which prevents participation in a contest shall serve a medical suspension. The contestant shall submit to an examination and receive written clearance for the specific injury or illness by a physician prior to the suspension being lifted.

20-5.18. Facial Hair and Jewelry.

All boxers must be clean and neat when they participate in ring contests. Facial hair shall be at the discretion of the Commission. All jewelry and/or piercing accessories are prohibited during competition.

20-5.19. Boxers from the Same Stable.

Any contest between two (2) boxers from the same stable may be held only with the approval of the Commission.

20-5.20. Disqualification of Boxer.

If a boxer persists in fouling, despite a referee's warning of clean sportsmanship, the referee shall have the right to disqualify said boxer.

20-5.21. Contest Stopped Prematurely.

When a boxing contest is stopped because of rain or other unavoidable circumstances and less than half of the scheduled number of rounds have been finished, the judges shall score the bout a draw. If, under the same circumstances, half or more of the scheduled number of rounds have been completed, the judges shall render a decision.

20-5.22. Resident License.

No professional boxer who is a legal resident of a State other than South Carolina may appear in any boxing contest unless such boxer has in his/her possession a current South Carolina boxing license and a current boxing license from his/her state of residence unless waived by the Commission. The Commission may also require such boxer to hold a Passport from the state of residence.

20-5.23. Examination Prior to Bout.

Any contestant scheduled to appear in any boxing contest, must be physically examined and cleared by a physician immediately prior to taking part in any bout.

20-5.24. Grounds for Suspension of License.

Any boxer holding a license may be suspended for arrest or conviction on a charge involving moral turpitude or for unbecoming conduct at any time or place reflecting discredit to boxing. Under similar circumstances, an application for a license or renewal thereof may be summarily rejected.

SUBCHAPTER 6

MANAGERS

20-6.1. General Qualifications.

1. A person with intent to be a manager must apply for a license.
2. A licensed manager must be of legal age to sign the required boxer-manager and/or club contract.

20-6.2. Working in Boxer's Corner.

Any licensed manager or trainer who works in the corner of a boxer with whom he/she has a contract need not obtain a second's license.

20-6.3. Signatory to Boxer-Manager Contract.

Any manager who signs a boxer-manager contract must renew his/her manager's license annually, and no later than within one month of the expiration date.

20-6.4. Manager's Percentage of Ring Earnings.

The manager shall be entitled to no more than thirty-three and one-third (33 1/3%) percent of the ring earnings of any boxer with whom he/she has a properly filed boxer-manager contract.

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20-6.5. Failure to Sign Club Contract.

Any manager who fails, by reason of neglect or indifference, to execute a club contract shall be subject to disciplinary action as provided for by statute or these regulations and such dereliction shall be grounds to void a boxer/manager contract.

20-6.6. Manager Under Suspension.

A manager under suspension shall not work in any boxer's corner or negotiate with any promoter or matchmaker for any boxer's services.

20-6.7. Number of Boxers in One Show; Limitation on Manager.

No manager shall be encouraged to have more than two (2) boxers engaged on the card of any boxing show.

20-6.8. Signatories to Club Contract.

The club contract must be signed personally by the manager or by the boxer if he/she has no manager.

20-6.9. Acceptance by Manager.

Any manager who agrees to accept a match for the services of a boxer through the medium of any written or telegraphic means of communication shall be held accountable for his/her actions as if accomplished in person by a club contract.

20-6.10. License for Promoter Deals.

An unlicensed manager shall not contract with any promoter or matchmaker.

20-6.11. License to Schedule Match.

An unlicensed person shall not contract to receive a portion of a contestant's bout earnings until issued a manager's license.

20-6.12. Manager Representing Manager.

If a licensed manager desired to represent another licensed manager in securing contests for a boxer, such manager must have in his/her possession a written agreement executed by both the manager and boxer whom he/she represents. This agreement must be filed with the Commission, which shall approve or disapprove recognition of such agreement.

20-6.13. Number of Managers Per Boxer.

1. A boxer cannot have more than one (1) manager without the expressed written approval of the Commission.
2. If a boxer has more than one (1) manager, all such managers should be on record with the Commission and the promoter must deal only with the licensed manager or managers so recorded.

20-6.14. Manager Attempting to Take Another Manager's Boxer.

Any licensed manager who wrongfully takes another licensed manager's boxer, as determined by the Commission, shall be subject to disciplinary action as provided for by statute or these regulations.

20-6.15. Transfer of Manager-Boxer Contract.

Contracts between a licensed manager and boxer are not transferable without filing a proper notice thereof with the Commission attested to by all of the principals.

20-6.16. Aid for Injured Boxer.

No manager or second shall attempt to render aid to a disabled boxer before the physician has had an opportunity to examine the boxer.

20-6.17. Grounds for Suspension of License.

Any manager holding a license may be suspended if arrested or convicted for a charge involving moral turpitude or for unbecoming conduct at any time or place reflecting discredit to boxing. Under similar circumstances, application for a license or a renewal may be summarily rejected.

20-6.18. Application for Boxing Manager's License.

1. Applications for a boxing manager's license shall contain a true and complete statement of all persons connected with the management. Any manager who gives incorrect information on any application may be suspended by the Commission.

2. Subsequent to the granting of any such license, an applicant shall submit any change at any time in the persons connected with the management to the Commission for written approval.

SUBCHAPTER 7

SECONDS

20-7.1. General Qualifications.

[Reserved]

20-7.2. Number Limitation.

Two (2) seconds and no more than three (3) shall work in any boxer's corner, of which, only two (2) may be in the ring at any one time.

20-7.3. Attire.

Seconds must wear clean, neat clothing.

20-7.4. Second Under Suspension.

A second under suspension shall not work in any boxer's corner.

20-7.5. Second Acting as Manager.

A second holding a second's license must obtain a manager's license to act as manager, or assist in any way in obtaining matches. If found guilty of such actions, he/she shall be suspended for a period of time as determined by the Commission.

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20-7.6. Second Disruption During Event Prohibited.

Seconds, trainers, and managers must not attempt to heckle, hinder, disrupt or otherwise annoy his/her contestant's opponent, officials, Commission Representatives, or other seconds during an event.

20-7.7. Grounds for Suspension of License.

Any second holding a license may be suspended if arrested or convicted for a charge involving moral turpitude or for unbecoming conduct at any time or place reflecting discredit to boxing. Under similar circumstances, application for a license or a renewal thereof may be summarily rejected.

20-7.8. Giving Incorrect Information on Application.

Any second who gives incorrect information on any application may be suspended by the Commission.

20-7.9. Aid to Injured or Disabled Boxer.

No second or manager shall attempt to render aid to a disabled boxer before the physician has had an opportunity to examine the boxer. In case of an open cut, a medical person or "cut person" may also enter the ring.

20-7.10. Termination of Boxer's Performance.

Any second may terminate the performance of the boxer he/she is serving either between rounds or during the progress of any boxing contest in which such boxer is a contestant.

SUBCHAPTER 8

BOXING REFEREES AND JUDGES

20-8.0. Requirements for License as Referee or Judge: Expiration and Renewal of License.

1. To qualify for a license as a referee or judge of boxing contests an applicant must:
 - a. Be at least twenty-one (21) years of age;
 - b. Not have been convicted of a felony or other crime involving moral turpitude;
 - c. Submit references from three (3) persons of his/her character and ability; and
 - d. Be certified and in good standing with the Association of Boxing Commissions (ABC).
2. In lieu of the examination and internship, the Commission may accept satisfactory evidence of equivalent qualifications possessed by an applicant who:
 - a. Is currently licensed in another state or country; or
 - b. Formerly held a South Carolina license which lapsed in good standing.
3. A person holding a current South Carolina license or who formerly held a South Carolina license which lapsed in good standing may be licensed by the Commission without examination or internship to perform an officiating function other than that for which he/she is or was licensed if the Commission determines that he/she is qualified to perform that function.
4. The Commission will determine when additional ring officials are needed and when licensing examinations for ring officials will be conducted.
5. Each license issued pursuant to this section is valid until December 31st of each year. An application with the proper fee for renewal must be submitted to the Commission by December 1st, of each year accompanied by the appropriate renewal fee. The renewal of a license is not automatic. The applicant's past performance and abilities may be considered in evaluating his/her application for renewal.

20-8.1. Selection and Assignment.

The Commission Representative shall select and assign boxing referees and judges. Judges and referees shall be compensated for their work by the promoter as an official in accordance with an official's fee schedule as set by the Commission. In the event of judge or referee travel requiring overnight accommodations, any further negotiations, arrangements, agreements or contracts concerning compensation for travel or lodging shall be the responsibility and concern of the promoter and the referee or judge.

20-8.2. Chief Ring Official.

The referee shall be the chief official of every boxing match and shall remain in the ring during the entire time of the contest.

20-8.3. Reporting for Duty; Number Per Show; Restrictions.

1. Referees must report for duty at least one (1) hour before the scheduled starting time of the show.
2. At least two (2) referees will be assigned for each show.
3. At least three (3) judges and one (1) alternate will be assigned for each show.
4. Referees must first report to their dressing room or other designated place where their blood pressure and pulse will be checked by the physician, then to ringside. All referees must stay at ringside when not officiating and will avoid conversation except with Commission officials.
5. A referee shall not judge or score any bout in which a participant is from that referee's or judge's camp or school, or is a student of that said referee or judge.

20-8.4. Physical Examination.

Referees must submit physicians' statements to the Commission Representative prior to license renewal.

20-8.5. Apparel.

Apparel required for boxing referees shall be a light colored shirt and dark trousers. The person designated as the Commission Representative or as the chief of officials may require specific colors and a bow tie.

20-8.6. Chief Second's Responsibility.

The referee shall, before starting a contest, ascertain from each participant the name of his/her chief second, and shall hold said chief second responsible for the conduct of his assistant seconds during the progress of the contest.

20-8.7. Mid-Ring Instructions.

The referee shall call participants together before each bout for final instructions, covering good sportsmanship and the eight-count, at which time each contestant shall be accompanied by his/her chief second only. The principals, after receiving instructions, shall shake hands and retire to their corners. Participants shall not again shake hands until the beginning of the last round.

20-8.8. Persons in Ring During Round.

No persons other than the participants and the referee may be in the ring during the progress of a round.

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20-8.9. Knockdown of Participant; Count.

1. When a participant has been knocked down, the referee shall order the opponent to go to the farthest neutral corner of the ring, pointing to the corner, and promptly pick up the count from timekeeper or other person who may have been designated as the counter for knockdowns.

2. The referee shall audibly announce the passing of time in increments of seconds and accompanying the count with motions of his/her arm, the downward motion indicating the end of each second.

3. Any contestant who is knocked down shall not be allowed to resume boxing until after the referee has finished the eight-count.

4. The participant may take this count either on the floor or standing if he/she has not been struck hard enough to keep him/her down.

5. Should the opponent fail to stay in the farthest neutral corner, the referee may cease counting until he/she has returned to it, and then go on with the count from the point at which it was interrupted.

20-8.10. Knockout of Participant; Count.

1. If the contestant taking the count is still down when the referee calls the count of "ten" the referee shall wave both arms to indicate that the contestant has been knocked out.

2. The referee's count is the official count.

20-8.11. End of Round Knockout.

When a round in any boxing contest, except the last round, terminates before a participant who has been knocked down shall have risen from the floor of the ring, the timekeeper's and referee's count will be continued, and, if the fallen participant fails to rise before the count of ten, he/she shall be considered to have lost the bout by a knockout in any round.

20-8.12. Touching Boxers; "Break".

The referee shall not touch the boxers, except on the failure of one or both to obey a command to "break" or when a boxer is tangled in the ropes.

20-8.13. Stopping a Bout.

1. The referee may, in his/her discretion, stop a bout to protect a badly beaten boxer. The referee may stop a contest if he/she considers it too one-sided. In cases where a boxer sustains a cut eye or any other injury which the referee feels may incapacitate the boxer, the referee may, at any time, call the physician into the ring for examination of the boxer. In such cases the referee shall be guided by the physician's advice.

2. If a boxer loses his/her mouth piece, the referee shall stop the fight and replace it. There shall be no penalty for the first such loss. If the referee determines that subsequent losses of the mouth piece are intentional, he/she may penalize the boxer one (1) point for each such occurrence.

3. If an accidental head-butt disables a boxer in the first or second round, the referee shall declare the bout "no contest". If such head-butt occurs after the second round, the referee will award the decision to the boxer with the most points at the end of the preceding round.

20-8.14. Failure to Answer Bell.

If any boxer fails to answer the bell between rounds, the referee shall declare his/her opponent the winner by a TKO in the round coming up. The judges shall so indicate on their scorecards.

20-8.15. Inspection of Gloves.

The referee shall inspect the gloves and make sure that no foreign substances have been applied to either the gloves or any part of the boxer's head or body to the detriment of an opponent.

20-8.16. Knocked Down Construed.

1. A boxer shall be considered by the referee to be knocked down when any part of his/her body other than his/her feet is on the ring floor, he/she is hanging helplessly over the ropes, or rising from a "down" position.

2. A boxer hanging over the ropes is not officially "down" until so pronounced by the referee, who can count the boxer out either on the ropes or on the floor.

3. If a boxer who is down is hit, the offending boxer shall be penalized one (1) point. If such hit causes a knockout, the offending boxer shall be disqualified.

20-8.17. Failure to Compete or Foul.

1. The bout shall be stopped in any case where the referee decides that the participants are not honestly competing or are fouling.

2. A participant earns nothing and shall not be paid for an exhibition or contest in which there is stalling, faking or dishonesty or collusion.

3. The Commission Representative shall determine the merits of any such contest and take whatever action is considered proper.

4. In any such case, the Commission Representative may order the license of the offender suspended and initiate a complaint for investigation and potential further disciplinary action by the Commission.

20-8.18. Ten Point Must Scoring System.

1. The ten point must system of scoring shall govern all decisions.

2. At the conclusion of each round, the judges must give their scorecards to the scorekeeper. The boxer who has the most points on each scorecard is the winner. The scorekeeper shall maintain an accumulative total for each participant. The decision of the majority of the judges shall be final.

a. If the boxer is slightly superior to his/her opponent in such round, ten (10) points must be scored for such boxer, and the score of nine (9) points marked down for his/her opponent.

b. If a boxer wins a round decisively, ten (10) points should be scored for such boxer, and the score of eight (8) points marked down on his/her opponent.

c. If a boxer wins a round decisively with a knockdown or knockdowns, ten (10) points should be scored for such a boxer, and the score of seven (7) points marked down for his/her opponent.

3. If a referee penalizes a boxer for a foul, the referee shall notify the judges; and, the announcer shall announce it to the public at the end of the round.

4. The referee may take points away from a boxer because of improper use of mouth piece.

5. If the tallied scorecards do not establish a winner the decision shall be declared a draw.

6. The referee or other designee shall collect the scorecards at the end of each round and submit them to the scorekeeper. At the end of the contest, the scorekeeper shall determine the total for each judge scoring. The scorekeeper shall give that total to the Commission Representative. After verifying the totals, the Commission Representative shall give the totals to the announcer who shall announce the decision of the judges.

7. Decisions shall be given in all contests.

20-8.19. Boxer Fallen or Knocked Through Ropes; Return Unassisted.

1. If a participant has been knocked out or has fallen out of the ring during a contest, the referee shall order the other boxer to a neutral corner at once. The referee shall inform the timekeeper to suspend time until directed to resume time from the point of interruption for the duration of the round.

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2. The participant who has fallen or has been knocked out of the ring must return to the ring unassisted by his/her seconds. If he/she is unable to do so within twenty (20) seconds, the timekeeper shall notify the referee who shall begin the official count.

20-8.20. No Foul Rule.

No participant may be awarded a contest on a claim of a low-blow foul nor may a participant lose by reason of a low-blow foul. Participants are presumed to be properly protected by safety equipment.

20-8.21. Verbal or Physical Abuse of Referee.

Any licensee who verbally or physically abuses a referee may be indefinitely suspended by the Commission.

20-8.22. Low Blow; Referee's Notice.

Whenever the referee observes a blow delivered below the belt, the referee shall step between the boxers and with his/her free hand make a sweeping motion upwards from the floor as a warning to the offender to raise his/her punches and to refrain from delivering any other low blows.

20-8.23. Knocked Out Boxer; Treatment by Physician.

A boxer who is knocked out must not be touched or moved by anyone except with the approval of the physician. The physician shall determine the methods of resuscitation.

20-8.24. Persistent Fouling.

Persistent fouling by a boxer in spite of the referee's warnings, and in violation of clean sportsmanship, shall result in disqualification of the offender, suspension, and potential further disciplinary action by the Commission.

20-8.25. Review of Referee Error by Commission.

The Commission may in its discretion declare a bout a "no contest", if in its judgment a noticeable error affecting the outcome of the bout has been committed by the referee.

20-8.26. Judges; Majority Vote.

The Commission Representative shall designate three (3) judges. The judges shall render a decision in any boxing contest by a majority vote. The decision of the judges shall be final.

20-8.27. Substitution of Referee or Judge.

1. In the event a referee or judge becomes unable to continue his/her duties during a boxing contest, time out shall be called and another official shall be immediately assigned by the Commission Representative or chief of officials.

2. It shall be mandatory for such substituted judge to continue scoring on the scorecard used by the incapacitated judge and such scorecard shall be the official scorecard in the determination of a decision at the conclusion of the boxing contest.

3. The substituted judge must resume the round from the time of his/her substitution for the incapacitated judge.

SUBCHAPTER 9

COMMISSION REPRESENTATIVE

20-9.1. General Supervisory Duties.

The Commission Representative shall be in charge of shows for the purpose of:

1. Enforcing regulations issued by the Commission, which include but are not limited to:
 - a. Licensing contestants and all other participants according to the requirements of the rules of this Chapter.
 - b. Collecting unpaid promoter's fees.
 - c. Seeing that contestants and officials are paid.
 - d. Collecting all gate fees and verifying said fees on a Commission-approved Gate Fee Verification Form.
 - e. Completing his/her report and forwarding the report to the Commission within ten (10) days of each event.
 - f. Depositing the collected fees within forty eight (48) hours of receipt, excluding Saturday, Sunday, and bank holidays, into an account established for the Athletic Commission. The Administrator will deposit the collected fees in the South Carolina Athletic Commission bank account.

20-9.2. Verbal or Physical Abuse of Commissioner or Commission Representative.

Verbal or physical abuse of any Commissioner, the Commission Representative or any person representing the Commission shall be a violation of the act establishing this Commission and shall be subject to the penalties authorized in Sections 40-1-10 *et. seq.*, 40-81-120, and 40-81-130 of the South Carolina Code of Laws.

20-9.3. Attendance at Weigh-In.

A Commission Representative must attend all weigh-ins, as well as the performances.

20-9.4. Receipt Book.

1. If a Commission Representative has been furnished a receipt book, then he/she shall carry it with him/her at all times during an event.
2. Receipts are made out in triplicate; one copy for the person paying the fee, one copy to forward to the Commission office together with his/her report, and the third copy to remain in the book.
3. When each receipt book is completed, the Commission Representative must return it to the office immediately.

20-9.5. Forwarding of Scorecards.

The Commission Representative at boxing shows must obtain the judges' scorecards and forward them to the Commission upon request in addition to the other required reports.

20-9.6. Check of Substitute Boxers.

When substitutions occur in any boxing show, the Commission Representative must thoroughly check the substitute's record, including his/her last five (5) bouts, license, suspension status, name of his/her manager, if any, and any other pertinent information. Promoters must submit contestants' names, addresses, and date of birth, and the required information must be submitted no later than seventy-two (72) hours prior to the start of the event to the Commission Representative. The Commission Representative must then forward any event substitution to the Commission Designee for approval. Any additional administrative cost incurred due to said substitutions will be paid by the promoter.

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20-9.7. Check of Seconds' Compliance with Rules.

The Commission Representative shall see that all seconds present a neat appearance according to the rules of this Chapter.

20-9.8. Assure Enforcement of Regulations.

The Commission Representative shall see that all necessary equipment is provided, that all participants are present and ready on time, that the seconds are properly instructed in their duties, and that all regulations pertaining to the proper conduct of the bout are enforced.

20-9.9. Report of Injuries.

Commission representatives shall make an inquiry of all boxers after their bouts, in cooperation with the physicians, and shall report any injuries to the Commission within seventy-two (72) hours.

20-9.10. Forwarding of Receipts.

Commission representatives shall maintain all receipts from receipt books in their custody promptly after the conduct of any show to which they are assigned.

SUBCHAPTER 10

ANNOUNCERS

20-10.1. Designation; Approval; License.

Announcers may be designated by the promoters with the approval of the Commission Representative. Announcers must be licensed by the Commission.

20-10.2. Authorization to Announce.

Announcers are forbidden to make any announcement whatsoever except as authorized to do so by the promoter with the consent of the Commission Representative at the ringside.

20-10.3. Announcement of Contestants' Names and Weights.

After contestants and their chief seconds are in the ring, the boxing announcer shall announce the names of the contestants, their correct weights, and other matters as may be directed by the Commission Representative.

20-10.4. Announcement of Contest Results.

Boxing announcers shall announce the judges' decisions at the end of contests and in the event of knockouts at the time of same and the round of occurrence.

20-10.5. Neutrality.

1. Announcers must not in any way by word or action attempt to show any partisanship inside or outside the ring.
2. Announcers must remain seated in place and be silent except when making official announcements.
3. Announcers shall not use foul, abusive, or derogatory language toward a contestant or any person attending the event.

20-10.6. Introducing Suspended Person.

1. Boxing announcers must not at any time introduce from any ring any boxer or other person who is under suspension.

SUBCHAPTER 11

TIMEKEEPERS

20-11.1. Approval and License.

Timekeepers shall be approved and licensed by the Commission.

20-11.2. Stop-Watch.

A timekeeper shall have an accurate stop-watch approved by the Commission Representative.

20-11.3. Time of Round; Rest Period.

1. Each round of boxing shall be three (3) minutes unless approved in advance by the Commission representative. However, in the event of a knockdown near the end of a round, the round shall continue until the official count has ended.

2. Each rest period between rounds shall be one (1) minute.

20-11.4. Warning Signal.

The timekeeper shall give a warning of ten (10) seconds before the beginning of each round by sounding a signal.

20-11.5. Termination Before Scheduled Limit.

In the event a boxing contest terminates before the scheduled limit of rounds, the timekeeper shall inform the announcer of the exact duration of the contest.

20-11.6. Location Near Bell.

A timekeeper shall be seated close to the bell at ringside. Adequate space must be provided to allow the timekeeper complete freedom of motion.

20-11.7. Signals During Rounds.

Except for the official ten-second signal, a timekeeper must not give any signal or information on the duration of any round in progress in any contest.

20-11.8. Termination Between Rounds.

1. In the event a boxing bout terminates between rounds by decision of the referee or at the request of a corner, the timekeeper shall sound the bell as a signal for the next round.

2. The contest shall then be considered as having terminated in the round for which the bell was sounded and likewise the referee shall be considered to have counted "ten" (10) as in the case of a knockout.

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20-11.9. Count for Knockdowns.

The timekeeper may be designated by the referee to initiate the count in the event of a knockdown.

SUBCHAPTER 12

PHYSICIANS

20-12.1. Approval and Assignment.

Physicians shall be arranged for by the promoter from an approved list provided by the Commission. If a promoter requests approval of a physician not on the list, the Commission or its designee may approve said physician on a case-by-case basis.

20-12.2. Examination of Boxers.

Physicians assigned to boxing shows must perform thorough pre- and post-fight physicals on the contestants on the day of the event.

20-12.3. Position at Ringside.

1. Physicians shall sit at the immediate ringside at all boxing shows.
2. No boxing bout or exhibition shall be allowed to proceed unless the physician is in his/her seat.
3. The physician shall not leave until after the final bout or exhibition.
4. The physician shall be prepared to assist if any serious emergency arises and shall render temporary or emergency treatment for cuts or other injuries sustained by the participants.
5. The ringside physician may examine a boxer at any time he/she feels it necessary and may direct the referee to halt a contest if in his/her opinion either contestant is unable to continue.

20-12.4. Completion of Injury Form and Report.

Physicians must fill out and return to the Commission Representative a printed injury form for every contestant immediately after a boxing event. These forms shall be maintained by the Commission Representative.

20-12.5. Unfit Participant.

Physicians must rule off the card any boxer who is found physically unfit or who appears to be under the influence of an unauthorized substance at the weigh-in or pre-fight physical.

SUBCHAPTER 13

TELEVISION, MOVING PICTURE, RADIO

20-13.1. Commission Fee.

1. Every person, club, corporation, organization or association who shall hold any boxing, wrestling, kick boxing (full contact karate) or sparring exhibition or performance in this State shall pay to the Commission ten percent of the gross receipts received by reason of the lease or sale of television, moving picture or radio rights in connection with any such exhibition or performance.
2. The Commission may by unanimous vote negotiate for a lesser amount.

20-13.2. Forms.

Special forms to accompany the payment of the television fee shall be provided by the Commission to promoters whose shows are televised.

20-13.3. Copy of Agreement Furnished to Commission.

The Commission must be furnished by the promoter with true copies, properly notarized, of any and all agreements between promoters and television, moving picture or radio sponsors, stations or companies.

20-13.4. Time for Payment.

The television fee must be paid the same night of a show unless arrangements are made at least five days before the event. Such arrangements must be in writing.

20-13.5. Closed Circuit Television.

1. Any person who charges and receives an admission fee for exhibiting via closed circuit television any boxing or sparring match, including kick boxing (full contact karate), or wrestling exhibitions must obtain from the Athletic Commission an annual license. Application for an annual license must be on a form provided by, or acceptable to, the Commission, and accompanied by a Fifty Dollar (\$50.00) license fee.

2. Additionally, such person must apply to the Commission for a permit for each location at which any such telecast will be shown at least two weeks prior to such event. If the promoter does not meet such deadline, the Commission will not issue a permit until the promoter pays the mandatory fine required by law. If additional locations for telecast showings are arranged after the permit application has been sent to the Commission there shall be no penalty for such late arrangement provided the Commission is notified within twenty four hours of such arrangement. Each such notification must be accompanied by the permit fee described below:

a. Each application for a permit must be accompanied by Fifty Dollars (\$50.00) in certified funds for each location at which the event will be telecast. Fees for locations that are arranged after the permit has been submitted must be sent to the Commission within twenty four hours after the arrangement has been made.

b. The promoter may elect to pay a permit fee of One Thousand Dollars (\$1,000.00) at the time the permit application is filed in lieu of Fifty Dollars (\$50.00) for each location. The promoter must notify the Commission of each location within twenty four hours of the time such location has been contracted to show the telecast or will receive the mandatory fine required by law.

SUBCHAPTER 14

INSURANCE FOR BOXERS

20-14.1. Proof of Insurance.

1. Each licensed promoter shall be required to submit evidence of a policy of medical and hospital insurance satisfactory to the Commission at the time application is made to the Commission for a permit.

2. The promoter must provide proof that premiums have been paid by certified funds.

20-14.2. Coverage.

1. Insurance will cover boxers for medical, surgical, and hospital care in amounts to be designated by the Commission.

2. Each licensed promoter must have medical, hospitalization, surgical and life insurance in the amount of Ten Thousand Dollars (\$10,000.00) in case of injury and Ten Thousand Dollars (\$10,000.00) in case of a death.

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SUBCHAPTER 17

PROMOTERS

20-17.1. General Responsibility.

A licensed promoter will be held responsible for any failure in adhering to the rules and regulations of the Commission. The Commission may at its discretion video or require the promoter to furnish videos of the event to the Commission. The promoter is responsible for properly identifying all contestants and for preventing mismatched contests.

20-17.2. Intermissions.

All events are limited to one (1) half-time intermission and one (1) additional intermission with the prior approval of the Commission Representative, not including intermissions for medical emergencies. Promoters shall not permit intermissions at boxing shows to exceed fifteen (15) minutes, with the exception of medical emergencies.

20-17.3. Persons Unlicensed or Under Suspension.

Promoters and their matchmakers shall not permit any person unlicensed or under suspension to take part in a sanctioned event.

20-17.4. Grounds for Suspension of License.

Any promoter holding a license may be suspended for a conviction of a felony or a crime involving moral turpitude or for unbecoming conduct at any time or place reflecting discredit to boxing.

20-17.5. Maintenance of Order; Responsibility.

1. Promoters will be held responsible for maintaining order. Any person who is intoxicated, abusive or disorderly in conduct, to the annoyance of surrounding spectators, may be ejected.

2. Promoters must supply security with a minimum of one Commissioned police officer based upon the seating capacity for the particular event so that order and security may be maintained and all laws and regulations enforced.

20-17.6. Minimum/Maximum Schedule of Rounds per Program.

Promoters shall not schedule less than twenty-one (21) or more than sixty (60) rounds of boxing on one program.

20-17.7. Time of Final Bout.

1. The final bout shall not end later than 11:59 P.M., unless approved by the Commission Representative.

2. If the semifinal or other advertised bouts have not been held by 10 P.M., they shall be held after the main event bout.

20-17.8. Filing of Boxing Contracts; Secret Agreements.

1. Upon request of the Commission or Commission Representative copies of all boxing contracts between or among any participants must be filed with the Commission at the designated time before the event.

2. The making of secret agreements contrary to the terms of the filed contracts is prohibited under penalty of suspension of all parties thereto.

20-17.9. Nonprofit and Charitable Events.

Events sponsored, promoted or conducted by nonprofit and/or charitable organizations shall be subject to all the provisions of these rules and regulations

20-17.10. Posting of Surety Bond or Certified Check.

Licensed promoters shall post with the Commission a surety bond in a minimum amount of Five Thousand Dollars (\$5,000.00), or certified funds sufficient to cover the total purse or fee for each scheduled contestant and official.

20-17.11. Promoter Participating as a Contestant.

No promoter shall participate as a contestant in any event in which the promoter is involved as a promoter or a matchmaker.

SUBCHAPTER 18

MATCHMAKERS

20-18.1. Observance of Rules.

Matchmakers must observe all the rules and requirements with respect to weight agreements, weighing-in, and the proper execution and filing of contracts and advance notices. The matchmaker is responsible for properly identifying all contestants.

20-18.2. Uneven Matches.

Matchmakers and promoters may be held responsible if they make matches in which one of the principals is outclassed or mismatched.

20-18.3. Dealings with Persons Unlicensed or Under Suspension.

Matchmakers shall not permit any person unlicensed or under suspension to take any part whatsoever in any match.

20-18.4. Grounds for Suspension of License.

Any event participant holding a license may be suspended if arrested or convicted for a charge involving moral turpitude or for unbecoming conduct at any time or place reflecting discredit to boxing. Under similar circumstances, application for a license or a renewal may be denied.

20-18.5. Submission of Names and Addresses of Contestants.

Contestants names, aliases, addresses, and date of birth must be submitted to the Commission Representative no later than seventy-two (72) hours prior to the start of the event.

20-18.6. Matchmaker Participating as a Contestant.

No matchmaker shall participate as a contestant in any event in which he/she is involved as a matchmaker.

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SUBCHAPTER 19

SPARRING AND CHARITY EVENTS

20-19.1. Fee.

Charity events shall be subject to all rules and regulations.

SUBCHAPTER 20

FEMALE BOXERS

20-20.1. Female Boxers.

(Same rules as for male boxers plus the following)

1. No applicant shall be contracted for or engage in a contest between male and female.
2. Contests will be scheduled for no more than ten (10) rounds of up to three (3) minutes' duration with any lesser number of rounds or shorter duration at the discretion of the Commission.
3. Breast protection must be used in lieu of a foul proof abdominal guard.
4. Hair must be secured in a manner which will not interfere with the vision or safety of either contestant.
5. Each contestant will provide herself with two (2) uniforms consisting of contrasting color, body shirt, blouse and shorts.
6. Female fighters must submit to a Commission administered pregnancy test reviewed by the ringside physician on the day of the scheduled fight for a mandatory negative result.
7. Promoters will provide adequate separate dressing rooms.
8. No use of cosmetics. Absolutely no body grease, gels, balms or lotions may be applied. Vaseline may be applied to the facial area at cage side or ringside in the presence of an inspector, referee, or a person designated by the Commission.

SUBCHAPTER 21

HEARINGS AND SUBPOENA OF WITNESSES

20-21.1. Investigations and Hearings Held by Commission.

1. A designated representative of the Commission may make investigations. The Commission may hold hearings and issue subpoenas to compel the attendance of witnesses.
2. The Commission also may order production of books, papers, reports, or records needed for any hearing.
3. When the hearing takes place, any Commissioner may administer oaths to and examine any witnesses for the purpose of clarifying the questions for which the hearing was called.

20-21.2. Disciplinary Action.

Any person or entity required by law to be licensed by this Commission shall be subject to disciplinary action for any violation of these regulations or order of the Commission. Upon the hearing and its determination of just cause existing, the Commission may, in its discretion, impose civil penalty, suspension or revocation of a license held. Any such violation shall also constitute grounds for the Commission's refusal to renew any license.

SUBCHAPTER 22

KICK BOXING (FULL CONTACT KARATE)

20-22.1. Conduct of Kick Boxing (Full Contact Karate) Events.

1. All kick boxing (full contact karate) events shall be held under the rules and regulations in effect for the Professional Karate Association, the International Sport Karate Association, or such other professional organization as the Commission approves, except where those rules and regulations conflict with South Carolina law, rules or regulations, in which case South Carolina law, rules or regulations shall apply, however, there shall be an interval of at least seven (7) days between bouts or for such time as shall be determined at the discretion of the Commission.

2. The Commission may require a kick boxer or an official to be given a physical examination and may take such disciplinary action as authorized by law.

20-22.2. Licenses and Permits--General Requirements.

1. No person, club, corporation or association may be a participant in kick boxing (full contact karate) bouts in the State of South Carolina without first having obtained a license from the State Athletic Commission.

2. No promoter may hold or conduct kick boxing (full contact karate) bouts without first having obtained a permit for the specific event.

20-22.3. Application.

1. Applications for licenses and permits as required herein shall be made upon forms prescribed by the Commission, made under oath, and contain a photograph depicting a frontal view of the applicant's head and shoulders.

2. Kick boxers who apply for a license shall include a statement of experience and medical history and a valid license from the applicant's home state if other than South Carolina.

3. Every application made by a club, association, or corporation shall include the names and addresses of all officers, and/or partners.

20-22.4. Period of Validity.

Licenses are valid for a period not to exceed one year and will expire on December 31st of each calendar year.

20-22.5. Documents.

All papers and documents filed with the Commission shall be the property of the Commission.

20-22.6. Suspensions.

Promoters shall not permit any person under suspension to take part whatsoever as a participant or in arranging or conducting matches, or work during the period of suspension.

20-22.7. Sale or Transfer of License.

No license or permit may be sold or transferred.

20-22.8. Promoter Responsibility.

1. All promoters holding licenses and permits shall be absolutely responsible to the Commission for all matches held, given or conducted under such license and permit.

2. No promoter shall participate as a contestant in any show in which he/she is involved as a promoter or matchmaker. The promoter is responsible for properly identifying all contestants. All promoters holding licenses and permits shall be absolutely responsible to the Commission for all matches or exhibitions held, given or conducted under such license and permit.

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20-22.10. Passport.

The Commission may require all kick boxers to register for passports.

20-22.13. Refunds for License and Permit Fees.

Fees paid for licenses and permits shall not be refundable.

20-22.14. Amateur Kick Boxing (Full Contact Karate).

The SC Athletic Commission does not regulate amateur kick boxing. 20-22.15. Amateur Kick Boxing in Conjunction with Professional Contests.

No amateur kick boxing contests shall be conducted in connection with any professional event, and no amateur kick boxer shall appear on a professional card, unless the event or card is held under the jurisdiction of the Professional Karate Association.

20-22.16. Non-Profit and Charitable Events.

See Section 20-17.9.

SUBCHAPTER 23

WRESTLING

20-23.1. Professional Wrestling Exhibitions and Entertainment.

All professional wrestling performances are exhibitions and entertainment, and are not contests.

20-23.2. Licenses and Permits--General Requirements.

1. No person, club, corporation or association may be a participant in wrestling bouts in the State of South Carolina without first having obtained a license from the State Athletic Commission.

2. Additionally, no promoter may hold or conduct wrestling bouts without first having obtained a permit from the Commission.

20-23.3. Application.

1. Applications for licenses and permits as required herein shall be made upon forms prescribed by the Commission, made under oath, and contain a picture ID depicting a frontal view of the applicant's head and shoulders.

2. Wrestlers who apply for a license shall include medical history.

3. Every application made by a club, association, or corporation shall include the names and addresses of all officers and/or partners.

20-23.4. Period of Validity.

Licenses are valid for a period not to exceed one year and will expire on December 31st of each calendar year.

20-23.5. Documents.

All papers and documents filed with the Commission shall be the property of the Commission.

20-23.6. Suspensions.

Promoters shall not permit any person under suspension to take any part whatsoever as a participant or in arranging or conducting matches, or work during the period of suspension.

20-23.7. Sale or Transfer of License.

No license or permit may be sold or transferred.

20-23.8. Promoter Responsibility.

All promoters holding licenses and permits shall be absolutely responsible to the Commission for all events held, given or conducted under such license and permit.

20-23.9. Permit Applications and Fees.

1. Every promoter must have a current license to conduct, hold or give wrestling matches or exhibitions and must secure a permit from the Commission before conducting any match or exhibition.

2. Permits for Single Events

a. Application for single wrestling event permits must be in the Commission office at least fourteen (14) days before the event. If the promoter does not meet such deadline, the Commission will not issue a permit until the promoter pays the mandatory fine required by law. No permit will be issued unless the applicant:

- (1) Provides the names and addresses of all anticipated participants and of the event location;
- (2) Pays the required permit fee.

b. Promoters must pay to the Commission the higher amount of either five percent (5%) of the total admissions to the event or a twenty five (\$25.00) dollar minimum within thirty (30) days after the event. Failure to pay the required gate fees within the time specified herein will result in the promoter being assessed a two hundred fifty (\$250.00) dollar administrative fine, and an additional two hundred fifty (\$250.00) dollar fine every thirty (30) days thereafter up to a maximum amount of one thousand (\$1,000.00) dollars. An event permit shall not be issued to a promoter with an outstanding unpaid gate fee or fine. Promoters will be subject to disciplinary action by the Commission for any attempt to circumvent payment of the gate fee.

c. Additionally, the Commission may require:

- (1) Evidence that a policy of medical and hospital insurance satisfactory to the Commission covers every wrestler;
- (2) The Commission may issue special permits to promoters holding multiple events during a given calendar year, upon the promoter's satisfaction of special permit requirements and fee terms set by the Commission.

20-23.12. Refunds for License and Permit Fees.

Fees paid for licenses and permits shall not be refundable.

20-23.13. Additional Rules and Regulations.

1. Promoter's Responsibility. Each promoter of a professional wrestling event shall be responsible to the Commission for its employees and agents and their compliance with the statutes and regulations of the Commission.

2. Duties of Licenses. It shall be the duty of the promoter to comply with all of the statutes and regulations adopted by the Commission. There shall be no abuse of any Commission official at any time. The Commission shall have jurisdiction to hear complaints concerning any licensee. The Commission's decision may be appealed to a court of competent jurisdiction in accordance with the Administrative Procedures Act.

3. Age Limitations. No wrestler's license shall be issued to any person under the age of eighteen (18).

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4. Physical examination of Wrestlers. Any wrestler applying for a license or annual renewal thereof shall furnish a certificate of a physician duly licensed to practice medicine in any state on a form approved by the Commission. The Commission may order the examination of any wrestler at any time for the purpose of determining whether such wrestler is fit and qualified to engage in wrestling within the State of South Carolina.

5. Safety. Wrestling events to which the public is admitted shall take place only in such buildings or stadiums as are in compliance with all applicable health, fire and safety regulations. The promoter shall insure that provisions are made for reasonable security arrangements and personnel for the orderly conduct of the matches and spectators.

6. There must be a six (6) foot buffer zone between the wrestling ring and the spectators.

7. Wrestlers must not have any hostile physical or sexual contact with spectators.

8. Wrestlers must not swing or throw objects outside the ring and buffer zone, or at spectators.

9. Wrestlers must not run through the crowd or cross the buffer zone for any purpose except to go to or from the dressing room.

10. Wrestlers must not deliberately cut themselves or others, or otherwise draw blood.

11. Wrestlers must not use profanity or foul language during a match.

12. The referee, Commissioners, or the Commission Representative present may stop the bout immediately for a violation of these rules. The Commission may proceed against violators' licenses or prosecute them as provided for by law.

20-23.14. Amateur Wrestling.

The SC Athletic Commission does not regulate amateur wrestling.

20-23.15. Amateur Wrestling in Connection with Professional Events.

No amateur wrestling events may be held in connection with any professional event or exhibit.

20-23.16. Nonprofit and Charitable Events.

See Section 20-17.10.

SUBCHAPTER 24

WAIVER OF RULES

20-24.1. Waiver of Rules.

When a championship event is held under the jurisdiction of a nationally recognized organization, the Commission may, by majority vote of those present at a meeting with a quorum, waive any regulation.

20-24.2. Denial of License or Permit.

If an applicant for a license or permit has been convicted on a charge of moral turpitude or for unbecoming conduct at any time or place reflecting discredit to kick-boxing or wrestling, the Commission may decline to issue such license or permit.

20-24.3. Athletic Contests with Animals.

The Commission will not sanction events involving animals, other than human beings, nor issue permits for events in which they participate. (See South Carolina Code of Laws Section 16-27-10 *et seq.*, The Animal Fighting and Baiting Act)

20-24.4. When No Regulations Exist.

When an application for a permit is received and no regulations exist for that type of event, the Commission may:

1. Deny the permit
2. Designate that regulation for a related combative art be used
3. Designate that acceptance of regulations of a licensed school be used, unless they conflict with the State's laws and regulations.

20-24.5. Verbal or Physical Abuse of Commission Representatives or Officials is Forbidden.

Verbal or physical abuse of any Commissioner, the Commission Representative or any person representing the Commission shall be a violation of the act establishing this Commission and shall be subject to the penalties as regulated by the SC Athletic Commission.

20-24.6. Blood Borne Pathogens Exposure Control Plan.

All promoters must comply with Section 29 CFR 1910.1030 of OSHA Bloodborne Pathogen Standards. The State Athletic Commission may issue minimum guidelines.

SUBCHAPTER 25

OFF THE STREET BOXING

20-25.1. Off the Street Boxing.

Participants and Officials must comply with the Rules and Regulations for regular boxing events with the following exceptions and/or additional rules:

1. Each bout is limited to three (3) one-minute rounds.
2. The corner men must use clean towels for each bout.
3. No boxer shall be permitted to perform in any contest without wearing a form-fitting mouthpiece. It is suggested that each boxer have a spare mouthpiece.
4. No boxer shall participate in more than four (4) such bouts in the same calendar day, nor on successive calendar days without specific approval of the duly authorized Commission Representative. The ringside physician must check and record a boxer's blood pressure prior to each fight.
5. No person who has participated in more than five (5) Off The Street Boxing events in one calendar year shall participate in an Off The Street Boxing Tournament.
6. No person who has participated in amateur or professional boxing or kick-boxing, including trainers and sparring partners, shall enter an Off The Street Boxing Tournament.
7. Winning a prize in an Off The Street Boxing Event does not, in itself, make the winner a professional within the meaning of these regulations.
8. If a promoter cannot provide entrants' names two (2) weeks before the event, the promoter may submit the participants' names upon receipt. These participants are to apply for licenses upon registering for the contest.
9. Weight classes shall be as follows:
 - A. Class I: 130--152 pounds;
 - B. Class II: 153--175 pounds;
 - C. Class III: 176--199 pounds;
 - D. Class IV: Super heavyweight--over 200 pounds
10. Gloves of minimum weight of sixteen (16) ounces, to be provided by the promoter, are required.
11. Kicking is not permitted in Off The Street Boxing.
12. All equipment must be inspected and approved by the Commission Representative. All contestants must wear Commission-approved headgear.

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13. Each licensed promoter must have medical, hospitalization, surgical and life insurance in the amount of Ten Thousand Dollars (\$10,000.00) in a case of injury and Ten Thousand Dollars (\$10,000.00) in case of a death.

14. No Off The Street Boxing Tournament shall be longer than two (2) consecutive twenty-four (24) hour periods.

SUBCHAPTER 27

MIXED MARTIAL ARTS

20-27.01. Definitions.

(A) Brazilian jiu-jitsu: Also known as "Gracie Jiu-Jitsu", is a martial art developed in Brazil by the Gracie family during the mid-20th century. Originally based on the Japanese martial art of judo as it existed before WW II, it has since developed into an independent system with a major emphasis on ground fighting and grappling. These techniques may be used in mixed martial arts events.

(B) Cage: A fenced enclosure in which some promotional organizations hold mixed martial arts competition. A fenced enclosure may have four (4) but not more than eight (8) sides.

(C) Choke: A submission technique which restricts blood flow in the carotid arteries, resulting in a competitor either tapping-out or losing consciousness. Some of the most frequently employed chokes are the guillotine choke, rear-naked choke, leg triangle choke and the arm triangle choke.

(D) Fish-hooking: The action of hooking (grasping) and pulling the inside of an opponent's cheek so as to control his/her head movement. This is illegal.

(E) Exhibition: Means an occurrence in which the participant shows, displays, or performs without striving to win. Exhibitions are not allowed within the confines of a mixed martial arts event sanctioned by the SC Athletic Commission.

(F) Freestyle wrestling: An Olympic grappling sport which permits contestants to attack their opponent above and below the waist, these techniques may be used in mixed martial arts events.

(G) Gi: The traditional uniform worn when practicing aikido; jujitsu; judo; and karate, may not be worn in mixed martial arts events.

(H) Grappling: Techniques of throwing, locking, holding, and wrestling, as opposed to kicking and punching. These techniques may be used in mixed martial arts events.

(I) Greco Roman wrestling: An Olympic grappling sport in which all holds are applied above the waist in an attempt to throw the opponent. These techniques may be used in mixed martial arts events.

(J) Ground and pound: A MMA term which describes the barrage of strikes delivered by the contestant who is in his/her opponents guard or in the mount position.

(K) Guard: A basic position in which one competitor lies on his/her back with their knees bent and legs open. If their opponent is between their legs, the opponent is in their guard. Depending upon the leg position of the fighter on their back, the guard is refereed to as being an open, closed, half, butterfly, spider, or rubber-band guard.

(L) Hammer-fist: A strike with the small finger side of the fist, as if holding a hammer.

(M) Judo: Meaning gentle way, it is a grappling art created by Jigoro Kano. Based on the techniques of jujitsu. These techniques may be used in mixed martial arts events.

(N) Judoka: Judo practitioners.

(O) Jiu-Jitsu: Also written as jujitsu, ju-jitsu, and jujutsu. Meaning gentle art, a traditional Japanese self-defense that includes kicking, striking, kneeling, throwing, choking and joint locks. These techniques may be used in mixed martial arts events.

(P) Kickboxing: Adapted from Muay Thai, it is a striking sport which permits punches, kicks, and knees. These techniques may be used in mixed martial arts events.

(Q) Mixed martial arts: A general term that describes the convergence of techniques from a variety of combative sports disciplines including boxing, wrestling, judo, jujitsu, kickboxing and others. "MMA" techniques can be broken down into two categories, striking and grappling.

(R) Mount: A basic position in which a competitor gains top position and controls their opponent by sitting on top of them in the full mount position, or from the side of the opponent in the side mount.

(S) Muay Thai: Known as Thai boxing, it is the national sport of Thailand. It is a pure striking art in which blows are delivered with the hands, feet, knees and elbows. These techniques may be used in mixed martial arts events.

(T) No-holds-barred: An erroneous description and characterization of the sport of mixed martial arts.

(U) Octagon: A fenced enclosure in which some promotional organizations hold MMA competition.

(V) Pankration: Meaning all strength or all power, this is an ancient style of Greek wrestling and boxing in which kicks, throws, and joint locks were used. These techniques may be used in mixed martial arts events.

(W) Passing the guard: This is a term that describes a fighter's attempt to escape from his/her opponent's guard in order to secure the mount position.

(X) Shoot: A wrestling technique wherein a competitor attempts to capture his/her opponent's legs and takes him/her off his/her feet. These techniques may be used in mixed martial arts events.

(Y) Spike or Spiking: After lifting and inverting an opponent, attempting to slam him/her headfirst into the canvas. This is an illegal technique.

(Z) Sprawl: A defensive wrestling technique employed to block and counter an opponent's shoot.

(AA) Strikes: A cumulative number of punches administered by a contestant to his/her opponent.

(BB) Submission: A grappling technique which forces a contestant to tap-out. Techniques include chokes, and the hyperextension or over- rotation of a joint.

(CC) Tap-out: The physical act of tapping the opponent, the mat, or one's self to signal a submission. When unable to physically tap-out a submission can be vocal.

20-27.02. Conducting mixed martial arts events.

(A) "MMA" is a general term used to identify a mixed martial arts event that describes the convergence of techniques from a variety of combative sports disciplines including boxing, wrestling, judo, jujitsu, kickboxing and others.

(B) All contests of mixed martial arts must be conducted under the supervision of the South Carolina Athletic Commission, unless otherwise provided in Title 40 Chapter 81 of the South Carolina Code of Laws.

(C) This includes all professional and amateur mixed martial arts events.

20-27.03. Requirements for mixed martial arts contestants.

(A) Amateur contestants:

(1) The minimum and maximum ages for amateur contestants in South Carolina are eighteen (18) to forty (40) years old. The maximum age may be waived by the Commission designee for a specific contestant. A contestant petitioning for an age waiver must submit a complete application along with all medical records, official fight records and any other documentation required by the Commission to the Administrator at least thirty (30) days prior to the scheduled bout. A waiver to participate as an over-age contestant shall be valid for the duration of the current licensure period.

(2) Must submit a completed state approved application with the appropriate fee.

(3) Must submit an annual blood test for the detection of Hepatitis B and C, and HIV.

(B) Professional contestants:

(1) The minimum and maximum ages for professional MMA contestants in South Carolina are eighteen (18) to forty (40) years old. The maximum age may be waived by the Commission designee for a specific contestant. A contestant petitioning for an age waiver must submit a complete application along with all medical records, official fight records and any other documentation required by the Commission to the Administrator at least thirty (30) days prior to the scheduled bout. A waiver to participate as an over-age contestant shall be valid for the duration of the current licensure period.

(2) Must submit a completed state approved application with the appropriate fee.

(3) Must submit an annual blood test for the detection of Hepatitis B and C, and HIV.

(C) Amateur contestants who want to turn professional:

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(1) Must be between the ages of eighteen (18) and forty (40) years old. The maximum age may be waived by the Commission designee for a specific contestant. An Amateur contestant petitioning for an age waiver to turn professional must submit a complete application along with all medical records, official fight records and any other documentation required by the Commission to the Administrator at least thirty (30) days prior to the scheduled bout. A waiver to participate as an over-age contestant shall be valid for the duration of the current licensure period.

(2) Must submit a completed state approved application with the appropriate fee.

(3) Must have updated within one (1) year of the date of contest blood work for the detection of Hepatitis B and C, and HIV.

(4) Must have fought in at least six (6) sanctioned amateur fights and have won a majority of his/her sanctioned fights.

(5) Once a "Pro" designation has been obtained, the contestant may only fight in a "pro" designated event, and is not eligible to fight in any amateur sanctioned events.

(D) Over-age MMA contestants petitioning for an age waiver:

(1) At the discretion of the Commission designee, shall provide a recent video record of his/her last fight, or training bout and copies of his/her clear and precise amateur and professional record.

(2) Must provide an updated EKG report and a letter from the attending physician clearing them to fight. This does not preclude any other medical test that the Commission may deem important for the safety of the fighter.

(3) Must submit the appropriate application and fee.

(4) Must submit a completed annual physical signed by a medical doctor (MD) or Doctor of Osteopathic Medicine (DO) along with blood work for the detection of Hepatitis A and B, and HIV, and an ophthalmic eye exam report performed by a licensed optometrist or ophthalmologist.

20-27.04. Weigh in procedures.

(A) The weigh-ins must be conducted by a Commission Representative at a place and time designated by the Commission.

(B) All contestants must weigh in. Contestants are limited to shorts, shirt or sports bra and socks.

(C) The scale used for the official weigh-in shall be provided by the South Carolina Athletic Commission representative.

(D) Allowance in weight class is the weight difference permitted between contestants in two (2) different weight classes.

(1) There shall not be a difference of more than three (3) pounds between weight classes from lightweight up to, but not including, the welterweight class.

(2) There shall not be a difference of more than five (5) pounds between weight classes from welterweight up to, but not including, the super heavyweight class.

(3) Example: a fighter weighing one hundred thirty four (134) pounds in the bantamweight class shall not compete against an opponent who weighs more than one hundred thirty-seven (137) pounds in the featherweight class.

(4) Example: a fighter weighing one hundred eighty-four (184) pounds in the middle weight class shall not compete against an opponent who weighs more than one hundred eighty-nine (189) pounds in the light heavyweight class.

(5) Weight classifications, weight allowance between weight classes and glove sizes-

Weight class	Weights
Flyweight	116 to 125 lbs
Bantamweight	126 to 135 lbs
Featherweight	136 to 145 lbs
Lightweight	146 to 155 lbs
Welterweight	156 to 170 lbs
Middleweight	171 to 185 lbs
Light Heavyweight	186 to 205 lbs

Heavyweight	206 to 265 lbs
Super Heavyweight	over 265 lbs

20-27.05. Judging and scoring.

(A) All bouts will be scored by three (3) judges.

(B) The "Ten-Point Must System" will be the standard system of scoring a bout. The winner of the round will be awarded ten (10) points and the loser of the round will be awarded nine (9) points or less, except for the rare occasion of an even round, which is scored ten (10) to ten (10).

(C) Judges shall judge mixed martial art techniques, such as effective striking, effective grappling, and control of the opponent, effective aggressiveness and defense.

(1) Effective striking is judged by determining the total number of legal heavy strikes landed.

(2) Effective grappling is judged by considering the number of successful executions of a legal takedown and reversal. Factors to consider are take downs from the standing position to a mount position, passing the guard to the mount position, and bottom position fighters using an active threatening guard.

(3) Effective control is judged by determining who is dictating the pace, location and position of the bout. Factors to be considered are countering a grappler's attempt at a takedown by remaining standing and legally striking, take down an opponent to force a ground fight, creating threatening submission attempts, passing the guard to achieve a mount, and creating striking opportunities.

(4) Effective aggressiveness means moving forward and landing legal strikes.

(5) Effective defense means avoiding being struck, take down or reversals while countering with offensive strikes.

20-27.06. Fouls - intentional, unintentional, procedures and types of fouls.

(A) Procedures:

(1) Referee shall issue a warning. After the initial warning a penalty will be issued. The penalty may be a deduction of points or disqualification depending on the severity of the foul. Any points deducted for any foul must be deducted in the round which the foul occurred.

(2) The referee as soon as practical after the foul, shall call time and notify which contestant is being penalized and the total points the contestant is being penalized.

(3) If a bottom contestant commits a foul and in the referee's judgment is not in control, unless the top contestant is injured, the bout shall continue, so as not to jeopardize the top contestant's superior positioning at the time.

(a) The referee shall verbally notify the bottom contestant of the foul.

(b) When the round is over, the referee shall notify the judges and the inspector of the foul and the total point deduction.

(4) Only the referee can assess a foul and any point deductions. Judges shall not deduct points for what they interpret is a foul.

(5) Referee shall check the fouled contestant's condition to see if the contestant can still participate in the contest.

(6) Disqualification occurs when after any combination of three (3) fouls or if the referee determines the foul to be flagrant.

(B) Intentional foul:

(1) If an injury results that is severe enough to terminate the bout, the contestant causing the injury loses by disqualification.

(2) If an intentional foul causes an injury and the bout is allowed to continue a mandatory two (2) point penalty shall be assessed to the contestant committing the foul.

(3) If an injury sustained by a contestant as a result of the intentional foul causes the contestant to be unable to continue at a subsequent point, the injured contestant shall win by a technical decision, if said contestant is ahead on the score cards. If the injured contestant is even or behind on the score cards at the time of the stoppage, the bout shall be declared a technical draw.

(C) Unintentional foul:

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(1) If a bout is stopped because of an unintentional foul, the referee shall determine whether the contestant who has been fouled can continue or not. If the contestant's chance of winning has not been seriously jeopardized as a result of the foul and if the foul did not involve concussive impact to the head of the contestant who has been fouled, the referee may order the bout continued after a recuperative interval of not more than five (5) minutes. Immediately after stopping the bout or at the end of the round the referee must immediately inform the inspector or Commission representative of their determination that the foul was accidental and unintentional.

(2) If the referee determines either from his/her observation or that of the ringside physician that the bout may not continue because of the injury from the unintentional foul the bout will be declared a no contest if the foul occurred:

(a) During the first two (2) rounds of a non-championship bout, or;

(b) During the first three (3) rounds of a championship bout;

(3) If the unintentional foul renders the contestant unable to continue the bout; or an injury from an intentional foul later becomes aggravated by fair blows and the referee stops bout because of the injury.

(a) After the completion of the second round in a non-championship bout or three (3) round bout;

(b) After the completion of the third round of a championship bout or five (5) round bout;

(c) The outcome shall be determined by scoring the completed rounds and the partial round in which the referee stopped the bout.

(4) A contestant shall not be declared the winner of a bout on the basis of his/her claim that the opponent fouled him/her unintentionally by hitting him/her in the groin. If after a recuperative interval of not more than five (5) minutes, a contestant is unwilling to continue because of the claim of being hit in the groin, the bout will be declared a no contest if the second round has not been completed in a three (3) round bout or the third round has not been completed in a five (5) round bout.

(D) Types of fouls in a mixed martial arts contest (professional and amateur contestants).

(1) Butting with the head.

(2) Eye gouging of any kind.

(3) Biting.

(4) Hair pulling.

(5) Fishhooking.

(6) Groin attacks of any kind.

(7) Putting a finger into any orifice or into any cut or laceration on an opponent.

(8) Small joint manipulation.

(9) Striking to the spine or back of head.

(10) Striking downward using the point of the elbow. (Arcing elbow strikes are permitted).

(11) Throat strikes of any kind, including, without limitation grabbing the trachea.

(12) Clawing, twisting or pinching the flesh.

(13) Grabbing the clavicle.

(14) Kicking the head of a grounded opponent.

(15) Kneeing the head of a grounded opponent.

(16) Stomping on a grounded opponent.

A contestant is considered grounded when his/her torso or three (3) points of his/her body are touching the canvas: example: two (2) legs and a hand are touching the canvas. Applies to paragraphs (D)(14), (D)(15), and (D)(16) of the rule. Note: A downed opponent may kick up to all legal striking points of the body.

(17) Kicking to the kidney with the heel.

(18) Throwing an opponent out of the ring area or caged area.

(19) Holding the shorts or glove of an opponent.

(20) Spitting on an opponent.

(21) Engaging in any unsportsmanlike conduct that causes an injury to an opponent.

(22) Holding the ropes or cage.

(23) Using abusive language or illicit gestures in the ring area or caged area.

(24) Attacking an opponent on or during the break.

(25) Attacking an opponent who is under the care of the referee.

(26) Attacking an opponent after the bell has sounded to end the round.

(27) Flagrantly disregarding the instructions of the referee.

- (28) Timidity, including, without limitation, avoiding contact with an opponent, intentionally or consistently dropping the mouthpiece or faking an injury.
- (29) Interference from anyone working the corner or corner men leaving their area.
- (30) Any act in the judgment of the referee that is detrimental and places an opponent at a disadvantage.
- (31) Neck cranks.
- (32) Spine locks.
- (E) Types of fouls in a mixed martial arts contest (Amateur Contestants Only)
 - (1) Striking with the elbow or forearm.
 - (2) Knee strikes to the head (grounded or standing).

20-27.07. Mouthpiece rule.

All contestants are required to wear a mouthpiece during competition. The mouthpiece is subject to examination and approval by the attending physician. The round cannot begin without the mouthpiece. If the mouthpiece is dislodged during competition, the referee will call time and have the mouthpiece cleaned and replaced at the first opportune moment, without interfering with the immediate action. The referee may deduct points if it is judged the mouthpiece is being purposely spit out. It is recommended that each contestant have a spare mouthpiece in the event the one he/she is wearing is broken.

20-27.08. Restarting fighters.

Following any medical time-out, or when a ring is being used and one or both opponents are under the ropes on the apron of the ring or in danger of falling from the apron of the ring, time will be called by the referee and both fighters will be positioned in the middle of the ring and assume the same position as the one prior to the time out.

20-27.09. Appearance, Attire and Protective Equipment.

- (A) Groin protectors.
 - (1) Male fighters must wear a professionally manufactured and Commission approved groin protector, which will protect them against injury from a foul blow. No homemade or non-professionally manufactured protective gear will be approved by the Commission.
- (B) Female fighters must submit to a Commission administered pregnancy test reviewed by the ringside physician on the day of the scheduled fight for a mandatory negative result.
- (C) Each contestant shall wear mixed martial arts shorts, biking shorts, or kick boxing shorts. Shorts must be approved by the Commission or Commission representative. Swimming suits/trunks are not allowed.
- (D) No GI's or shirts permitted. Female fighters must wear a sports bra.
- (E) No shoes or protective padding for the feet or other areas of the body are permitted.
- (F) No grappling shin guards.
- (G) Absolutely "no" body grease, gels, balms or lotions may be applied. Vaseline may be applied to the facial area at cage side or ringside in the presence of an inspector, referee, or a person designated by the Commission. Any contestant applying anything prior to this could be penalized a point or disqualified.
- (H) Taping of hands wrists and ankle is permitted.
- (I) Neoprene joint supports only. No metal supports or hardened plastic or hardened synthetic device or equipment of any kind can ever be worn anywhere on the body during competition.
- (J) Finger and toe nails must be trimmed.
- (K) The Commission or Commission representative shall determine whether head or facial hair presents any hazard to the safety of the contestant or their opponent or will interfere with the supervision and conduct of the event.
- (L) May not wear any equipment that does not pass the Commissions' or Commission Representatives' approval.
- (M) No jewelry or body piercings may be worn during an event.

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20-27.10. Glove specifications for Professional and Amateur Contestants.

1. Professional.

(A) For professional mixed martial arts contests each contestant must wear gloves that weigh not less than four (4) ounces and not more than six (6) ounces.

(B) The gloves shall be supplied by the promoter.

(C) Both contestants shall wear the same weight gloves.

(D) Gloves must be inspected and passed by the inspector, referee or Commission representative prior to starting the bout.

(E) The gloves for all main events shall be new or in like new condition or the gloves must be replaced.

2. Amateur.

(A) For amateur mixed martial arts contests each contestant must wear gloves that weigh not less than six (6) ounces and not more than eight (8) ounces.

(B) The gloves shall be supplied by the promoter.

(C) Both contestants shall wear the same weight gloves.

(D) Gloves must be inspected and passed by the inspector, referee or Commission representative prior to starting the bout.

(E) The gloves for all main events shall be new or in like new condition or the gloves must be replaced.

20-27.11. Specifications for bandages on hands for mixed martial art contestants.

(A) In all weight classes, the bandages on each contestant's hands shall be restricted to soft gauze type cloth not more than fifteen (15) yards in length and two (2) inches in width, held in place by not more than ten (10) feet of surgeon's tape, one (1) inch in width for each hand.

(B) Surgeon's adhesive tape shall be placed directly on each hand for protection near the wrist. The tape may cross the back of the hand twice and extend to cover and protect the knuckles when the hand is clenched to make a fist.

(C) The bandages shall be evenly distributed across the hand.

(D) Bandages and tapes shall be placed on contestant's hands in the dressing room and must be inspected by the Commission or Commission representative.

(E) The manager or chief second of the opponent may elect to be present when hands are being wrapped.

(F) Under no circumstances are gloves to be placed on the hands of a contestant until checked by the inspector or Commission representative.

20-27.12. Requirements for a ring or caged area.

(A) Mixed martial arts shall be held in a Commission approved ring or caged area.

(B) The ring or caged area specifications for mixed martial arts must meet the following requirements:

(1) The cage must be of circular type dimensions or have as many as eight (8) equal sides;

(2) Two (2) sides opposite of each other must each have a designated color, one (1) side blue the opposite red;

(3) The ring or cage must be no smaller than twenty (20) feet wide or no larger than thirty-two (32) feet across;

(4) The floor of the ring or caged area must be padded with ensolite or another similar closed-cell foam, with at least a one (1) inch layer of foam padding, with a top covering of canvas, duck or similar material tightly stretched and laced to the platform of the ring or caged area. Material that tends to gather in lumps or ridges must not be used;

(5) The platform of the ring or caged area must not be more than four (4) feet above the floor of the building and must have suitable steps for use of the contestants;

(6) A ring must have five (5) ring ropes, not less than one (1) inch in diameter and wrapped in soft material. The lowest rope must be no higher than twelve (12) inches from the ring floor;

(7) Ring posts must be eighteen (18) inches away from the ring ropes. Ring posts must be made of metal, not less than three (3) inches in diameter, nor more than six (6) inches in diameter, extending from the floor of

the building to between five (5) and seven (7) feet above the floor of the ring or caged area, and must be properly padded in a manner approved by the Commission or Commission Representative;

(8) The fencing used to enclose the caged area must be made of a material that will prevent a contestant from falling out or breaking through the caged area onto the floor of the building or onto spectators, including, without limitation, chain link fence coated with vinyl;

(9) Any metal portion on the interior of the ring or caged area must be covered and padded in a manner approved by the Commission or Commission Representative and must not be abrasive to the contestants;

(10) The ring or caged area must have two (2) operational entrances that must not be obstructed at any time during an event. The entrance must be padded or covered and padded so that there is no exposed metal on the interior of the ring or caged area;

(11) There must not be any obstruction on any part of the fencing surrounding the area in which the contestants are competing;

(12) Any metal parts used to enforce the ring or caged area wall must be positioned as to not interfere with the safety of the contestants;

(13) A Commission approved ring stool must be placed in each corner. All ring stools must be thoroughly cleaned at the conclusion of each fight;

(14) A plastic water bottle and a clean bucket must be placed in each corner. All buckets must be thoroughly cleaned at the conclusion of each fight.

20-27.13. Rubber gloves.

When a ring is used all seconds working in the corner must wear rubber gloves. When a caged area is used only the second who enters the caged area must wear rubber gloves.

20-27.14. Types of bout results.

(A) A mixed martial arts contest may end under the following results:

(1) Submission:

(a) Tap out: when a contestant physically uses his/her hand(s) to indicate that he/she no longer wishes to continue.

(b) Verbal tap out: when a contestant verbally announces to the referee that he/she does not wish to continue.

(2) Knockout "(KO)": failure to rise from the canvas.

(3) Technical knockout "(TKO)":

(a) Referee stops bout because a contestant can no longer defend himself/herself; or

(b) Ringside physician advises referee to stop bout; or

(c) When an injury as a result of a legal maneuver is severe enough to terminate the bout.

(4) Decision via scorecards:

(a) Unanimous: when all three (3) judges score the bout for the same contestant.

(b) Split decision: when two (2) judges score the bout for the same contestant and one (1) judge scores for the opponent.

(c) Majority decision: when two (2) judges score the bout for the same contestant and one (1) judge scores the bout a draw.

(5) Draws:

(a) Unanimous: when all three (3) judges score the bout a draw;

(b) Majority: when two (2) judges score the bout a draw;

(c) Split when all three (3) judges score it differently and the score total results in a draw.

(6) Disqualification: when an injury sustained during competition as a result of an intentional foul that is severe enough to terminate the contest.

(7) Forfeit: when a contestant fails to begin competition or prematurely ends the contest for reasons other than injury or indicating a tap out.

(8) Technical draw:

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(a) When an injury sustained during competition, as a result of an intentional foul, causes the injured contestant to be unable to continue and the injured contestant is even or behind on the score cards at the time of the stoppage.

(b) When an injury sustained during competition, as a result of an unintentional foul, causes the injured contestant to be unable to continue and the sufficient number of rounds have been completed with the results of the scorecards being a draw.

(9) Technical decision: when the bout is prematurely stopped due to an injury and a contestant is leading on the scorecards.

(10) No contest: when a contestant is prematurely stopped due to accidental injury and a sufficient number of rounds have not been completed to render a decision via the scorecards.

20-27.15. Number of rounds required for mixed martial arts bouts and events.

(A) Professional Bouts:

(1) Professional bouts will be three (3) rounds of five (5) minutes each with a one (1) minute rest period that includes a ten (10) second warning signal.

(2) Championship bouts will be five (5) rounds of five (5) minutes each with a one (1) minute rest period that includes a ten (10) second warning signal.

(B) Amateur bouts:

(1) Amateur bouts will be three (3) rounds of three (3) minutes each with a one (1) minute rest period that includes a ten (10) second warning signal.

(2) Championship bouts will be five (5) rounds of three (3) minutes each with a one (1) minute rest period that includes a ten (10) second warning signal.

(C) A minimum number of twenty-four (24) rounds and eight (8) bouts must be scheduled. The Commission Representative may grant a waiver of rounds.

20-27.16. Promoter's responsibilities.

(A) Bout agreements.

(1) The bout agreement between a promoter and a pro contestant must be executed and submitted to the South Carolina Athletic Commission no later than seventy-two (72) hours prior to the event. (2) A bout agreement which provides that a contestant must fight exclusively for one promoter or at the option of the promoter is prohibited.

(B) Must have a permit application for the event with contestant's name and weight, the opponent's name and weight, and number of rounds, submitted to the Commission at least fourteen (14) days prior to the scheduled event. A contestant will not be permitted to fight unless approved by the Commission or its designee.

(C) Contestants' names, addresses and date of birth must be submitted to the Commission no later than seventy-two (72) hours prior to the start of the event.

(D) Must have a separate divider between the ring or caged area and the fans. The divider must be approved by the Commission or Commission Representative. (E) Must follow all ticket and tax rules as defined in the Code.

(F) Must have event insurance coverage in the amount of ten thousand (\$10,000.00) dollars in case of injury and ten thousand (\$10,000.00) dollars in case of a death.

(G) No event shall start without the presence of a licensed medical doctor or doctor of osteopathic medicine present at ringside or cage side and an ambulance with medical personnel on site. The doctor must be present a minimum of two (2) hours prior to the start of the event. Ambulance and emergency medical (EMT) personnel must be present at the time the event is open to the public.

(H) Must supply the contestants' gloves to be used at the event. Gloves must be approved by the inspector or Commission representative.

(I) Have disposable garbage bags and biohazard bags in each dressing room and at ringside.

(J) Have cleaning solution used to clean blood and debris in the cage or ring. A solution with a minimum of ten (10%) percent bleach and ninety (90%) percent water is an acceptable solution.

(K) Must provide security with a minimum of one Commissioned police officer based upon the seating capacity for the particular event.

(L) All events must start on the time designated on permit or, after thirty (30) minutes, the promoter will be assessed a fine of one hundred (\$100.00) dollars for each thirty (30) minutes thereafter the event is late, unless said delay is due to a cause beyond the control of the promoter.

(M) New gloves never previously worn must be used for all title bouts. Gloves must be approved by Commission representative or inspector.

(N) Must comply with all rules and regulations relating to promoting events.

(O) Promoters must pay the higher amount of either five (5%) percent of the gross gate receipts or a twenty five (\$25.00) dollar minimum to the Commission within thirty (30) days after the event. Failure to pay the required gate fees within the time specified herein will result in the promoter being assessed a two hundred fifty (\$250.00) dollar administrative fine, and an additional two hundred fifty (\$250.00) dollar fine every thirty (30) days thereafter up to a maximum amount of one thousand (\$1,000.00) dollars. An event permit shall not be issued to a promoter with an outstanding unpaid gate fee or fine. Promoters will be subject to disciplinary action by the Commission for any attempt to circumvent payment of the gate fee.

(P) Promoters must pay to the Commission a sanctioning fee as determined by the Commission to cover the cost of inspections in the enforcement of compliance with this chapter and South Carolina Code of Laws Title 40 Chapter 81.

(Q) The Commission Representative shall select and assign event referees and judges. Judges and referees shall be compensated by the promoter for their work as an official in accordance with an official's fee schedule as set by the Commission. In the event of judge or referee travel requiring overnight accommodations, any further negotiations, arrangements, agreements or contracts concerning compensation for travel or lodging shall be the responsibility and concern of the promoter and the referee or judge.

20-27.17. Licensing.

(A) All participants shall be licensed pursuant to the South Carolina Athletic Commission laws, rules and regulations.

(B) The license application must include a photograph showing a frontal view of the head and shoulders of the applicant.

(C) A contestant's application must be made at least seven (7) days prior to a scheduled event except as authorized by the Commission Designee.

(D) An unlicensed manager shall not contract with any promoter or matchmaker.

(E) An unlicensed person shall not contract to receive a portion of a contestant's bout earnings until issued a manager's license.

(F) Each license issued pursuant to this section is valid from the date of license issuance until December 31st of the calendar year. Licenses do not renew. All applicants who wish to participate in events sanctioned by the Commission must re-apply for licensure and meet the requirements of this Chapter each year.

20-27.18. Seconds' and Managers' duties when working in a corner.

(A) There may be no more than three (3) licensed seconds positioned in a designated area by the ring or cage or positioned in each corner of the ring. (B) No person other than the contestants and referee shall enter the ring or cage during a bout.

(C) The referee may, in his/her discretion, stop a contest if an unauthorized person enters the ring or cage during a round.

(D) Only two (2) seconds may enter the cage to tend to a fighter between rounds. In case of an open cut, a medical person, or cut person may also enter the cage.

(E) There shall not be any loud yelling or profanity from anyone working the corner.

(F) Seconds, trainers and managers must not attempt to heckle, hinder, disrupt or otherwise annoy his/her fighter's opponent, officials, Commission Representatives, or other seconds during an event.

(G) If a manager or second leaves the designated area the fighter will be disqualified at the discretion of the Commission.

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(H) A fighter getting knocked out of a ring and onto the floor must get back into the ring within twenty (20) seconds without assistance from anyone working his/her corner.

(I) Any person violating any rule working the corner will be disqualified for the remainder of the event and suspended for a minimum of sixty (60) days. An appeal must be submitted in writing to the Athletic Commission office within ten (10) days from the date of said violation.

(J) Any second may terminate the performance of his/her fighter he/she is serving either between rounds or during the progress of any round in which such fighter is a contestant.

(K) No seconds or managers shall attempt to render aid to a disabled fighter before the ringside physician has had an opportunity to examine the fighter.

20-27.19. Disciplinary action.

(A) All contestants and participants may be disciplined for any violation of the South Carolina athletic laws, rules and regulations.

(B) The administrator, inspector or a Commission Representative shall suspend a contestant for any violation to include but not be limited to failing any drug test .

(C) A contestant will be suspended for a period of not less than one (1) year for participating in any mixed martial arts events in the state of South Carolina not sanctioned and approved by the South Carolina Athletic Commission.

(D) If a licensed professional mixed martial arts contestant competes against an amateur he/she will be suspended for a period of not less than one (1) year or a maximum of two (2) years.

(E) After signing a contestant/promoter contract form, a contestant shall not enter into another contracted bout that is scheduled thirty (30) days prior to the previously signed contract. If the contestant participates in a bout within this thirty (30) day time period and as a result of participating in said event is not able to participate in the originally contracted event, said contestant shall be suspended for up to six (6) months and be assessed a fine of not more than five hundred (\$500.00) dollars at the discretion of the South Carolina Athletic Commission unless all parties agree to a release from the contract. A contestant wishing to appeal a notice of suspension must do so via registered mail to the Commission within thirty (30) days of the mailing date of the notice of suspension.

(F) When the contestant fails to appear in a contest in which he/she signed a bout agreement to appear, he/she shall be suspended for not more than six (6) months. The contestant must produce a valid certificate from a physician and approved by the administrator or Commission representative in the case of any physical disability. Any contestant who files a certificate from a physician stating he/she is unable to fulfill a bout agreement because of physical disability, shall be immediately given a medical suspension for a period of sixty (60) days and must submit a medical clearance or fulfill his/her bout agreement with the same opponent or a suitable substitute within the sixty (60) day suspension period. The administrator or Commission representative may remove any suspension if the contestant is released from the bout agreement by mutual agreement between the contestant and promoter.

(G) A contestant who fails to make the required weight listed on the contestant/promoter contract form, which results in the bout being cancelled, the contestant will be suspended for up to six (6) months and assessed a fine to be determined by the South Carolina Athletic Commission. A contestant wishing to appeal a notice of suspension must do so via registered mail to the Commission within thirty (30) days of the mailing date of the notice of suspension.

(H) If after the weigh-in a contestant fails to honor the contestant/promoter bout contract by not appearing for the bout, or refuses to compete, the contestant shall be suspended for up to twelve (12) months and assessed a fine to be determined by the South Carolina Athletic Commission. A contestant wishing to appeal a notice of suspension must do so via registered mail to the Commission within thirty (30) days of the mailing date of the notice of suspension.

(I) A contestant or promoter will be suspended indefinitely, until payment is made in full of any judgment awarded by a court of law that is presented to the South Carolina Athletic Commission for any violations.

(J) A contestant, manager, trainer, or any representative of the contestant, shall not verbally harass any official representing the South Carolina Athletic Commission, before, during, or after any event regulated by the South Carolina Athletic Commission. This includes, but is not limited, to an inspector, referee, judge, timekeeper,

physician, Commission member, or anyone assigned by, or representing the South Carolina Athletic Commission. Any contestant or person representing the contestant violating this rule will cause them or the contestant to be suspended for a period no longer than one (1) year. The suspension must be appealed within thirty (30) days after receiving notice from the Commission; otherwise, the contestant forfeits his/her right to appeal after said thirty (30) day period.

(K) A contestant, manager, trainer, or any representative of the contestant, shall not verbally or physically abuse any official representing the South Carolina Athletic Commission, before, during or after any event regulated by the South Carolina Athletic Commission. This includes, but is not limited to, an inspector, referee, judge, timekeeper, physician, Commission member, or anyone assigned by, or representing the South Carolina Athletic Commission. Any contestant or person representing the contestant violating this rule will cause them or the contestant to be suspended indefinitely. The suspension must be appealed within thirty (30) days after receiving notice from the Commission; otherwise, the contestant forfeits his/her right to appeal after said thirty (30) day period.

20-27.20. Suspensions and mandatory rest period.

(A) Sixty (60) day suspension for a knockout "KO".

(B) Thirty (30) day suspension for a technical knockout "TKO".

(1) Referee stoppage from submission or choke hold prior to verbal commitment or tap out.

(2) Referee stoppage from strikes prior to verbal commitment or tap out.

(C) Throwing the mouthpiece into the audience during or after the event will result in a ninety (90) day suspension. This would be in addition to any other suspension that the contestant may have received.

(D) Physician's suspension:

(1) Whatever length of time the physician designates after the post fight check-up that will allow sufficient time for the contestant to be physically able to compete.

(2) Until any medical requirements issued by a physician are successfully submitted and approved for release by the Commission.

(3) Failure to report or comply with post fight examination by the attending physician or his/her representative will result in a minimum suspension of ninety (90) days.

(E) Without a release from the Commission or Commission Representative a contestant cannot compete until seven (7) days have elapsed from his/her last bout. The seven (7) day period starts the day following the event in which he/she last competed.

(F) If listed on any suspension lists recognized by the South Carolina Athletic Commission.

20-27.21. Medical requirements for mixed martial arts contestants.

Professional and amateur mixed martial arts contestants must produce:

(A) Negative HIV

(B) Negative hepatitis B surface antigen

(C) Negative hepatitis C antibody

(D) Procedures to complete when failing hepatitis B surface antigen test:

(1) Must pass a hepatitis B "PCR" quantitative test.

(2) The quantitative limit must be within permissible limits according to the laboratory where test was administered.

The following apply to professional and amateur mixed martial arts contestants:

(E) The contestant must submit a CAT scan (CT) or MRI examination to the Commission at least seventy-two (72) hours prior to being licensed when a contestant:

(1) Has lost three (3) bouts in a row by KO or TKO.

(2) Has lost six (6) bouts in a row.

(3) Has an extensive losing record.

(F) The Commission will not issue a license or renew any applicant's license for a contestant who is found to be blind in one eye or whose vision in one eye is so poor that an ophthalmologist, optometrist, or physician recommends that a license not be granted. This rule is effective regardless of how good the vision of the

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contestant may be in the other eye. An ophthalmic eye exam report performed by a licensed optometrist or ophthalmologist must be submitted to the Commission as part of his/her medical records prior to competing in an event.

(G) The Commission will not issue or renew the license of any applicant who wishes to compete in any sport regulated by the South Carolina Athletic Commission if said applicant has suffered from any type of cerebral hemorrhage.

(H) The Commission may order an examination of the contestant at any time for the purpose of determining whether such contestants are fit and qualified to engage in future matches.

20-27.22. Conduct when contestants enter the ring or caged area.

(A) No Contestant or promoter may display any type of entrance theme that includes music, video, or any type of physical display that contains any profanity or any derogatory ethnic remarks. Anyone violating this rule may be suspended for up to six (6) months.

(B) No person other than the contestant and referee may be in the ring or cage during the progress of a round.

20-27.24. Change of Decision by Commission.

The Commission may in its discretion declare a referee's decision a "no contest", if in its judgment a noticeable error has been committed which affects the outcome of the bout.

20-27.25. Judges; Majority Vote.

The Commission Representative shall designate three (3) judges for all events. The judges shall render a decision in any MMA contest by a majority vote. A decision of the judges shall be final.

20-27.26. Substitution of Referee or Judge.

(1) In the event a referee or judge becomes unable to continue his/her duties during a mixed martial arts contest, time out shall be called and another official shall be immediately assigned by the Commission Representative or chief of officials.

(2) It shall be mandatory for such substituted judge to continue scoring on the scorecard used by the incapacitated judge and such scorecard shall be the official scorecard in the determination of a decision at the conclusion of the mixed martial arts contest.

(3) The substituted judge must resume the round from the time of his/her substitution, for the incapacitated judge.

ARTICLE 1

COMMISSION REPRESENTATIVE DUTIES

20-27.27. General Supervisory Duties.

The Commission Representative shall be in charge of shows for the purpose of:

(1) Enforcing regulations issued by the Commission which include but are not limited to:

(a) The Commission Representative shall assign all officials for all mixed martial arts events.

(b) Licensing contestants and all other participants according to the requirements and rules of this Chapter.

(c) Collecting unpaid promoter's fees.

(d) Seeing that contestants and officials are paid.

(e) Collecting all gate fees and verifying said fees on a Commission approved Gate Fee Verification Form.

(f) Completing his/her report and forwarding the report to the Commission within ten (10) days of each event.

(g) Depositing the collected fees within forty eight (48) hours of receipt, excluding Saturday, Sunday, and bank holidays, into an account established for the Athletic Commission. The Administrator will deposit the collected fees in the South Carolina Athletic Commission bank account.

20-27.28. Verbal or Physical Abuse of Commissioner or Commission Representative

Verbal or physical abuse of any Commissioner, the Commission Representative or any person representing the Commission shall be a violation of the act establishing this commission and shall be subject to the penalties authorized in Sections 40-1-10 et seq., 40-81-120, and 40-81-130 of the South Carolina Code of Laws.

20-27.29. Attendance at Weigh-In.

A Commission Representative must attend all weigh-ins, as well as the performances.

20-27.30. Receipt Book.

(1) If a Commission Representative has been furnished a receipt book, and he/she shall carry it with him/her at all times during an event.

(2) Receipts are made out in triplicate; one copy for the person paying the fee, one copy to forward to the Commission office together with his/her report, and the third copy to remain in the book.

(3) When each receipt book is completed, the Commission Representative must return it to the office immediately.

20-27.31. Forwarding of Scorecards.

The Commission Representative at mixed martial arts shows must obtain the judges scorecards and forward them to the Commission upon request in addition to the other required reports.

20-27.32. Check of Substitute Contestants.

When contestant substitutions occur in any MMA event, the Commission Representative must thoroughly check the substitute's record, including his/her last five (5) bouts, license, suspension status, name of his/her manager, if any, and any other pertinent information. Promoters must submit contestants' names, addresses, and date of birth must be submitted no later than seventy-two (72) hours prior to the start of the event to the Commission Representative. The Commission Representative must then forward any event substitution to the Commission Designee for approval. The approval of substitutions inside of seventy-two (72) hours prior to the event will be at the discretion of the Commission Designee. Any additional administrative cost incurred due to said substitutions will be paid by the promoter.

20-27.33. Check of Seconds' Compliance with Rules.

The Commission Representative shall see that all seconds present a neat appearance according to the rules of this Chapter.

20-27.34. Assure Enforcement of Regulations.

The Commission Representative shall see that all necessary equipment is provided, that the participants are ready on time, that the seconds are properly instructed in their duties and that all regulations pertaining to the proper conduct of the bout are enforced.

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20-27.35. Report of Injuries.

Commission representatives shall make an inquiry of all fighters after their bouts, in cooperation with the physicians, and shall report any injuries to the Commission within seventy-two (72) hours.

20-27.36. Forwarding of Receipts.

Commission representatives shall maintain all receipts from receipt books in their custody promptly after the conduct of any show to which they are assigned.

ARTICLE 2

ANNOUNCERS

20-27.37. Designation; Approval; License.

Announcers may be designated by the promoters with the approval of the Commission Representative. Announcers must be licensed by the Commission.

20-27.38. Authorization to Announce.

Announcers are forbidden to make any announcement whatsoever except as authorized to do so by the promoter with the consent of the Commission Representative at the ringside.

20-27.39. Announcement of Contestants' Names and Weights.

After contestants and their chief seconds are in the ring, the mixed martial arts announcer shall announce the names of the contestants, their correct weights, and other matters as may be directed by the Commission Representative.

20-27.40. Announcement of Contest Results.

Mixed martial arts announcers shall announce the judges' decisions at the end of contests and in the event of knockouts at the time of same and the round of occurrence.

20-27.41. Neutrality.

(1) Announcers must not in any way by word or action attempt to show any partisanship inside or outside the ring.

(2) Announcers must remain seated in place and be silent except when making official announcements.

(3) Announcers shall not use foul, abusive, or derogatory language toward a contestant or any person attending the event.

20-27.42. Introducing Suspended Person.

(1) Mixed martial arts announcers must not at any time introduce from any ring any contestant or other person who is under suspension.

ARTICLE 3

TIMEKEEPERS

20-27.43. Approval and License.

Timekeepers shall be approved and licensed by the Commission.

20-27.44. Stop-Watch.

A timekeeper shall have an accurate stop-watch approved by the Commission Representative.

20-27.45. Time of Round; Rest Period.

(1) Each round of a mixed martial arts contest shall be three (3) minutes unless approved in advance by the Commission Representative. However, in the event of a knockdown near the end of a round, the round shall continue until the official count has ended.

(2) Each rest period between rounds shall be one (1) minute.

20-27.46. Warning Signal.

Ten (10) seconds before the beginning of each round the timekeeper shall give warning to the seconds of the contestants by sounding a signal.

20-27.47. Termination Before Scheduled Limit.

In the event a mixed martial arts contest terminates before the scheduled limit of rounds, the timekeeper shall inform the announcer of the exact duration of the contest.

20-27.48. Location near Bell.

A timekeeper shall be seated close to the bell at ringside. Adequate space must be provided to allow the timekeeper complete freedom of motion.

20-27.49. Signals during Rounds.

Except for the official ten-second signal, a timekeeper must not give any signal or information on the duration of any round in progress in any contest.

20-27.50. Termination between Rounds.

(1) In the event a mixed martial arts bout terminates between rounds by decision of the referee or at the request of a corner, the timekeeper shall sound the bell as a signal for the next round.

(2) The contest shall then be considered as having terminated in the round for which the bell was sounded and likewise the referee shall be considered to have counted "ten" (10) as in the case of a knockout.

20-27.51. Count for Knockdowns.

The timekeeper may be designated by the referee to initiate the count in the event of a knockdown.

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ARTICLE 4

PHYSICIANS

20-27.52. Approval and Assignment.

Physicians shall be arranged for by the promoter from an approved list provided by the Commission. If a promoter requests approval of a physician not on the list, the Commission or its designee may approve said physician on a case-by-case basis.

20-27.53. Examination of Contestants.

Physicians assigned to contestants' shows must perform thorough pre- and post-fight physicals on the contestants on the day of the event.

20-27.54. Position at Ringside.

- (1) Physicians shall sit at the immediate ringside at all mixed martial arts shows.
- (2) No mixed martial arts bout shall be allowed to proceed unless the physician is in his/her seat.
- (3) The physician shall not leave until after the final bout.
- (4) The physician shall be prepared to assist if any serious emergency arises and shall render temporary or emergency treatment for cuts or other injuries sustained by the participants.
- (5) The ringside physician may examine a contestant at any time he/she feels it necessary and may direct the referee to halt a contest if in his/her opinion either contestant is unable to continue.

20-27.55. Completion of Injury Form and Report.

Physicians must fill out and return to the Commission Representative a printed injury form for every contestant immediately after a mixed martial arts event. These forms shall be maintained by the Commission representative.

20-27.56. Unfit Participant.

Physicians must rule off the card any contestant who is found physically unfit at the weigh-in or pre-fight physical.

ARTICLE 5

INSURANCE FOR CONTESTANTS

20-27.57. Proof of Insurance.

- (1) Each licensed promoter shall be required to submit evidence of a policy of medical and hospital insurance satisfactory to the Commission at the time application is made to the Commission for a permit.
- (2) The promoter must provide proof that premiums have been paid by certified funds.

20-27.58. Coverage.

- (1) Insurance will cover contestants for medical, surgical, and hospital care in amounts to be designated by the Commission.
- (2) Each licensed promoter must have event insurance in the amount of ten thousand dollars (\$10,000.00) in case of injury and ten thousand dollars (\$10,000.00) in case of a death.

ARTICLE 6

PROMOTERS

20-27.60. General Responsibility.

A licensed promoter will be held responsible for any failure in adhering to the rules and regulations of the Commission. The Commission may at its discretion video or require the promoter to furnish videos of the event to the Commission. The promoter is responsible for properly identifying all contestants and for preventing mismatched contests.

20-27.61. Intermissions.

All events are limited to one (1) half-time intermission and one (1) additional intermission with the prior approval of the Commission Representative, not including intermissions for medical emergencies. Promoters shall not permit intermissions at mixed martial arts shows to exceed fifteen (15) minutes, with the exception of medical emergencies.

20-27.62. Persons Unlicensed or Under Suspension.

Promoters and their matchmakers shall not permit any person unlicensed or under suspension to take part in a sanctioned event.

20-27.63. Grounds for Suspension of License.

Any promoter holding a license may be suspended for a conviction of a felony or a crime involving moral turpitude or for unbecoming conduct at any time or place reflecting discredit to mixed martial arts.

20-27.64. Maintenance of Order; Responsibility.

(1) Promoters will be held responsible for maintaining order. Any person who is intoxicated, abusive or disorderly in conduct, to the annoyance of surrounding spectators, may be ejected.

(2) Promoters must supply security with a minimum of one Commissioned police officer based upon the seating capacity for the particular event so that order and security may be maintained and all laws and regulations enforced.

20-27.65. Minimum/Maximum Schedule of Rounds per Program.

Promoters shall not schedule less than twenty-one (21) or more than sixty (60) rounds of mixed martial arts on one program.

20-27.66. Time of Final Bout.

(1) The final bout shall not end later than 11:59 P.M., unless approved by the Commission Representative.

(2) If the semifinal or other advertised bouts have not been held by 10 PM, they shall be held after the main event bout.

20-27.67. Filing of Mixed Martial Arts Contracts; Secret Agreements.

(1) Upon the request of the Commission, copies of all mixed martial arts contracts between or among any participants must be filed with the Commission at the designated time before the event.

(2) The making of secret agreements contrary to the terms of the filed contracts is prohibited under penalty of suspension of all parties thereto.

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20-27.68. Nonprofit and Charitable Events.

Events sponsored, promoted or conducted by nonprofit and/or charitable organizations shall be subject to all the provisions of these rules and regulations.

20-27.69. Posting of Surety Bond or Certified Funds.

Licensed promoters shall post with the Commission a surety bond or certified funds acceptable to the Commission in a minimum amount of five thousand dollars (\$5,000.00), but in no case, not less than the amount of the total purse.

20-27.70. Promoter Participating as a Contestant.

No promoter shall participate as a contestant in any event in which the promoter is involved as a promoter or a matchmaker.

ARTICLE 7

MATCHMAKERS

20-27.71. Observance of Rules.

Matchmakers must observe all the rules and requirements with respect to weight agreements, weighing-in, and the proper execution and filing of contracts and advance notices. The matchmaker is responsible for properly identifying all contestants.

20-27.72. Uneven Matches.

Matchmakers and promoters may be held responsible if they make matches in which one of the principals is outclassed or mismatched.

20-27.73. Dealings with Persons Unlicensed or Under Suspension.

Matchmakers shall not permit any person unlicensed or under suspension to take any part whatsoever in any match.

20-27.74. Grounds for Suspension of License.

Any event participant holding a license may be suspended if arrested or convicted for a charge involving moral turpitude or for unbecoming conduct at any time or place reflecting discredit to mixed martial arts. Under similar circumstances, application for a license or a renewal may be denied.

20-27.75. Submission of Names and Addresses of Contestants.

Contestants names, aliases, addresses, and date of birth must be submitted to the Commission Representative no later than seventy-two (72) hours prior to the start of the event.

20-27.76. Matchmaker Participating as a Contestant.

No matchmaker shall participate as a contestant in any event in which he/she is involved as a matchmaker.

ARTICLE 8

FEMALE MMA CONTESTANTS

20-27.80. Female MMA Contestants.

(Same rules as for male contestants plus the following:)

- (1) No applicant shall be contracted for or engage in a contest between male and female.
- (2) Contests will be limited to three (3) rounds of three (3) minutes duration.
- (3) Breast protection must be used in lieu of a foul proof abdominal guard.
- (4) Hair must be secured in a manner which will not interfere with the vision or safety of either contestant.
- (5) Each contestant will provide herself with two (2) uniforms consisting of contrasting color, body shirt, blouse and shorts.
- (6) Female fighters must submit to a Commission administered pregnancy test reviewed by the ringside physician on the day of the scheduled fight for a mandatory negative result.
- (7) Promoters will provide adequate separate dressing rooms.
- (8) No use of cosmetics. Absolutely no body grease, gels, balms or lotions may be applied. Vaseline may be applied to the facial area at cage side or ringside in the presence of an inspector, referee, or a person designated by the Commission.

ARTICLE 9

HEARINGS AND SUBPOENA OF WITNESSES

20-27.81. Investigations and Hearings Held by Commission.

- (1) Any designated representative of the Commission may make investigations. The Commission may hold hearings and issue subpoenas to compel the attendance of witnesses.
- (2) The Commission also may order production of books, papers, reports, or records needed for any hearing.
- (3) When the hearing takes place, any Commissioner may administer oaths to and examine any witnesses for the purpose of clarifying the questions for which the hearing was called.

20-27.82. Disciplinary Action.

Any person or entity required by law to be licensed by this Commission shall be subject to disciplinary action for any violation of these regulations or order of the Commission. Upon the hearing and its determination of just cause existing, the Commission may, in its discretion, impose civil penalty, suspension or revocation of a license held. Any such violation shall also constitute grounds for the Commission's refusal to renew any license.

Fiscal Impact Statement:

There will be no cost incurred by the State or any of its political subdivisions for these regulations.

Statement of Rationale:

These regulations are amended in conformance with the current State Athletic Commission Practice Act.

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Document No. 4501

DEPARTMENT OF LABOR, LICENSING AND REGULATION
BUILDING CODES COUNCIL
CHAPTER 8

Statutory Authority: 1976 Code Sections 6-8-20, 6-9-40, 40-1-50, and 40-1-70

8-115. Classification and Qualifications for Registration.

8-601. Purpose.

8-602. Definitions.

8-604. Adoption of Model Codes.

8-607. Approved Inspection Agency Authority.

8-613. Multiple Site Manufacturing.

Synopsis:

The South Carolina Department of Labor, Licensing and Regulation, Building Codes Council proposes to amend Regulations 8-115, 8-601, 8-602, 8-604, 8-607, and 8-613 generally and to update the regulations to comport with Act 179 from the 2013-2014 legislative session.

A Notice of Drafting was published in the *State Register* on September 26, 2014.

Instructions:

Regulations 8-115, 8-601, 8-602, 8-604, 8-607, and 8-613 are amended as shown below.

Text:

8-115. Classifications and Qualifications for Registration.

A person applying for registration as a building code enforcement officer, special inspector or contract inspector must be certified in accordance with these regulations. An applicant is deemed to be qualified for registration upon submittal of the following documentation.

A. Building Official--A certificate or examination record from a recognized code organization, indicating that the applicant has been certified as a building official.

B. Commercial Inspector--Certificates or examination records from a recognized code organization, indicating that the applicant has been certified in two or more commercial inspector disciplines.

C. Residential Inspector--Certificates or examination records from a recognized code organization, indicating that the applicant has been certified in the residential building, electrical, plumbing and mechanical inspector disciplines.

D. Residential Plans Examiner--Certificates or examination records from a recognized code organization that the applicant has been certified in the residential building, electrical, plumbing and mechanical plans examiner disciplines

E. Commercial Plans Examiner--Certificates or examination records from a recognized code organization, indicating that the applicant has been certified in the commercial building, electrical, plumbing and mechanical plans examiner disciplines.

F. Single Discipline Inspector--A certificate or examination record from a recognized code organization, indicating that the applicant has been certified in the discipline for which employed.

G. Provisional--Proof that the building code enforcement officer is presently employed by a municipality or county in South Carolina and is actively in training for a specific certification as a new employee or for advancement to a higher classification.

H. Limited

I. Special Inspector--A certificate or examination record from an approved organization, indicating that the applicant has been certified for the specific type of construction or operation requiring special inspection, for which application is being made, including one or more of the following.

1. Reinforced Concrete
2. Welding
3. High Strength Bolting
4. Steel Frame
5. Non-destructive Testing
6. Structural Masonry
7. Earthwork--including Excavation and Filling and Verification of Soils
8. Modular Retaining Walls
9. Deep Foundations
10. Post Tension Cables
11. Sprayed Fire Resistive Material
12. Exterior Insulation and Finish System
13. Smoke Control
14. Pre-cast Fabrication
15. Seismic Resistance
16. Retention Basins
17. Fire Resistant Penetrations and Joint Systems

J. Contract Inspector--One or more certificates or examination records from an approved organization, indicating that the applicant has been certified as a building official, commercial inspector, residential inspector, plans examiner or single discipline inspector.

8-601. Purpose.

(1) The provisions of these regulations are adopted in implementation of the South Carolina Modular Buildings Construction Act of 1984, Chapter 43 of Title 23 of the South Carolina Code of Laws, 1976 as amended, and are intended to provide uniform standards for modular construction, while preserving and recognizing local governmental responsibility in regard to utilization of modular buildings within a community.

(2) Regulations provided herein are applicable to all modular buildings which are manufactured for and subsequently erected within the State of South Carolina, and all modular buildings manufactured in South Carolina erected in other states under reciprocal agreements. These regulations apply to all buildings erected in the State of South Carolina.

(3) The definition of modular building does not include mobile or manufactured homes, as defined by the U.S. Department of Housing and Urban Development, which is any residential unit constructed to the Federal Mobile Home Construction and Safety Standards, 42 USC Sections 5401 and 24 CFR 3282 and 3283.

8-602. Definitions.

For the purpose of these regulations, the following words shall have the meanings indicated:

(1) "Act" means the South Carolina Modular Buildings Construction Act of 1984, Chapter 43 of Title 23 of the South Carolina Code of Laws, 1976 as amended.

(2) "Approved" means conforming to the requirements of Council.

(3) "Approved inspection agency" means an agency approved by the Council to provide plan review and approval, evaluation, and inspection in addition to adequate follow-up services at the point of manufacture to insure that production units are in full compliance with the provisions of the Modular Building Construction Act. An approved inspection agency must retain a building construction-oriented registered professional engineer or architect who must be responsible for compliance with the Modular Building Construction Act and regulations of the Council.

(4) "Building System" means plans, specifications and documentation for a system of modular buildings or for a type or a system of building components, which may include structural, electrical, mechanical, plumbing and fire protection systems, and other building systems affecting life safety.

(5) "Closed Construction" means that condition when any building, component, assembly, subassembly, or system is manufactured in such a manner that all portions cannot be readily inspected at the erection site without disassembly.

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(6) "Component" means any assembly, subassembly, or combination of elements of closed construction, for use as a part of a building, which may include structural, electrical, mechanical, plumbing and fire protection systems, and other building systems affecting life safety.

(7) "Council" means the South Carolina Building Codes Council as established by Section 6-9-63 of the South Carolina Code of Laws.

(8) "Custom Building" means any building manufactured to individual system specifications and not intended for duplication or repetitive manufacture.

(9) "Damage" means damage or breakage occurring to a modular building or any part thereof causing it to not comply with these regulations.

(10) "Days" shall be construed to be work days, and shall not include Saturdays, Sundays, or holidays.

(11) "Department" means the Department of Labor, Licensing and Regulation for the State of South Carolina.

(12) "Equipment" means all materials, appliances, devices, fixtures, fittings, or accessories installed in or used in the manufacture and assembly of a modular building.

(13) "Field technical service" means clarification in the field by the Council of technical data relating to the application of the regulations.

(14) "Labeled" means equipment bearing a label of certification by an approved listing organization.

(15) "Listed" means equipment or materials included in a list published by an approved listing organization.

(16) "Local Building Official" means the officer or other designated authority, or duly authorized representative, charged with the administration and enforcement of building codes and standards, for any county, city, town, or other political subdivision of the state.

(17) "Manufacturer" means any person, firm, or corporation which manufactures or assembles modular buildings.

(18) "Manufacturer's Representative" means any person employed by a modular building manufacturer who sells, or offers for sale, modular buildings or components.

(19) "Model" means a specific modular building design which is based on size, room arrangement, method of construction, and arrangement of plumbing, mechanical, or electrical equipment and systems therein.

(20) "Open Construction" means any modular building, building component, assembly, or system manufactured in such a manner that all parts or processes of manufacture can be readily inspected at the installation site without disassembly.

(21) "Site" means the location on which a modular building is erected or is to be erected.

(22) "Standard Design" means any building, system, model, series, or component intended for duplication or repetitive manufacture.

(23) "System Prototype" means a specific design of modular building designated by the manufacturer to be the standard for reproduction. A system prototype may include options that do not affect the performance or function of any system.

(24) "System Recognition" means a system of construction approved by an approved inspection agency.

(25) "Valuation" means the total fair market value of a structure in its completed state, including the combined costs of the modular building or components, the foundation system, porches steps and other "add-ons," additional required mechanical equipment and the installation and connection of all utilities.

8-604. Adoption of Model Codes.

(1) The design and fabrication of modular buildings shall comply with the requirements of the building codes as listed in Chapter 9, Title 6, of the South Carolina Code of Laws, 1976 as amended.

(2) Energy code. The design and installation of thermal performance standards for all modular buildings shall comply with the requirements of the most recent edition of the International Energy Conservation Code as adopted under Title 6 Chapter 10 of the South Carolina Code of Laws, 1976 as amended.

(3) Building official. Where reference is made, in any building code, to the building, plumbing, gas or mechanical official, administrative authority, enforcement official or any such authoritative person, it shall mean the Council administration.

(4) All service connections and foundations installed at the building site shall be regulated by the local building official.

(5) Barrier Free Design. The design and erection of modular buildings for the purpose of public use must be in compliance with the Barrier Free Design Standard, Code of Laws of South Carolina, 1976 as amended, Sections 10-5-210 through 10-5-250, and adopted regulations.

8-607. Approved Inspection Agency Authority.

(1) An approved inspection agency shall conduct inspections at the manufacturing plant to determine compliance with the approved plans. Violations of any of the provisions of these regulations or variations from the approved plans may be cause for revocation of the plan approval and shall be reported to the Council within one (1) day after discovery.

(2) Failure on the part of an approved inspection agency to fulfill its responsibilities or notify the Council of violations of these regulations or variations from the approved plans is cause for revocation of its approval.

(3) An approved inspection agency shall perform final plan review and approval, inspection, and certification of a single family residential modular building. Upon final plan review and approval by an approved inspection agency of a plan as meeting the requirements of the Modular Building Construction Act and the regulations of the council, a copy of the approved plan must be filed with the Department of Labor, Licensing and Regulation. Upon filing of an approved plan with the department by an approved inspection agency, a manufacturer may request from the department certification labels for units manufactured to the approved plan. Each certification label must bear the serial number of the unit for which it is issued and only may be attached upon final inspection by an approved inspection agency.

(4) An approved inspection agency shall perform plan approval, inspection, and certification of commercial or multifamily modular buildings. Upon review by the approved inspection agency, the plans must be submitted to the Department of Labor, Licensing and Regulation for final plan review and approval.”

(a) The design review for required plan submittal shall include a completed application on forms obtainable from the Council and three (3) complete sets of scaled plans, specifications and structural, electrical, mechanical, and energy calculations prepared by an architect or engineer licensed to practice in the State of South Carolina; quality control manuals, calculations, and any required test results for each system and prototype to be approved. The approved inspection agency shall designate its approval by affixing its seal to each print, the cover of the quality control manual, and supporting data prior to submittal.

(b) The approved inspection agency shall submit for the manufacturer, a request for Council review which may include any or all elements of building systems such as structural, mechanical, plumbing, and electrical components. All modular building system submittals must include at least the following:

(1) Structural:

- (i) details specifying methods of field connection of units or models to each other and foundations;
- and
- (ii) all exterior elevations; and
- (iii) elevations and details of elements, walls or sections thereof providing resistance to vertical loads or lateral forces; and
- (iv) floor plans and floor framing plans; and
- (v) details of framing system showing direction of face grain of plywood, blocking, connections, etc.;
- and
- (vi) vertical load calculations; and
- (vii) lateral force calculations; and
- (viii) overturning and uplift calculations; and
- (ix) details of all structural connections such as chord splices, corner and wall intersection details, post and beam splices, etc., (both inplant and onsite connections must be shown); and
- (x) complete roof framing plan showing method of framing, direction of face grain of plywood, connections, etc., roof covering material and roofing specifications; and
- (xi) cross sections as necessary to identify major building components; and
- (xii) information for plywood when used, such as thickness, index number, grade, direction of face grain, etc., and lumber grades; and
- (xiii) details of flashing, such as at openings and at penetrations through roofs flashing material and gage to be used; and
- (xiv) attic access and attic ventilation; and

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- (xv) wall and soffit material as well as finish; and
- (xvi) interior wall and ceiling finish; and
- (xvii) fire separation details, when required by code; and
- (xviii) opening treatment for doors and windows including door swings; and
- (xix) all foundation vents and under floor access; and
- (xx) structural steel materials, sizes, finishes, and connection details; and
- (xxi) reinforcing, concrete and mesh materials, strengths, grades, sizes, spacing and details in accordance with "Building Code Requirements for Reinforced Concrete, ACI 318"; and
- (xxii) all work that is required on the building site; and
- (xxiii) details of all elements for access and use by people with disabilities.

(2) Plumbing:

- (i) plan and riser diagram of the plumbing layout showing size of piping, fittings, traps, vents, cleanouts and valves, etc., for gas, water, drainage, waste, and vent systems; and
- (ii) plumbing materials, make, model, and rating/capacity of fixtures; and
- (iii) make and model of safety controls and their locations; and
- (iv) intervals and method of horizontal piping support; and
- (v) vertical piping and valve supports; and
- (vi) location of flues and vents above roofs and required clearances from air intakes, other vents and flues, etc.; and
- (vii) method of testing.

(3) Mechanical:

- (i) location of all equipment and appliances; and
- (ii) listed or labeled appliances, units or equipment; and
- (iii) heat loss and heat gain calculations; and
- (iv) BTU, input and output rating of all appliances and equipment; and
- (v) duct and register locations, including size, and materials; and
- (vi) clearance from combustible material or surfaces for all appliances, equipment, ducts, flues, and chimneys; and
- (vii) method of providing required combustion air and return air; and
- (viii) location of flues, vents and chimneys, and clearances for air intakes; and
- (ix) details and approvals for dampers in ducts penetrating fire separation walls, floors and ceilings; and
- (x) method of testing; and
- (xi) method of securing every appliance and its components to avoid displacement and movement from vibration and road shock.

(4) Electrical:

- (i) plan and detail of service equipment, including service entrance, conductors, service raceway and clearances, above ground, and above structures; and
- (ii) method and detail for grounding service equipment; and
- (iii) diagram of the entire electrical installation; and
- (iv) complete load calculations for service and feeders; and
- (v) identification and sizes of all feeders and branch circuits; and
- (vi) size, rating, and location of main disconnect/overcurrent protective devices; and
- (vii) method of interconnection between modules or units and location of connections; and
- (viii) location of all outlets and junction boxes; and
- (ix) the protection of nonmetallic sheathed cable in locations subject to mechanical damage; and
- (x) method of backing, mounting, and strapping of fixtures and wiring; and
- (xi) name plate rating of all appliances and equipment; and
- (xii) method of testing; and
- (xiii) labeling of wiring, fixtures, and equipment.

(5) Calculations and test procedures. When the composition or configuration of elements, assemblies, or details of structural members are such that calculations of their safe load carrying capacity, basic structural integrity, or fire resistance cannot be accurately determined in accordance with generally established principles

of engineering design, such structural properties, or fire resistance of the members or assemblies may be established by an approved inspection agency.

(6) Design plan approval expiration. Design plan approvals shall expire on the effective date of any applicable change to these regulations and the building codes referenced herein, when the change affects a system or component of the model involved.

(7) It shall be the responsibility of the manufacturer to submit an application for design plan renewal to the Council.

(8) Revocation of approval. Revocation of a plan approval shall occur upon the failure of the manufacturer to comply with the provisions of these regulations.

(9) Nonconforming application. If an application does not conform to the requirements of these regulations, the applicant shall be notified in writing. If corrections have not been received by the Council within ninety (90) days of such notice, the application will be deemed abandoned. Subsequent submission shall be as for a new application.

(10) Evidence of Council approval. Approved plans and specifications shall be evidenced by acknowledgment of the Council. Approved copies of the plans and specifications shall be returned to the manufacturer with a letter indicating the limitations of the approval. A copy of the letter shall be available for inspection use at each place of manufacture.

(11) Manufacturer's unit data plate. The manufacturer shall install on all modular building units, a data plate which shall contain, but not be limited to the following design information:

- (a) maximum live load; and
- (b) maximum snow load; and
- (c) maximum wind load; and
- (d) seismic zone; and
- (e) thermal transmittance value (U_o) of: walls, roof/ceiling, and floors.

(12) The data plate shall be permanently mounted in a conspicuous location.

(13) Manufacturer's component data plate. The manufacturer shall install on each modular component or package of modular components a data plate which indicates the limiting characteristics and design criteria of the components for determining how they can be installed and utilized within their capabilities.

8-613. Multiple Site Manufacturing.

(1) If a manufacturer plans to produce at more than one (1) location, required plan approval may be obtained for all locations at the time of filing subject to submission of the following:

- (a) one (1) set of application forms for required plan approval designating all locations of manufacture; and
- (b) two (2) sets of plans and specifications, plus one (1) additional set for each location of manufacturer; and
- (c) filing fees as designated in these regulations; and
- (d) two (2) quality control manuals, plus one (1) additional manual for each location of manufacture.

(2) If a manufacturer wishes to obtain approval for one (1) or more points of manufacture, a manufacturer's license, and at least one (1) manufacturer's representative license must be issued for each location.

Fiscal Impact Statement:

There will be no cost incurred by the State or any of its political subdivisions for these regulations.

Statement of Rationale:

The updated regulations will bring the Building Codes Council into compliance with Act 179 from the 2013-2014 legislative session.

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Document No. 4537
DEPARTMENT OF LABOR, LICENSING AND REGULATION
BUILDING CODES COUNCIL
CHAPTER 8
Statutory Authority: 1976 Code Sections 6-9-55, 40-1-50, and 40-1-70

8-145. Fees.
8-618. Schedule of Fees.

Synopsis:

The South Carolina Department of Labor, Licensing and Regulation proposes to amend Regulations 8-145 and 8-618 to remove the existing schedule of fees, and to cross-reference the fees in their new location in Chapter 10.

A Notice of Drafting was published in the *State Register* on October 24, 2014.

Instructions:

Regulations 8-145 and 8-618 are amended as shown below.

Text:

8-145. Fees.

The Council may charge fees as shown in South Carolina Code of Regulations Chapter 10-7 and on the South Carolina Building Codes Council website at <http://llr.sc.gov/POL/BCC/>.

8-618. Schedule of Fees.

The Council may charge fees as shown in South Carolina Code of Regulations Chapter 10-7 and on the South Carolina Building Codes Council website at <http://llr.sc.gov/POL/BCC/>. All application and filing fees are payable at the time of submittal and are nonrefundable.

Fiscal Impact Statement:

There will be no cost incurred by the State or any of its political subdivisions for these regulations.

Statement of Rationale:

The updated regulations will comport with establishment of fees in Chapter 10 of the Regulations.

Document No. 4503

**DEPARTMENT OF LABOR, LICENSING AND REGULATION
BOARD OF REGISTRATION FOR PROFESSIONAL ENGINEERS AND SURVEYORS
CHAPTER 49**

Statutory Authority: 1976 Code Sections 40-1-50, 40-1-70, and 40-22-60

49-103. Fees.

Synopsis:

The South Carolina Department of Labor, Licensing and Regulation proposes to amend Regulation 49-103 to remove the existing schedule of fees, cross-reference the fees in their new location in Chapter 10, and include in the regulation a link to the Board's website where the fees will also appear.

A Notice of Drafting was published in the *State Register* on September 26, 2014.

Instructions:

Regulation 49-103 is amended as shown below.

Text:

49-103. Fees.

A. The Board may charge fees as shown in South Carolina Code of Regulations Chapter 10-14 and on the South Carolina Board of Registration for Professional Engineers and Surveyors website at <http://lir.sc.gov/POL/Engineers/>.

B. No fee, or any part thereof, paid by any applicant for application, examination and/or registration will be refunded once an application has been submitted to the Board for processing. Refunds will not be made.

Fiscal Impact Statement:

There will be no cost incurred by the State or any of its political subdivisions for this regulation.

Statement of Rationale:

The updated regulation will centralize fee schedules and remove duplicative and outdated information.

Document No. 4504

**DEPARTMENT OF LABOR, LICENSING AND REGULATION
ENVIRONMENTAL CERTIFICATION BOARD
CHAPTER 51**

Statutory Authority: 1976 Code Sections 40-1-50, 40-1-70, and 40-23-60

51-6. Fees.

Synopsis:

The South Carolina Department of Labor, Licensing and Regulation proposes to amend Regulation 51-6 to remove the existing schedule of fees, cross-reference the fees in their new location in Chapter 10, and include in the regulation a link to the Board's website where the fees will also appear.

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A Notice of Drafting was published in the *State Register* on September 26, 2014

Instructions:

Regulation 51-6 is amended as shown below.

Text:

51-6. Fees.

The Board may charge fees as shown in South Carolina Code of Regulations Chapter 10-15 and on the South Carolina Environmental Certification Board website at <http://llr.sc.gov/POL/Environmental/>.

Fiscal Impact Statement:

There will be no cost incurred by the State or any of its political subdivisions for this regulation.

Statement of Rationale:

The updated regulation will centralize fee schedules and remove duplicative and outdated information.

Document No. 4555
DEPARTMENT OF LABOR, LICENSING AND REGULATION
OFFICE OF STATE FIRE MARSHAL
CHAPTER 71

Statutory Authority: 1976 Code Sections 23-9-60, 23-9-550, 23-35-45, and 23-36-80

71-8300 through 71-8306. Article 8, Office of State Fire Marshal

Synopsis:

The South Carolina Department of Labor, Licensing and Regulation, Office of State Fire Marshal, proposes to eliminate redundant and unnecessary regulations; update the remaining existing regulations; use a standardized format for all regulations; and to make the current regulations compatible with current federal and state statutes.

A Notice of Drafting was published in the *State Register* on October 24, 2014.

Instructions:

Regulations 71-8300 through 71-8306 are amended as shown below.

Text:

SUBARTICLE 1
FIRE PREVENTION AND LIFE SAFETY

71-8300. FIRE PREVENTION AND LIFE SAFETY.

(Statutory Authority: 1976 Code Sections 23-9-60, 39-41-260, 40-82-70)

71-8300.1. General.

A. Title. These regulations shall be known as the State Fire Marshal's Rules and Regulations.

B. Intent.

1. The purpose of these regulations is:

a. to safeguard to a reasonable degree, life and property from fire, explosion, dangerous conditions, natural disasters, acts of terrorism, and other hazards associated with the construction, alteration, repair, use, and occupancy of buildings, structures, or premises, and

b. to provide safety to fire fighters and emergency responders during emergency situations.

2. These regulations shall be the minimum standards required by the Office of State Fire Marshal (OSFM) for fire prevention and life safety in South Carolina for all buildings and structures.

C. Applicability.

1. These regulations shall apply to state, county, municipal, and private buildings, structures, or premises unless excluded by these regulations or state statute.

2. All buildings, structures, or premises shall be constructed, altered, or repaired in conformance with these regulations.

3. All equipment or systems in a building, structure, or premise shall be constructed, installed, altered, or repaired in conformance with these regulations.

4. These regulations become effective immediately upon the publication as final regulations in the South Carolina State Register.

5. These regulations shall not conflict with any state statute, code, or ordinance adopted pursuant to S.C. Code Ann. Section 6-9-5 et. seq., 1976, as amended, by any municipality or political subdivision. In the event of a conflict, such statute, code, or ordinance shall apply.

6. These regulations shall not apply to:

a. Buildings constructed, or occupied exclusively as one and two-family dwellings, unless amended by these or other state regulations. Conversion of such buildings to another use that is not regulated under the IRC but is regulated under the IBC is considered a change of occupancy, and such buildings must comply with the applicable provisions of the IBC for such a change of use.

D. Existing Buildings.

1. Existing buildings, structures, or premises shall be permitted to continue in operation under the code the buildings, structures, or premises were constructed unless addressed by these regulations or state statute.

2. Alterations, repairs, additions, and rehabilitation to an existing building, structure, or premise shall fully comply with the current codes.

3. Change of use or occupancy of an existing building shall comply with the current code requirements for change of occupancy classification.

E. Acronyms and Definitions: The following references apply throughout these regulations. Words not defined in these regulations shall have the meaning stated in the referenced codes and standards adopted by these regulations.

1. "AHJ" means Authority Having Jurisdiction, which is the SFM, or his agents, or any local fire official covered by S.C. Code Ann. Section 23-9-30, 1976, as amended.

2. "ATF" means the United States Department of Justice, Bureau of Alcohol, Tobacco, Firearms and Explosives.

3. "Bulk hydrogen compressed gas system" means an assembly of equipment that consists of, but is not limited to, storage containers, pressure regulators, pressure relief devices, compressors, manifolds, and piping with a storage capacity of more than 400 cubic feet (approximately 3000 gal.) of compressed hydrogen gas (or 5000 scf), including unconnected reserves on hand at the site, and terminates at the source valve.

4. "Bulk liquefied hydrogen gas system" means an assembly of equipment that consists of, but is not limited to, storage containers, pressure regulators, pressure relief devices, vaporizers, liquid pumps, compressors manifolds, and piping, with a storage capacity of more than 39.7 gal. of liquidized hydrogen, including unconnected reserves on hand at the site, and terminates at the source valve.

5. "Citation" means a summons to appear before the OSFM because of a violation of any part or all of this regulation and may carry a monetary fine of up to \$2,000 per violation.

6. "Consumer Fireworks" means any small device designed to produce visible effects by combustion and which must comply with the construction, chemical composition, and labeling regulations of the U.S. Consumer Product Safety Commission, as set forth in Title 16, Code of Federal Regulations, parts 1500 and 1507. Some

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small devices designed to produce audible effects are included, such as whistling devices, ground devices containing fifty (50) mg or less of explosive materials, and aerial devices containing 130 mg or less of explosive materials. Consumer fireworks are classified as fireworks UN0336 and UN0337 by the USDOT at 49 CFR 172.101. This term does not include fused setpieces containing components which together exceed 50 mg of salute powder. Consumer fireworks are further defined as those classified by the USDOT hazard classification 1.4g. These fireworks were formerly known as "Class C Fireworks."

7. "Container" means all vessels including, but not limited to tanks, cylinders, or pressure vessels used for the storage of hydrogen.

8. "Department" means the Department of Labor, Licensing and Regulation, Division of Fire and Life Safety.

9. "Display Fireworks" means large fireworks designed primarily to produce visible or audible effects by combustion, deflagration, or detonation. This term includes, but is not limited to, salutes containing more than two (2) grains (130 mg) of explosive materials, aerial shells containing more than 40 grams of pyrotechnic compositions, and other display pieces which exceed the limits of explosive materials for classification as "Consumer Fireworks." Display fireworks are classified as fireworks UN0333, UN0334, or UN0335 by the USDOT at 49 CFR 172.101. This term also includes fused setpieces containing components which together exceed fifty (50) mg of salute powder. Display fireworks are further defined as those classified by the USDOT as hazard classification 1.3g. These fireworks were formerly known as "Class B Fireworks."

10. "DOI" means the Department of Insurance.

11. "DSS" means the Department of Social Services.

12. "Engineered hydrogen systems" means systems or equipment that is custom designed for a particular application.

13. "Existing Building" means a building, structure, or premise for which preliminary or final drawings have been approved by the appropriate agency as provided in these regulations, in buildings where construction has begun, or those occupied on or before the date of adoption of these regulations.

14. "Fire Prevention" means any activity to prevent fire before fire occurs.

15. "Fireworks" means any composition or device designed to produce a visible or an audible effect by combustion, deflagration, or detonation, and which meets the definition of "consumer fireworks" or "display fireworks" as defined by this section.

16. "Firm" means any person, partnership, corporation, association, or governmental entity.

17. "Fixed Fire Extinguishing System" means a pre-engineered fire extinguishing system.

18. "Hydrogen" is an element of the periodic table which, at room temperature and pressure, but can be compressed and/or refrigerated into a liquefied state.

19. "Hydrogen facility" is a fueling station or a fuel cell site that will store or dispense hydrogen for use as a transportation fuel, motor fuel, or in a fuel cell.

20. "Hydrogen generation system" means a packaged, factory matched, or site constructed hydrogen gas generation appliance or system such as (a) an electrolyzer that uses electrochemical reactions to electrolyze water to produce hydrogen gas; (b) a reformer that converts hydrocarbon fuel to a hydrogen-rich stream of composition and condition suitable for a type of device using the hydrogen. It does not include hydrogen generated as a byproduct of a waste treatment process.

21. "IBC" means the International Building Code.

22. "ICC" means the International Code Council.

23. "IFC" means the International Fire Code.

24. "IFGC" means the International Fuel Gas Code.

25. "IRC" means the International Residential Code.

26. "LP-Gas" means Liquefied Petroleum Gas as defined in 40-82-20.

27. "Motion Picture" means, for the purposes of this item, any audiovisual work with a series of related images either on film, tape, or other embodiment, where the images shown in succession impart an impression of motion together with accompanying sound, if any, which is produced, adapted, or altered for exploitation as entertainment, advertising, promotional, industrial, or educational media.

28. "MSDS(s)" means Material Safety Data Sheet(s).

29. "NFPA" means the National Fire Protection Association.

30. "OSFM" means the Office of State Fire Marshal.

31. "Person" means an individual, partnership, or corporation;
32. "Portable Fire Extinguisher" means a portable device containing extinguishing agent that can be expelled under pressure for the purpose of suppressing or extinguishing a fire.
33. "Pre-engineered hydrogen system" means a system or device that has been designed with the intention of mass production and sales to the public, which uses or produces hydrogen in its function.
34. "Proximate Audience" means any indoor use of pyrotechnics and the use of pyrotechnics before an audience located closer than the distances allowed by NFPA 1123.
35. "Public Firework Display" means a presentation of Display or Consumer Fireworks for a public gathering.
36. "Pyrotechnics" means any composition or device designed to produce visible or audible effects for entertainment purposes by combustion, deflagration, or detonation.
37. "S.C." means South Carolina.
38. "Servicing" includes maintenance, recharging, or hydrostatic testing of a Portable Fire Extinguisher or a Fixed Fire Extinguishing System.
39. "SFM" means the State Fire Marshal or his agent.
40. "Theatrical Pyrotechnics" means pyrotechnic devices for professional use in the entertainment industry similar to consumer fireworks in chemical composition and construction but not intended for consumer use.
41. "USDOT" means U.S. Department of Transportation.

71-8300.2. Codes and Standards.

A. All references to codes and standards found in these regulations refer to the editions specified in the IFC unless otherwise stated in these regulations or adopted by state statutes.

B. The requirements of the IFC, International Fire Code, (as adopted pursuant to S.C. Code Ann. Section 6-9-5, et. seq., 1976, as amended) shall constitute the minimum standards for fire prevention and life safety protection for construction, occupancy, and use of all buildings, structures, and premises within the scope of these regulations except as modified by these regulations. In addition, to the extent to which they can be applied without conflicting with other state regulations or state statutes, the following sections of Chapter 1 of the IFC shall apply:

1. Scope and General Requirements (Section 101)
2. Applicability (Section 102)
3. Liability (Section 103.4)
4. General Authority and Responsibilities (Section 104), except:
 - a. Authority at fires and other emergencies (104.11)
5. Maintenance (Section 107)
6. Violations (Section 109)
7. Unsafe Buildings (Section 110)

C. The requirements of NFPA 10, Standard for Portable Fire Extinguishers, shall be used as referenced within the adopted ICC codes for the installation, servicing, maintenance, recharging, repairing, and hydrostatic testing of all portable fire extinguishers.

D. The requirements of the following NFPA standards shall be used as referenced within the adopted ICC codes for the design, installation, testing and maintenance of fixed fire extinguishing systems in South Carolina except as modified by these regulations.

1. NFPA 11, Standard for Low-, Medium-, and High-Expansion Foam
2. NFPA 12, Standard on Carbon Dioxide Extinguishing Systems
3. NFPA 12A, Standard on Halon 1301 Fire Extinguishing Systems
4. NFPA 17, Standard for Dry Chemical Extinguishing Systems
5. NFPA 17A, Standard for Wet Chemical Extinguishing Systems
6. NFPA 750, Standard on Water Mist Fire Protection Systems
7. NFPA 2001, Standard on Clean Agent Fire Extinguishing Systems
8. NFPA 2010, Standard for Fixed Aerosol Fire Extinguishing Systems

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E. The requirements of the following NFPA standards shall be used as referenced within the adopted ICC codes for the design, installation, testing, and maintenance of water-based extinguishing systems in South Carolina except as modified by these regulations.

1. NFPA 13, Standard for the Installation of Sprinkler Systems
2. NFPA 13D, Standard for the Installation of Sprinkler Systems in One- and Two-Family Dwellings and Manufactured Homes
3. NFPA 13R, Standard for the Installation of Sprinkler Systems in Low-Rise Residential Occupancies
4. NFPA 14, Standard for the Installation of Standpipe and Hose Systems
5. NFPA 15, Standard for Water Spray Fixed Systems for Fire Protection
6. NFPA 16, Standard for the Installation of Foam-Water Sprinkler and Foam-Water Spray Systems
7. NFPA 18, Standard on Wetting Agents
8. NFPA 20, Standard for the Installation of Stationary Pumps for Fire Protection
9. NFPA 22, Standard for Water Tanks for Private Fire Protection
10. NFPA 24, Standard for the Installation of Private Fire Service Mains and Their Appurtenances
11. NFPA 25, Standard for the Inspection, Testing, and Maintenance of Water-Based Fire Protection Systems
12. NFPA 214, Standard on Water-Cooling Towers

F. The requirements of NFPA 30, Flammable and Combustible Liquids Code, shall be used as referenced within the adopted ICC codes for the storing and handling of flammable and combustible liquids in South Carolina except as modified by these regulations.

G. The requirements of NFPA 30A, Code for Motor Fuel Dispensing Facilities and Repair Garages, shall be used as referenced within the adopted ICC codes for the storing, handling, and dispensing of flammable and combustible liquids at service stations, farms, and isolated sites in South Carolina except as modified by these regulations.

H. The requirements of NFPA 52, Vehicular Gaseous Fuel Systems Code, shall be used as referenced within the adopted ICC codes for storing, handling, and dispensing vehicular alternative fuels in South Carolina except as modified by these regulations.

I. The requirements of NFPA 54, National Fuel Gas Code, shall be used as referenced within the adopted ICC codes for design, materials, components, fabrication, assembly, installation, testing, inspection, operation, and maintenance installation of fuel gas piping systems, appliances, equipment, and related accessories, installation, combustion, and ventilation air and venting in South Carolina except as modified by these regulations.

J. The requirements of NFPA 58, Liquefied Petroleum Gas Code, shall be used as referenced within the adopted ICC codes for the design, construction, location, installation and operation of equipment for storing, handling, transporting by tank truck or tank trailer, and use of LP-Gases and the odorization of such gases in South Carolina except as modified by these regulations.

K. The requirements of NFPA 59, Utility LP-Gas Plant Code, shall be used as referenced within the adopted ICC codes for the design, construction, location, installation, operation, and maintenance of refrigerated and non-refrigerated utility gas plants to the point where LP-Gas or an LP-Gas and air mixture is introduced into the utility distribution system in South Carolina except as modified by these regulations.

L. The requirements of NFPA 70, National Electrical Code, shall be used as referenced within the adopted ICC codes for fire prevention and life safety from hazards of electricity in South Carolina except as modified by these regulations.

M. The requirements of NFPA 72, National Fire Alarm and Signaling Code, shall be used as referenced within the adopted ICC codes for the design, installation, testing, and maintenance of fire alarm systems in South Carolina except as modified by these regulations.

N. The requirements of NFPA 96, Standard for Ventilation Control and Fire Protection of Commercial Cooking Operations, shall be used as referenced within the adopted ICC codes for ventilation control and fire protection of commercial cooking operations in South Carolina except as modified by these regulations.

O. The requirements of NFPA 99, Health Care Facilities Code, shall be used as referenced within the adopted ICC codes for flammable and non-flammable medical gasses used in health care and other facilities intended for inhalation or sedation, but not limited to, analgesia systems for dentistry, podiatry, veterinary, and similar uses in South Carolina except as modified by these regulations.

P. The requirements of NFPA 101, Life Safety Code, shall be used as referenced within the adopted ICC codes for fire prevention and life safety in South Carolina when evaluating alternative methods of fire and life safety per R. 71-8300.10 except as modified by these regulations.

Q. The requirements of the NFPA 102, Standard for Grandstands, Folding and Telescopic Seating, Tents, and Membrane Structures, shall be used as referenced within the adopted ICC codes for fire prevention and life safety for all tents and membrane structures normally used in South Carolina except as modified by these regulations.

R. The requirements of NFPA 160, Standard for the Use of Flame Effects Before an Audience, including Annexes B and C, shall be used as referenced within the adopted ICC codes for all flame effects use in proximate audience pyrotechnics displays or motion picture special effects in South Carolina except as modified by these regulations.

S. The requirements of NFPA 407, Standard for Aircraft Fuel Servicing, shall be used as referenced within the adopted ICC codes for the storing, handling, and dispensing of flammable and combustible liquids at private aircraft fueling facilities in South Carolina except as modified by these regulations.

T. The requirements of NFPA 409, Standard on Aircraft Hangars, shall be used as referenced within the adopted ICC codes for the design construction, occupancy, and use of aircraft hangars in South Carolina except as modified by these regulations.

U. The requirements of NFPA 495, Explosive Materials Code, shall be used as referenced within the adopted ICC codes for the manufacture, transportation, use and storage for all explosives in South Carolina, except as modified herein.

V. The requirements of NFPA 1122, Code for Model Rocketry, shall be used as referenced within the adopted ICC codes for model rocketry associated with public firework displays or proximate audience pyrotechnic displays or motion picture special effects in South Carolina except as modified by these regulations.

W. The requirements of NFPA 1123, Code for Fireworks Display, including Annex A and E, shall be used as referenced within the adopted ICC codes for all firework displays in South Carolina except as modified by these regulations.

X. The requirements of NFPA 1124, Code for the Manufacture, Transportation, Storage, and Retail Sales of Fireworks and Pyrotechnic Articles, shall be used as referenced within the adopted ICC codes for transportation, storage, and use of all display fireworks and pyrotechnic articles used for proximate audience pyrotechnic displays or motion picture special effects in South Carolina except as modified by these regulations.

Y. The requirements of NFPA 1126, Standard for the Use of Pyrotechnics Before a Proximate Audience, including Annexes A, B, and D, shall be used as referenced within the adopted ICC codes for all proximate audience displays in South Carolina except as modified by these regulations.

Z. The requirements of NFPA 1127, Code for High Power Rocketry, shall be used as referenced within the adopted ICC codes for all high power rockets used for proximate audience pyrotechnic displays or motion picture special effects in South Carolina except as modified by these regulations.

AA. The requirements of NFPA 1142, Standard on Water Supplies for Suburban and Rural Fire Fighting, shall be used as referenced within the adopted ICC codes for water supplies for rural fire fighting in South Carolina except as modified by these regulations.

BB. The OSFM shall post and maintain a list of the currently adopted editions of the codes and standards listed above on the OSFM website.

CC. The codes and standards listed in R.71-8300.2 that are adopted by the OSFM shall be accessible for viewing at no cost to the public through the OSFM website.

71-8300.3. Alternate Materials and Alternate Methods of Construction.

A. The requirements of these regulations are not intended to prevent the use of any material or method of construction not specifically prescribed by the regulations, adopted codes, or standards enforced by the OSFM. The SFM has the authority to accept alternative methods of compliance within the intent of these regulations, after finding that the materials and method of work offered is for the purpose intended, at least the equivalent of that prescribed in these regulations in quality, strength, effectiveness, fire resistance, durability, and safety. The SFM shall require submission of sufficient evidence or proof to substantiate any claim made regarding use of alternative materials and methods.

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B. Compliance with applicable standards of the National Fire Protection Association, or other nationally recognized fire safety standards, may be used for consideration of alternative methods if found suitable by the SFM.

71-8300.4. Construction Documents and Shop Drawings.

A. Construction documents and/or shop drawings, as appropriate, must be submitted to the OSFM for the following:

1. Fire sprinkler systems per S.C. Code Ann. Section 40-10-260.
2. LP-Gas systems per R.71-8304.
3. Hydrogen facilities per S.C. Code Ann. Section 23-9-510 et seq.
4. Facilities that the OSFM is contractually obligated to review.

B. Construction documents. Construction documents and shop drawings shall be in accordance with this section.

1. Submittals. Construction documents and supporting data shall be submitted in one complete set with each application for a review and in such form and detail as required by the OSFM reviewer to be able to determine compliance.

2. The construction documents and shop drawings shall be prepared by the appropriate registered design professional(s) or other LLR licensee as required by statute or regulation.

a. Practice of architecture as defined in S.C. Code Ann. Section 40-3-20 requires a licensed architect unless exempt per S.C. Code Ann. Section 40-3-290.

b. Practice of engineering as defined in S.C. Code Ann. Section 40-22-20 requires a licensed engineer unless exempt per S.C. Code Ann. Section 40-22-280.

c. Fire sprinkler system documentation shall be prepared in accordance with the specific provisions in S.C. Code Ann. Sections 40-10-250 and 40-10-260.

3. The OSFM is authorized to not require the submission of construction documents and supporting data if:

a. they are not required to be prepared by a registered design professional, and

b. it is found that the nature of the work applied for is such that review of construction documents is not necessary to obtain compliance with this code.

4. Examination of documents. OSFM shall examine or cause to be examined the submitted construction documents and shall ascertain by such examinations whether the work indicated and described is in accordance with the applicable requirements.

5. Information on construction documents. Construction documents shall be drawn to scale upon suitable material. Electronic media documents are allowed to be submitted when approved by the OSFM. Construction documents shall be of sufficient clarity to indicate the location, nature and extent of the work proposed and show in detail that it will conform to the provisions of these regulations and other relevant laws, rules and regulations as determined by the OSFM.

a. Fire protection system shop drawings. Shop drawings for fire protection system(s) reviewed by OSFM shall be submitted to indicate compliance with these regulations and the referenced codes and standards, and shall be approved prior to the start of installation. Shop drawings shall contain all information as required by the applicable statutes, regulations, adopted codes and referenced installation standards.

6. Applicant responsibility. It shall be the responsibility of the applicant to ensure that the construction documents include all of the fire protection requirements and the shop drawings are complete and in compliance with the applicable statutes, regulations, codes and standards.

7. Approved documents. Construction documents approved by the OSFM are approved with the intent that such construction documents comply in all respects with this code. Review and approval by the OSFM shall not relieve the applicant of the responsibility of compliance with this code.

a. Phased approval. The OSFM is authorized to issue approval for the construction of part of a structure, system or operation before the construction documents for the whole structure, system or operation have been submitted, provided that adequate information and detailed statements have been filed complying with pertinent requirements of this code. The holder of such approval for parts of a structure, system or operation shall proceed at the holder's own risk with the building operation and without assurance that approval for the entire structure, system or operation will be granted.

b. Compliance with code. The issuance or granting of approval shall not be construed to be an approval of any violation of any of the provisions of these regulations. Approvals presuming to give authority to violate or cancel the provisions of these regulations shall not be valid. The issuance of approval based on construction documents and other data shall not prevent an AHJ from requiring the correction of errors in the construction documents and other data. Any addition to or alteration of approved construction documents shall be approved in advance by the AHJ, as evidenced by the issuance of a new or amended approval.

8. Corrected documents. Where field conditions necessitate any substantial change from the approved construction documents, the AHJ shall have the authority to require the corrected construction documents to be submitted for approval.

9. Revocation. The OSFM is authorized to revoke approval issued under the provisions of these regulations when it is found by inspection or otherwise that there has been a false statement or misrepresentation as to the material facts in the application or construction documents or shop drawings on which the permit or approval was based including, but not limited to, any one of the following:

- a. The permit or approval is used for a location or establishment other than that for which it was issued.
- b. The permit or approval is used for a condition or activity other than that listed in the permit.
- c. Conditions and limitations set forth in the permit or approval have been violated.
- d. There have been any false statements or misrepresentations as to the material fact in the application for permit or plans submitted or a condition of the permit.
- e. The permit or approval is used by a different person or firm than the name for which it was issued.
- f. Failure, refusal, or neglect to comply with orders or notices duly served in accordance with the provisions of this regulation within the time provided therein.
- g. The permit or approval was issued in error or in violation of a statute, regulation, code, or standard.

71-8300.5. Incident Reporting.

A. Purpose. These provisions are intended to help the State and its local governmental entities to develop fire reporting and analysis capability for their own uses, to obtain data that can be used to more accurately assess and subsequently combat the fire problem at the State or local level, and to support the efforts of the National Fire Data Center in the United States Fire Administration (USFA) to gather and analyze information on the magnitude of the nation's fire problem, as well as its detailed characteristics and trends.

B. The local fire chief or his designee shall furnish to the OSFM the following information:

- 1. Fire fatalities from fires occurring within the fire department's jurisdiction, shall be reported directly to the OSFM immediately.
- 2. Firefighter line-of-duty deaths shall be reported directly to the OSFM immediately.
- 3. By the 15th day of each month, information concerning all incidents responded to by the fire department during the preceding month shall be reported. This information shall be reported by a method and in a format approved by the OSFM. The National Fire Incident Reporting System (NFIRS) shall serve as the minimum standard reporting method and format for these monthly reports.

C. These reports are privileged against liability unless the report is made with actual malice.

71-8300.6. Fire Investigations.

A. Purpose.

1. The intent of this section is to assist OSFM in improving its ability to provide fire prevention and fire education efforts and data; and, to support OSFM licensing and permitting functions.

2. It is not the intent of this section for OSFM to perform criminal investigation functions which overlap the authority and responsibility of police and other enforcement agencies.

B. The OSFM shall have the authority to investigate the cause, origin, and circumstances of any fire, explosion or other hazardous condition.

C. Information that could be related to trade secrets or processes shall not be made part of the public record, except as directed by a court of law.

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SUBARTICLE 2 FIRE PREVENTION AND LIFE SAFETY FOR SPECIAL OCCUPANCIES

71-8301. FIRE PREVENTION AND LIFE SAFETY FOR SPECIAL OCCUPANCIES.
(Statutory Authority: 1976 Code Section 23-9-60)

71-8301.1. General.

- A. The purpose of this Subarticle is to provide specific requirements for certain occupancies.
- B. This regulation shall apply to:
 - 1. New and existing foster homes.
 - 2. New and existing schools inspected by the OSFM.
- C. The Department of Social Services shall provide a list of registered in-home childcare facilities to the OSFM annually.

71-8301.2. Codes and Standards.

- A. All references to codes and standards found in these regulations refer to the editions adopted in R.71-8300.2 and are modified by the following regulations as shown below.
- B. The building code shall define occupancy classifications referenced in these regulations.

71-8301.3. Requirements for Special Occupancies.

- A. All Foster Home Facilities
 - 1. Foster homes providing care, maintenance, and supervision for no more than six (6) children, including the natural or adopted children of the foster parent; shall comply with the following:
 - a. Must be a facility designed and constructed with the intent to be used as a dwelling per applicable statutes and regulations.
 - b. At least one (1) portable fire extinguisher with a minimum classification of 2A:10BC shall be installed near cooking areas. The fire extinguishers shall be installed and maintained in accordance with the manufacturer's instructions.
 - c. Each facility housing foster children shall maintain means of egress as required by original construction.
 - d. All heating devices must be selected, used, and installed per the manufacturer's recommendations and the listing conditions set by an approved testing laboratory.
 - e. Unvented gas heaters shall have an operating oxygen depletion device, an operating safety shutoff device, and shall be located or guarded to prevent burn injuries.
 - f. Fireplaces shall be equipped with fire screens, partitions, or other means to protect clients from burns.
 - g. A fire escape plan describing what actions are to be taken by the family in the event of a fire must be developed and posted.
 - h. A fire escape drill shall be conducted every three (3) months.
 - i. Records of the drills shall be maintained on the premises for three (3) years. The records shall give the date, time, and weather conditions during the drill, number evacuated, description, and evaluation of the fire drill. Fire drills shall include complete evacuation of all persons from the building.
 - j. A fire escape drill shall be conducted within twenty-four (24) hours of the arrival of each new foster child.
 - k. Portable unvented fuel-fired heating equipment shall be prohibited in all foster homes.
 - l. An approved carbon monoxide alarm shall be installed and maintained outside of each separate sleeping area in the immediate vicinity of the bedroom in dwelling units within which fuel fired appliances are installed and in dwelling units that have attached garages.
 - m. Each sleeping room must have an operable door that closes and latches to provide compartmentation that protects occupants in case of a fire event.

n. The dwelling shall be free of dangers that constitute an obvious fire hazard, such as faulty electrical cords, overloaded electrical sockets, or an accumulation of papers, paint, or other flammable material stored in the dwelling.

o. Facilities serving as a foster home shall have approved address numbers placed in a position that is plainly legible and visible from the street. Address number shall be a minimum of 4 inches high with a minimum stroke width of 0.5 inch and shall contrast with their background.

p. Listed smoke alarms shall be installed as follows:

(i) On the ceiling or wall outside of each separate sleeping area in the immediate vicinity of bedrooms; and

(ii) In each room used for sleeping purposes; and

(iii) In each habitable story within a dwelling.

q. Listed smoke alarms shall be powered from:

(i) the electrical system of the dwelling as the primary power source and a battery as a secondary power source; or

(ii) a battery rated for a 10-year life, provided the smoke alarm is listed for use with a 10-year battery.

2. In addition to Section A.1.a.-q. above, all foster homes must have one of the following:

a. All sleeping rooms below the fourth story shall have emergency escape and rescue openings that open from the inside and are sized and configured in accordance with the applicable code requirements; or

b. Listed smoke alarms required to be installed by Section A.1.p. above shall be interconnected in such a manner that the activation of one alarm will activate all of the alarms in the dwelling unit. Physical interconnection of smoke alarms shall not be required where listed wireless alarms are installed and all alarms sound upon activation of one alarm; or

c. A residential fire sprinkler system in accordance with the applicable statutes, regulations, and adopted codes.

B. Inspection of School Facilities

1. The OSFM shall work in conjunction with local resident fire marshals to ensure an annual fire and life safety inspection of all schools, including 4K programs and childcare centers located within public schools, that are subject to these regulations. The OSFM shall work in conjunction with the Department of Education's Office of School Facilities to ensure a fire and life safety inspection of each new school is conducted prior to occupancy and to ensure that additions to schools and school alterations are also inspected.

**SUBARTICLE 3
EXPLOSIVES**

71-8302. EXPLOSIVES.

(Statutory Authority: 1976 Code Sections 23-9-40(b), 23-9-60, 23-36-10 et seq.)

71-8302.1. General.

A. The purpose of this regulation is to provide reasonable safety and protection to the public, public property, private property, and operators from the manufacture, transportation, handling, use, and storage of explosives in South Carolina.

B. This regulation shall apply to the manufacture, transportation, handling, use, and storage of explosives in South Carolina.

C. This regulation does not apply to the sale or storage of fireworks as regulated by the Board of Pyrotechnic Safety.

71-8302.2. Codes and Standards.

A. All references to codes and standards found in these regulations refer to the editions adopted in R.71-8300.2 and are modified by the following regulations as shown below.

B. The building code shall define occupancy classifications referenced in these regulations.

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71-8302.3. Licensing and Permitting Fees.

A. All applications for licenses, tests, or permits must be accompanied by the appropriate fees.

B. The OSFM is responsible for all administrative activities of the licensing program. The SFM shall employ and supervise personnel necessary to effectuate the provisions of this article and shall establish fees sufficient but not excessive to cover expenses, including direct and indirect costs to the State for the operation of this licensing program. Fees may be adjusted not more than once each two years, using the method set out in S.C. Code Ann. Section 40-1-50(D), 1976, as amended.

C. Fees shall be established for the following:

1. Application
2. Background Check
3. Testing
4. Licensing
5. Permitting
6. Inspection
7. Renewal

D. All fees are due at time of application.

E. Submission requirements for Blasting Permit application

1. Applications for one year Blasting Permits shall be submitted to the OSFM for approval at least 30 days before the start of blasting operations.

2. Applications for all other Blasting Permits shall be submitted to the OSFM for approval at least 48 hours before the start of blasting operations.

3. Applications submitted less than 48 hours before the start of blasting operations will be subject to a \$200.00 special processing fee.

4. Blasting Permit applications shall include the properly completed form and shall be accompanied by all information listed on the Blasting Permit application form when applying to the OSFM for a Blasting Permit.

F. All fees paid to the OSFM are nonrefundable.

71-8302.4. Licenses and Permits.

A. Classification of Licenses and Permits

	Class	Category	Blasting Permitted
1.	A	Unlimited	All types of blasting
2.	B	General	All phases of blasting operations in quarries, aboveground open pit mines, and aboveground construction
3.	C	General	All phases of blasting operations in underground underground mines, shafts, tunnels, and drifts
4.	D	Demolition	All phases of blasting in demolition projects
5.	E	Seismic	All phases of blasting in seismic prospecting
6.	G	Special	Special blasting as described on the permit

B. Licenses

1. No person shall be granted a license who has not successfully completed a written examination administered by the OSFM covering the applicable codes, state laws and regulations for the license classification for which they are applying.

2. Any applicant who fails the written examination is allowed one (1) re-test after a minimum seven (7) day waiting period. Any applicant who fails the re-test shall wait at least six (6) months before reapplying.

3. Licenses are not transferable.

4. The OSFM may accept determination of relief from disability incurred by reason of a criminal conviction that has been granted by the Director of the Bureau of Alcohol, Tobacco and Firearms, U. S. Department of the Treasury, Washington, D.C., pursuant to Section 555.142, Subpart H, Title 27, Code of Federal Regulations and Title 18 United States Code, Chapter 40, Section 845(b).

5. New Applications for licensing shall:

- a. Submit a completed fingerprint card with their application for the OSFM to conduct a National Crime Information Center (NCIC) criminal background check as part of the initial licensing application process.
- b. Provide the appropriate Federal licenses to handle and use explosives or explosive materials. Applicants must provide a copy of applicable Federal licenses with their application.
- c. Provide proof of insurance. The coverage company must be an insurer which is either licensed by the DOI in this State or approved by the DOI as a nonadmitted surplus lines carrier for risks located in this State. In the event the liability insurance is canceled, suspended, or nonrenewed, the insurer shall give immediate notice to the OSFM.

6. Each applicant for renewal shall each year:

- a. Submit an application for renewal.
- b. Have a National Crime Information Center (NCIC) background check conducted by the OSFM as part of the licensing renewal process.
- c. Provide a copy of their current Federal licenses for handling and using explosives or explosive material with their renewal application.
- d. Attend at least four (4) hours of continuing education acceptable to the OSFM. Certificates of training or other proof of training attendance must be provided when requested by the OSFM.
- e. Provide proof of insurance. The coverage company must be an insurer which is either licensed by the DOI in this State or approved by the DOI as a nonadmitted surplus lines carrier for risks located in this State. In the event the liability insurance is canceled, suspended, or nonrenewed, the insurer shall give immediate notice to the OSFM.

C. Blasting Permits

1. Blasting Permit application forms shall be available on the OSFM website and shall contain the information deemed appropriate by the OSFM. At a minimum, the application form shall include:

- a. Applicant name and contact information;
- b. Blaster name, license, and contact information;
- c. Blast site information including location, purpose of blasting, and fire department responsible for responding to the site;
- d. Anticipated date and time range of blasting operations;
- e. Information on separation distances detailing the actual distances to the nearest gas lines, power transmission lines, public roads, and structures;
- f. The type(s) of explosive used;
- g. Information on quantities of explosive used including the estimated amount of explosives for the duration of the permit, amount per shot, and amount per charge; and,
- h. Information regarding whether a seismograph will be used.

2. Blasting Permit application forms shall list all information required to be submitted with the form per R.71-8302.3.E. This list shall include at least the following:

- a. Current certificate of insurance;
- b. Directions to the blast site;
- c. Site plan of the blast site showing measured distances to adjacent buildings, streets, utilities, wells, and other facilities;
- d. Blasting plan that addresses proposed blasting procedures, quantity of material to be removed by blasting, number of blasts to be detonated, quantity and type of explosives to be used, maximum amount of explosives per delay, the maximum number of holes per delay, and the proposed placement of seismographs; and
- e. Safety plan that addresses on-site storage, traffic control, barricading, signage plan, and adverse weather operation plan.

3. No permit will be granted without submission of a complete Blasting Permit application form and payment of application fee.

4. No variations from the terms of the blasting permit are allowed without authorization from the OSFM or their designee.

D. Magazine Permits

1. Magazine Permit Application Forms shall contain the information deemed appropriate by the OSFM.

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2. Magazine Permit Application Forms shall be available on the OSFM website.
3. Magazine permits expire at 12:01 AM on January 1 of each licensing cycle. Any magazine permit not renewed by December 31 shall incur a late fee of \$100.00 (each).
4. Magazine permits shall be visible on the exterior of all magazines. Defaced or destroyed permits will be reported to the SFM when discovered. The OSFM may, at their discretion, charge the administrative costs of replacing the magazine permit.
5. Each magazine shall be inspected and approved by the OSFM before use.

71-8302.5. Records.

A. Licensed blasters shall keep records of each blast. The Blaster's Log shall contain the following minimum data:

1. Name of company or contractor;
2. Location, date, and time of blast;
3. Name, signature, and license number of blaster in charge of blast;
4. Type of material blasted;
5. Number of holes, burden and spacing;
6. Diameter and depth of holes;
7. Types of explosives used;
8. Total amount of explosives used;
9. Maximum amount of explosives per delay period of 8 milliseconds or greater;
10. Method of firing and type of circuit;
11. Direction and distance in feet to nearest dwelling house, public building, school, church, commercial or institutional building neither owned nor leased by the person conducting the blasting;
12. Weather conditions;
13. Type and height or length of stemming;
14. Whether mats or other protections were used;
15. Type of delay electric blasting caps used and delay periods used;
16. Exact location of seismograph, if used, and the distance of seismograph from blast as indicated accurately by the person taking the seismograph reading;
17. Seismograph records, where required including:
 - a. Name of person and firm analyzing the seismograph record; and
 - b. Seismograph reading;
18. Maximum number of holes per delay period of eight milliseconds or greater.

B. Blasters will provide a blast report on forms approved by the OSFM and submit these forms within three working days of the blast when deemed necessary by the OSFM.

C. Blasting records shall be retained by the licensed blaster and available for inspection by SFM during normal work hours at their place of business. These blast records shall include as a minimum for each blast:

1. Blasting Permit;
2. Seismograph reports when used;
3. Blaster's Record/log;
4. Pre-Blast Survey (if applicable).

D. Magazine log shall be available for inspection by SFM upon request during normal work hours or hours of operation of the magazine.

71-8302.6. Blasting Safety and Operations.

- A. The contractor, operator, and the blaster are responsible for the conduct of blasting operations on any site.
- B. These regulations do not relieve the contractor, operator, blaster or other persons of their responsibility and liability under any other laws.
- C. The OSFM may require the use of a seismograph on any blasting operation where damage to personal property has or may occur.

D. A Seismograph shall be used on all blasting operations within 1500 feet of a building, where the scaled distances shown in NFPA 495 are not followed, or when directed by the OSFM.

E. Operators must notify the OSFM within 24 hours of any fires or thefts involving explosives. The operators shall provide the OSFM with a copy of the report filed with the police department or the incident report from the fire department. Operators must also provide the OSFM Office with a copy of ATF Form 5400.5.

F. The operator shall have their license in their possession when handling, possessing or using explosive materials and shall show their license when asked by any AHJ.

G. A copy of the blasting permit shall be kept at the firing station.

H. This section shall be followed for firing the blast:

1. A warning signal shall be given before every blast. Warning signals shall comply with the following:
 a. Warning signal is a one (1) minute series of long horn or siren blasts five (5) minutes before the blast signal.

b. Blast signal is a series of short horn or siren blasts one (1) minute before the shot.

c. All clear signal is a prolonged horn or siren blast following the inspection of the blast area.

2. The signal shall be made from an air horn, siren or other device, and must be loud enough to be clearly heard in all areas that could be affected by the blast or flyrock from the blast. The signal must be distinctive and unique so that it cannot be confused with any other signaling system that might occur on the site. A vehicle horn shall not be used as a signaling system.

71-8302.7. Explosives and Investigations.

All costs incurred by the OSFM for investigations involving explosives or blasting operations shall be reimbursed to the State by the individual or company involved in the investigation. Such reimbursements will only apply when the individual or company has been found in violation of the South Carolina Explosives Control Act (S.C. Code Ann. 23-36-10, et seq., 1976, as amended) or these Regulations.

71-8302.8. Variances.

A. This section provides licensees the opportunity to request variances of the regulations under specific conditions.

1. The OSFM may grant variances when it can be demonstrated the variance improves safety or provides an equivalent level of safety as provided in the regulations and adopted codes.

2. Such a variance may be modified or revoked by the OSFM.

3. When applicable, these variances must also be approved by the U.S. Bureau of Alcohol, Tobacco, and Firearms.

SUBARTICLE 4

PORTABLE FIRE EXTINGUISHERS AND FIXED FIRE EXTINGUISHING SYSTEMS

71-8303. PORTABLE FIRE EXTINGUISHERS AND FIXED FIRE EXTINGUISHING SYSTEMS.

(Statutory Authority: 1976 Code Sections 23-9-40, 23-9-45)

71-8303.1. General.

A. The purpose of this subarticle is to regulate the leasing, renting, reselling, servicing and testing of portable fire extinguishers and the installation, testing, and servicing of fixed fire extinguishing systems in the interest of protecting lives and property.

B. This regulation shall apply to:

1. The filling, charging, and recharging of all portable fire extinguishers other than the initial filling by the manufacturer.

2. The testing and servicing of all types of portable fire extinguishers.

3. The installation, testing, and servicing of all types of fixed fire extinguishing systems.

C. This regulation shall not apply to the following:

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1. The filling or charging of a portable fire extinguisher by the manufacturer before the initial sale;
2. The installation or servicing of water-based extinguishing systems addressed by S.C. Code Ann. Section 40-10-240 et seq; and
3. Firms engaged in the retailing or wholesaling of new portable fire extinguishers.

71-8303.2. Codes and Standards.

- A. All references to codes and standards found in these regulations refer to the editions adopted in R. 71-8300.2 and are modified by the following regulations as shown below.
- B. The building code shall define occupancy classifications referenced in these regulations.

71-8303.3. Fees for Licensing, Testing, and Inspections.

A. The OSFM is responsible for all administrative activities of the licensing program. The SFM shall employ and supervise personnel necessary to effectuate the provisions of this article and shall establish fees sufficient but not excessive to cover expenses, including direct and indirect costs to the State for the operation of this licensing program. Fees may be adjusted not more than once each two years, using the method set out in S.C. Code Ann. Section 40-1-50(D), 1976, as amended.

B. Fees shall be established for the following:

1. Application
2. Testing
3. Permitting
4. Licensing
5. Inspection
6. Renewal

C. All fees are due at time of application for licenses, testing, permits, inspection or renewal.

D. All fees paid to the OSFM are nonrefundable.

71-8303.4. Licensing and Permitting Requirements.

A. General Licensing Requirements.

1. Each firm testing and servicing portable fire extinguishers; installing, testing, and servicing fixed fire extinguishing systems; or hydrostatic testing portable fire extinguishers or portions of fixed fire extinguishing systems must have a license issued by the OSFM.

2. Each firm's license shall be displayed in a conspicuous location at their place of business.

3. Each firm shall apply in writing on a form available from the OSFM, for the license classification the firm is seeking.

4. Each firm shall furnish a certificate of insurance with their application in the amount required for their license classification. The firm shall list the State of South Carolina and its agents as additional insured. The coverage company must be an insurer which is either licensed by the DOI in this State or approved by the DOI as a nonadmitted surplus lines carrier for risks located in this State. In the event the liability insurance is canceled, suspended, or not renewed, the insurer shall give immediate notice to the OSFM.

5. Each firm shall possess the equipment required for the class of license sought. The OSFM shall inspect the firm's facilities to verify the firm has the minimum required equipment. The OSFM shall not license a firm until deficiencies discovered by inspection are corrected.

6. Licenses issued under this subarticle are not transferable.

7. All licenses expire when insurance coverage lapses or is cancelled and on the day of expiration shown on the license and shall be renewed biennially.

8. Expired licenses shall not be renewed. A new license shall be obtained by complying with all requirements and procedures for an original license.

B. General Permitting Requirements.

1. Each individual servicing, recharging, repairing, installing, or testing portable fire extinguishers or fixed fire extinguishing systems shall possess a valid permit issued by the OSFM.

2. Each individual shall apply in writing on a form available from the OSFM, for the permit classification they are seeking.
3. Applicants must provide a current photograph with their application.
4. Applicants must be at least eighteen (18) years old.
5. Applicants shall pass a written examination administered by the OSFM before a permit is issued. The exam will cover the applicable codes, state laws, and regulations and the additional requirements for the specific class of permit for which they are applying.
6. Any applicant who fails the written examination is allowed one (1) re-test after a minimum seven-day waiting period. Any applicant who fails the re-test shall wait at least six (6) months before reapplying.
7. Permit holders shall have their permits in their possession while working on equipment or systems covered by their permit.
8. Permit holders shall show their permits on the request of any AHJ.
9. Permit holders shall be limited to specific type of work allowed by the class of permit they hold and the specific systems covered by their permit.
10. Permits issued under this subarticle are not transferable.
11. Permits shall expire on the day of expiration shown on the permit and shall be renewed biennially.
12. Expired permits shall not be renewed. A new permit shall be obtained by complying with all requirements and procedures for an original permit.

C. License and Permit Classifications.

1. Class "A" - may service, recharge, or repair, all types of portable fire extinguishers, including recharging carbon dioxide units; and to conduct hydrostatic tests on all types of fire extinguishers.
2. Class "B" - may service, recharge, or repair all types of portable fire extinguishers, including recharging carbon dioxide units and conducting hydrostatic tests on water, water chemical, and dry chemical types of extinguishers only.
3. Class "C" - may service, recharge, or repair all types of portable fire extinguishers, except recharging carbon dioxide units; and to conduct hydrostatic tests of water, water chemical, and dry chemical types of fire extinguishers only.

4. Class "D" - may service, recharge, repair, or install all types of fixed fire extinguishing systems.
5. Class "E" is an apprentice permit classification only. Permits in this classification may perform the services only under direct supervision of a person holding a valid permit and who works for the same firm as the apprentice. An apprentice permit is valid for one (1) year from the day of issuance and may not be renewed.

D. Firms applying for a Class "A", "B", or "C" License must meet all of the general requirements for licensing and provide proof of public liability insurance for an amount not less than one million (\$1,000,000) dollars.

E. Firms applying for a Class "D" License must:

1. Designate on their application for licensing each type of fixed fire extinguishing system for which they want to be licensed;
2. Provide proof of public liability insurance for an amount not less than one million (\$1,000,000) dollars; and
3. Provide proof of manufacturer's certification for at least one type of fixed fire extinguishing system.
4. For each additional type of pre-engineered fire extinguishing system, the applicant may submit proof of a manufacturer's certification or an affidavit which shall attest to the ability to obtain the proper manufacturer's installation, maintenance and service manuals and manufacturer's parts or alternative components that are listed for use with the specific extinguishing system and provide testament that all installations and maintenance shall be performed in complete compliance with the manufacturer's installation, maintenance and service manuals and NFPA standards.

F. Individuals applying for a Class "A", "B", or "C" Permit must meet all of the general requirements.

G. Individuals applying for a Class "D" Permit must:

1. Designate on their application for licensing each type of fixed fire extinguishing system for which they want to be permitted.
2. Provide proof of manufacturer's certification for at least one type of fixed fire extinguishing system.
3. For each additional type of pre-engineered fire extinguishing system, the applicant may submit proof of a manufacturer's certification or an affidavit which shall attest to the ability to obtain the proper manufacturer's installation, maintenance and service manuals and manufacturer's parts or alternative components that are listed

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for use with the specific extinguishing system and provide testament that all installations and maintenance shall be performed in complete compliance with the manufacturer's installation, maintenance and service manuals and NFPA standards.

H. Employees applying for a Class "E" Permit must file an application for a Class "E" Permit and provide a current photograph.

71-8303.5. Renewal of Licenses and Permits.

A. To qualify for biennial renewal of a Class "A", "B" or "C" license, a firm must:

1. Apply in writing on a form available from the OSFM designating the Class of license sought;
2. Provide proof of public liability insurance.

B. To qualify for biennial renewal of a Class "A", "B" or "C" permit, an individual must:

1. Apply in writing on a form available from the OSFM, designating the permit classification they are seeking.

C. To qualify for biennial renewal of a Class D license, a firm must:

1. Apply in writing on a form available from the OSFM, designating each type of fixed fire extinguishing system for which they wish to be licensed to install, test, or service;

2. Provide proof of public liability insurance;

3. Provide proof of manufacturer's certification for at least one type of fixed fire extinguishing system;

4. For each additional type of pre-engineered fire extinguishing system, the applicant may submit proof of a manufacturer's certification or an affidavit which shall attest to the ability to obtain the proper manufacturer's installation, maintenance and service manuals and manufacturer's parts or alternative components that are listed for use with the specific extinguishing system and provide testament that all installations and maintenance shall be performed in complete compliance with the manufacturer's installation, maintenance and service manuals and NFPA standards.

D. To qualify for biennial renewal of a Class D permit, an individual must:

1. Apply in writing on a form available from the OSFM, designating each type of fixed fire extinguishing system for which they wish to be permitted to install, test, or service;

2. Provide an up to date manufacturers training certificate for each type pre-engineered system that renewal is sought;

3. Provide an affidavit to attest to the applicant's ability to obtain the proper manufacturer's installation, maintenance and service manuals and manufacturer's parts or alternative components that are listed for use with the specific extinguishing system and provide testament that all installations and maintenance shall be performed in complete compliance with the manufacturer's installation, maintenance and service manuals.

71-8303.6. Restrictions for Class D Fire Equipment Licenses and Permits.

A. A firm or person shall not willfully engage in the business of installing, testing or servicing Class D fire equipment or use in any advertisement or on a business card or letterhead, or make any other verbal or written communication that the person is a Class D Fire Equipment Dealer or acquiesce in such a representation, unless that person is licensed as a Class D Fire Equipment Dealer by the OSFM.

B. No person shall install or service any type of Class D fire equipment not covered on their permit.

71-8303.7. Licensing Requirements: For Firms Performing Hydrostatic Testing.

A. Each firm performing hydrostatic testing of fire extinguishers manufactured according to the specifications of the USDOT shall be required to possess a valid license issued by the USDOT. All hydrostatic testing of fire extinguishers shall be performed per the appropriate USDOT standards and NFPA standards.

B. Each employee certified to conduct hydrostatic testing shall attend a USDOT certification refresher course every three years and provide a copy of the current certification to the OSFM upon completion.

71-8303.8. Installation and Maintenance Procedures.

A. All Portable Fire Extinguishers and Fixed Fire Extinguishing Systems covered by these regulations shall be installed, inspected, tested and serviced per the applicable NFPA standards and the manufacturer’s installation, service and maintenance manuals.

B. Any portable fire extinguisher or fixed fire extinguishing system that cannot be maintained per the manufacturer’s installation, service, and maintenance manuals or the applicable NFPA standards shall be removed from service and replaced.

C. Tamper seals on all portable fire extinguishers shall be imprinted with the year. The year imprinted on the tamper seal shall match the date on the maintenance tag for portable fire extinguisher servicing and maintenance.

71-8303.9. Minimum Equipment and Facility Requirements for Fire Equipment Dealer License.

The OSFM Minimum Equipment and Facility Requirements for a Fire Equipment Dealer License

				Minimum Equipment and Facilities Required	YES	NO	N/A
1	A			D Hydrostatic test equipment for high pressure testing and calibrated cylinder. (0-11,000 psi)			
2	A			D Equipment for test dating high-pressure cylinders (over 900 psi). Die stamps must be a minimum of ¼ inches.			
3	A			D Clock with sweep secondhand on or close to hydrostatic test apparatus.			
4	A	B		D CO2 receiver--cascade system for proper filling of CO2 extinguishers.			
5	A	B		D Supply of metallic labels for CO2 hose conductivity test. Labels attached to the hose must include month and year of testing, name or initials of person performing test, and name of agency performing test.			
6	A	B	C	D Scales graduated in 1/8 ounce or 1 gram weight if refilling CO2 cartridges. Minimum of 20 lbs.			
7	A	B	C	D All Scales calibrated within the last 12 months. Certification date(s) _____ Certified by _____			
8	A	B	C	D Approved drying method for high and low pressure cylinders. Listed for its use.			
9	A	B	C	D Proper wrenches with non-serrated jaws or valve puller (hydraulic or electric).			
10	A	B	C	D Inspection light.			
11	A	B	C	D Low-pressure test apparatus.			
12	A	B	C	D Low-pressure hydrostatic test labels per NFPA 10.			
13	A	B	C	D Scales for weighing extinguisher/system agent bottles during inspection and filling, minimum of 500 lbs. Calibrated and certified annually.			
14	A	B	C	D Closed recovery system(s) and storage to remove and store chemicals from fire extinguishers or system cylinders during servicing.			
15	A	B	C	D Closed recovery system(s) and storage to remove and store chemicals from halon type fire extinguishers or system cylinders during servicing.			
16	A	B	C	D Current installation, maintenance and service manuals from the manufacturer of each make or brand of fire extinguisher or system the company installs, services, recharges, repairs, or maintains.			

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17	A	B	C		Supply of extinguisher recharge agents for the type/brands of fire extinguishers the company requests to recharge or service.			
18	A	B	C	D	Vise 6-inch minimum (chain or bench).			
19	A	B	C	D	Facilities for proper storage of extinguishing agents.			
20	A	B	C	D	Facilities for leak testing of pressurized extinguishers.			
21	A	B	C	D	Nitrogen with regulator and indicator. Regulator not to exceed 1500 psi--minimum 500 psi.			
22	A	B	C	D	Supply of "Verification of Service" collars containing Month and Year the service was performed.			
23	A	B	C		Adapters, fittings, and tools and equipment for properly servicing and/or recharging all extinguishers being serviced and recharged.			
24	A	B	C	D	Safety cage (in shop) for hydrostatic testing of low-pressure cylinders.			
25	A	B	C	D	1/4 pound graduated scales minimum 150 pounds for weighing chemical recharging.			
26				D	Cable crimping tool (where required).			
27				D	Cocking lever (where required).			
28				D	Pipe vise, dies, reamer, etc.			
29				D	Stock and supply of fuse links, proper elbows, and nozzles for system which is being installed.			
30				D	Parts from each manufacturer's system that the permittee is permitted to work on or service, including original service manuals and all up to-date technical bulletins.			
31				D	Listed links from each manufacturer that the permittee is permitted to service or work on.			
32				D	Current service manuals from the manufacturer for each model of fixed fire extinguishing system being installed, tested, or serviced by the fire equipment license holder.			
33				D	System Reports - custom or generic.			
34				D	Non-compliance Tags for non compliant systems.			
35	A	B	C	D	Supply of tags with the appropriate company and other related information on them.			
36				D	Thermometer with a minimum of 2° F or 1° C increments.			
37				D	Agent Transfer Pump (for Halon or Clean Agents).			
38				D	Torque Wrench.			
39				D	Leak test device (for Halon or Clean Agents).			
40				D	Liquid Level detector ("Halon Scanner").			

71-8303.10. Powers and Duties of the Office of State Fire Marshal.

A. Powers and duties of the OSFM are:

1. To evaluate the applications of firms or individuals for a license and permits to engage in the business of servicing portable fire extinguishers or installing, testing and servicing fixed fire extinguishing systems;
2. To administer written examinations to ascertain the competency of applicants for a license to service portable fire extinguishers or install fixed fire extinguishing systems;
3. To issue licenses, permits, and apprentice permits required by this subarticle;
4. To suspend or revoke licenses and permits for cause; and
5. To administer these regulations and supervise personnel in carrying out the requirements of this regulation.

B. The OSFM, upon request, shall conduct hearings or proceedings concerning the suspension, revocation, or refusal to issue or renew licenses or permits issued under this subarticle or the application to suspend, revoke, refuse to renew, or refuse to issue the same.

C. An applicant, licensee, or permit holder whose license or permit has been refused or revoked under this subarticle, except for failure to pass a required written examination, shall not file another application for a license or permit within one year from the effective date of the refusal or revocation. After one year from that date, the applicant may re-apply, and in a public hearing, show good cause why the issuance of a license or permit does not hinder public safety and health.

D. The OSFM shall maintain a registry of all applications for licenses or permits and of all firms or persons holding licenses or permits. The OSFM shall make the roster of Fire Equipment Dealers Licenses or Fire Equipment Permits, with notation concerning the types of fixed fire extinguishing system for which licenses or permits have been granted, available on the OSFM website.

E. At least ninety (90) days before the expiration of a license, the OSFM shall send written notice of the impending license or permit expiration to the license or permit holder's last known address. This subsection shall not be construed to prevent the denying or refusing to renew a license under applicable law or regulations of the OSFM.

71-8303.11. Fitness to Practice; Investigation of Complaints.

If the OSFM has reason to believe that a person licensed under this chapter has become unfit to practice as a Fire Equipment Dealer or if a complaint is filed with the OSFM alleging a violation of a provision of this chapter by a license or permit holder or if a complaint is filed with the OSFM alleging that an licensed person is fraudulently holding him or herself out as qualified to engage in business as a Fire Equipment Dealer, the OSFM shall initiate an investigation per the procedures of Title 40, Chapter 1.

71-8303.12. Administrative Sanctions.

A. If after an investigation it appears that the license or permit holder under this regulation has become unfit to practice or has violated these regulations, the OSFM shall file a Petition with the Administrative Law Court stating the facts and the particular statutes and regulations at issue.

B. The Administrative Law Court may, after opportunity for hearing, order that the license or permit be revoked, suspended, or otherwise disciplined on the grounds that the license or permit holder:

1. Used a false, fraudulent, or forged statement or document in obtaining a license or permit under this chapter; or
2. Committed a fraudulent, deceitful, or dishonest act or omitted a material fact in obtaining a license or permit under this chapter; or
3. Has had an authorization to practice a regulated profession or occupation in another state or jurisdiction canceled, revoked or suspended, or has otherwise been disciplined by another jurisdiction; or
4. Has intentionally used a fraudulent statement in a document connected with the license or permit; or
5. Obtained fees or assisted in obtaining fees under fraudulent circumstances; or
6. Sustained a physical or mental disability or uses alcohol or drugs to such a degree as to render further practice as a Fire Equipment Dealer dangerous to the public; or
7. Failed to perform all installation, service, and testing in complete compliance with the manufacturer's manuals.

71-8303.13. Sanctions for Unlawful Practice.

A. The Administrative Law Court may, after opportunity for hearing, order injunctive relief against a person who, without possessing a valid license or permit under this chapter, practices or offers to practice or uses the title or term Fire Equipment Dealer. For each violation, the administrative law judge may impose a fine of no more than ten thousand (\$10,000) dollars.

B. A person who does not hold a license or permit as required by this Chapter, may not bring any action either at law or in equity to enforce the provisions of any contract for providing services as a Fire Equipment Dealer.

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71-8303.14. Certain Acts Prohibited.

A. No person or firm shall:

1. Engage in the business of installing or servicing portable fire extinguishers without a valid and current license;
2. Engage in the business of installing or servicing fixed fire extinguishing systems without a valid and current license;
3. Service, test, or install fixed fire extinguishing systems without a valid and current license;
4. Perform hydrostatic testing of USDOT cylinders for portable fire extinguishers or parts of a fixed fire extinguishing systems without a valid and current hydrostatic license;
5. Obtain or attempt to obtain a license or permit by fraudulent representation;
6. Service portable fire extinguishers or test, service, or install fixed fire extinguishing systems contrary to the provisions of these regulations;
7. Service or hydrostatic test a fire extinguisher that does not have the proper identifying labels;
8. Sell, offer for sale, or give any make, type, or model of new or used fire extinguisher, unless extinguisher has first been tested and is currently approved or listed by Underwriters' Laboratories, Inc., Factory Mutual Laboratories, Inc., or other nationally recognized testing laboratory whose testing procedures used for approval in the listing of portable fire extinguishers are acceptable to the OSFM, and unless such extinguisher carries an Underwriters' Laboratories, Inc., or manufacturer's serial number. The serial number shall be permanently stamped on the manufacturer's identification and instruction plate;
9. Permit an individual who works for the firm to engage in installation, repair, recharge, maintenance or servicing fire extinguishers or fixed fire extinguishing systems without a valid permit or license.

71-8303.15. Cease and Desist Orders; Notice to Correct Hazardous Conditions.

When the OSFM shall have reason to believe that any person is or has been violating any provisions of this regulation or any rules or regulations adopted and promulgated pursuant thereto, the OSFM or their designated agent may issue and deliver to such person an order to cease and desist such violation or to correct such hazardous condition.

71-8303.16. Suspensions or Revocation of License or Permit.

A. The license of any company or individual may be suspended or revoked because of failure to comply with the terms of any order to correct violations within the specified abatement period or for failure to comply with any cease and desist orders. A license may be suspended for a period not to exceed one year from the date of license suspension. A license may be revoked for a period not to exceed two years from the date of license revocation.

B. In addition, a license may be suspended or revoked where the license or permit holder is found to have:

1. Rendered inoperative a fire extinguisher or fixed fire extinguishing system, which is required by any rule of the OSFM, except during such time as the extinguisher, or fixed fire extinguishing system is being inspected, serviced, or tested;
2. Falsified any records required to be maintained by this chapter or rules adopted thereto;
3. Improperly serviced, tested, or inspected a fire extinguisher or fixed fire extinguishing system;
4. Allowed another person to use his permit or license number or use a license or permit number other than the license or permit holder's valid license or permit number; or
5. Obliterated the serial number on a fire extinguisher for purposes of falsifying service records.

71-8303.17. Responsibility of Equipment Manufacturer.

All manufacturers of portable fire extinguishers and fixed fire extinguishing systems doing business in South Carolina shall provide the OSFM with all technical information as well as installation instructions that apply to their systems and equipment sold, installed, serviced or tested in South Carolina. This technical information shall include design revisions and updating information on systems sold in South Carolina.

71-8303.18. Penalties.

The OSFM authorizes any Deputy SFM to issue a citation for each offense to any person, firm, or corporation licensed under these regulations who has violated any provision of this subarticle. The OSFM may assess fines for each charge to both the fire equipment company and the permit holder. Citations shall be assessed by the OSFM at not more than two thousand (\$2000.00) per violation.

SUBARTICLE 5
LIQUEFIED PETROLEUM GAS

71-8304. LIQUEFIED PETROLEUM (LP) GAS.

(Statutory Authority: 1976 Code Section 23-9-20, 23-9-40, 23-9-60, 40-82-70)

71-8304.1. General.

A. The purpose of this regulation is to provide reasonable protection of the health, welfare, and safety of the public and LP-Gas operators from the hazards associated with the handling, use, transportation, and storage of LP-Gas.

B. These regulations apply to:

1. LP-Gas Dealers, Installers, Gas Plants, Wholesalers, Resellers, or Cylinder Exchange operators and;
2. Any person handling, dispensing, transporting, or storing LP-Gas.

C. These regulations shall not apply to:

1. LP-Gas pipeline transmission regulated by the SC Public Safety Commission.
2. Gas plants after the point where LP-Gas or LP-Gas and air mixture enters a utility distribution system.
3. Natural gas systems covered by the IFGC.

71-8304.2. Codes and Standards.

A. All references to codes and standards found in these regulations refer to the editions adopted in R.71-8300.2 and are modified by the following regulations as shown below.

B. The building code shall define occupancy classifications referenced in these regulations.

71-8304.3. Licensing and Permitting Fees.

A. The OSFM is responsible for all administrative activities of the licensing program. The SFM shall employ and supervise personnel necessary to effectuate the provisions of this article and shall establish fees sufficient but not excessive to cover expenses, including direct and indirect costs to the State for the operation of this licensing program. Fees may be adjusted not more than once each two years, using the method set out in S.C. Code Ann. Section 40-1-50(D), 1976, as amended.

B. Fees shall be established for the following:

1. Application
2. Testing
3. Permitting
4. Licensing
5. Inspection
6. Renewal

C. All fees are due at time of application for licenses, testing, permits, inspection, or renewal.

D. All fees paid to the OSFM are nonrefundable.

71-8304.4. Licensing Requirements.

A. Licenses

1. Each company shall possess a license issued by the OSFM.

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2. Licenses shall be displayed in a conspicuous location at the place of business for the LP-Gas Dealer, Installer, Gas Plant, Wholesaler, Reseller, or Cylinder Exchange operator.

B. Permits

1. Each site shall have a designated person that has a permit issued by the OSFM to supervise people handling, dispensing, installing, transporting, repairing, or exchanging LP-Gas.

2. Any applicant who fails the written examination is allowed one (1) re-test after a minimum seven (7) day waiting period. Any applicant who fails the re-test shall wait at least thirty (30) days before reapplying.

3. Permits shall bear the name, photograph, and any other identifying information deemed necessary by the OSFM.

4. Permit holders shall have their permit in their possession when supervising the handling, dispensing, installing, manufacturing, transporting, repairing, or exchanging LP-Gas.

5. Permit holders shall exhibit their permits on request of any AHJ.

6. Each permit is valid for a period of two (2) years and must be renewed before it expires.

7. Permits are not transferable.

71-8304.5. Plan Submittal Requirements.

Licenses which are required to obtain a site approval per S.C. Code Ann. Section 40-82-220, 1976, as amended, shall comply with the plan submittal requirements of NFPA 58, where applicable.

SUBARTICLE 6 FIREWORKS AND PYROTECHNICS

71-8305. FIREWORKS AND PYROTECHNICS.

(Statutory Authority: 1976 Code Sections 23-9-10 et seq., 23-35-10 et seq., 40-56-10(D))

71-8305.1. General.

A. The purpose of this regulation is to provide reasonable safety and protection to the public, public property, private property, performers, and display operators from the hazards associated with the handling, use, transportation, and storage of pyrotechnics and fireworks.

B. This regulation shall apply to:

1. The handling and use of fireworks intended for public fireworks display;

2. The construction, handling and use of fireworks equipment intended for public fireworks display;

3. The general conduct and operation of public firework displays;

4. The transportation and storage of fireworks for public fireworks display;

5. The transportation and use of consumer fireworks;

6. The construction, handling, and use of pyrotechnics intended for proximate audience displays; special effects for motion picture, theatrical, and television productions;

7. The construction, handling, and use of flame effects intended for proximate audience displays, or special effects for motion picture, theatrical, and television productions;

8. The construction, handling, and use of rockets intended for proximate audience displays, or special effects for motion picture, theatrical, and television productions; and

9. The general conduct and operation of proximate audience displays.

C. This regulation shall not apply to:

1. The manufacture, sale, or storage of fireworks as governed by the SC Department of Labor Licensing and Regulation, State Board of Pyrotechnic Safety;

2. The transportation, handling, and/or use of fireworks by the SFM, his employees, or any commissioned law enforcement officers acting within their official capacities;

3. Fireworks deregulated by the USDOT;

4. Weapons used in enactments, when there is no projectile;

5. Artillery field pieces used as salutes with no projectile; and

6. The outdoor use of model rockets within the scope of NFPA 1122.

71-8305.2. Codes and Standards.

- A. All references to codes and standards found in these regulations refer to the editions adopted in R.71-8300.2 and are modified by the following regulations as shown below.
- B. The building code shall define occupancy classifications referenced in these regulations.

71-8305.3. Licensing and Permitting Fees.

- A. All fees are due at time of application for licenses, tests, or permitting.
- B. Permit applications are due in the OSFM fifteen days before the performance date. Fees will be doubled for an application received less than fifteen days before the performance date.
- C. The OSFM is responsible for all administrative activities of the licensing program. The SFM shall employ and supervise personnel necessary to effectuate the provisions of this article and shall establish fees sufficient but not excessive to cover expenses, including direct and indirect costs to the State for the operation of this licensing program. Fees may be adjusted not more than once each two years, using the method set out in S.C. Code Ann. Section 40-1-50(D), 1976, as amended.
- D. Fees shall be established for the following:
 - 1. Application
 - 2. Background Check
 - 3. Testing
 - 4. Licensing
 - 5. Permitting
 - 6. Inspection
 - 7. Renewal
- E. All fees are due at time of application for licenses, background checks, testing, permits, inspection or renewal.
- F. All fees paid to the OSFM are nonrefundable.

71-8305.4. Qualifications of Operators.

- A. All Operators.
 - 1. No person shall be granted a license who has not successfully completed a written examination administered by the OSFM. The exam will cover the applicable codes, state laws, and regulations and the additional requirements listed below for the specific class of license for which they are applying.
 - 2. Any applicant who fails the written examination is allowed one re-test after a minimum seven-day waiting period. Any applicant who fails the re-test shall wait at least six months before reapplying.
 - 3. Applicants shall submit a completed fingerprint card with their application. The OSFM will conduct a criminal background check as part of the licensing application process.
 - 4. Operators using explosives or explosive materials must have the appropriate Federal licenses. Operators shall provide a copy of applicable Federal licenses.
 - 5. Licenses must be renewed biennially on the day of expiration shown on the license.
 - 6. Every two years, each licensed operator shall be required to attend training offered by the OSFM or attend pre-approved training providing a total of eight (8) hours of continuing education during the licensing cycle.
 - 7. The OSFM may revoke, suspend, or deny a license because of, but not limited to:
 - a. Failure to comply with any order written by the OSFM;
 - b. Conviction of a felony, a crime of violence, or any crime punishable by a term of imprisonment exceeding two years; or
 - c. Advocating or knowingly belonging to any organization or group which advocates violent overthrow of or violent action against the federal, state, local government, or its citizens; or
 - d. Having or contracting physical or mental illness or conditions that in the judgment of the OSFM would make use or possession of fireworks, pyrotechnics, or explosive materials hazardous to the licensee or the public;
 or

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e. Violating the terms of the license or essential changes in the conditions under which the license was issued without prior approval of the OSFM;

f. Violating the state laws or regulations governing Public Fireworks Displays or Proximate Audience Pyrotechnics; or

g. Giving false information or making a misrepresentation to obtain a license.

B. Public Display Operators.

1. Applications for licensing must furnish a notarized statement from a South Carolina licensed display operator concerning their participation in at least 6 fireworks displays and indicating for each display the date, the site, and the name and license number of the supervising operator.

2. The person in charge of the Public Fireworks Display shall be licensed by the OSFM.

C. Pyrotechnic Operators.

1. Applications for licensing must provide written documentation from a South Carolina licensed display operator or company that the applicant has actively participated in the set-up and operation of at least six proximate audience performances using the types of pyrotechnics for the license classification the applicant is seeking. Only the OSFM may accept an alternative number of displays for this requirement based on the applicant's experience.

2. Licenses for pyrotechnic operators authorize and place the responsibility for the handling, supervision, and discharge of the fireworks or pyrotechnic device permitted by their license classification. The operator is responsible for the training of his or her assistants in the safe handling, supervision, and discharge of the fireworks or pyrotechnic devices permitted by their license classification.

a. "Pyrotechnic Operator - Unrestricted" may conduct and take charge of all activity in connection with the use of explosives or explosive materials, rockets, flame effects, Display Fireworks, binary system pyrotechnics, Consumer Fireworks, Theatrical Pyrotechnics, Novelties, and other special effects permitted by the OSFM for a proximate audience display, commercial entertainment, or special effects in motion picture, theatrical, and television productions.

b. "Pyrotechnic Operator - Commercial Outdoor" may conduct and take charge of all activity in connection with the use of flame effects, Display Fireworks, binary system pyrotechnics, Consumer Fireworks, Theatrical Pyrotechnics, and Novelties permitted by the OSFM for a proximate audience display and commercial entertainment.

c. "Pyrotechnic Operator - Rockets" may conduct and is restricted to all activities in connection with research, experiments, production, transportation, fuel loading, and launching of all types of experimental, solid fuel, and high power rockets. Only individuals or companies holding valid import, export, or wholesale licenses may import, export, or wholesale experimental high-powered motors.

d. "Pyrotechnic Operator - Motion Picture Special Effects" may conduct and take charge of all activity in connection with the use of explosives or explosive materials, flame effects, Display Fireworks, binary system pyrotechnics, Consumer Fireworks, Theatrical Pyrotechnics, and Novelties, and other special effects permitted by the OSFM for the sole purpose of motion picture, television, theatrical or operatic productions.

e. "Pyrotechnic Operator - Commercial Indoor" may conduct and take charge of all activity in connection with the use of binary system pyrotechnics, Theatrical Pyrotechnics, and Novelties permitted by the OSFM in stage or theatrical productions only.

f. "Pyrotechnic Operator - Trainee" must function under the direct supervision and control of a pyrotechnic operator for the license classification that he/she is seeking a license.

71-8305.5. Display Permits.

A. All Displays.

1. Any person who desires to hold a Public Fireworks Display or a Proximate Audience Display must obtain a permit from the OSFM before the display.

2. Permits shall be valid for up to one calendar period prescribed or until any condition of the permit application changes. The OSFM shall make final determination of a change of condition in the permit.

3. All permit forms will be made available on the OSFM website.

4. The OSFM may revoke, suspend, or deny a permit because of, but not limited to:

a. The display operator does not possess the correct license classification for the display; or

- b. Not complying with any order written by the OSFM; or
 - c. Violating the terms of the permit or essential changes in the conditions under which the permit was issued without prior approval of the OSFM; or
 - d. Giving false information or making a misrepresentation to obtain a permit.
5. The following additional information must be provided with the permit application:
- a. A list of the number, type, and size of fireworks or effects being discharged;
 - b. A Diagram of display site including measurements;
 - c. Directions to the site; and
 - d. A Copy of certificate of insurance.
6. The AHJ providing fire suppression equipment and personnel for the Public Fireworks Display must sign the permit form.
7. Permits must be posted at the display site.

B. Public Fireworks Display Permits.

1. The sponsor of the display shall forward a copy of the permit to the OSFM along with the items required in these regulations fifteen working days before the display. The permit becomes valid when co-signed by the OSFM.

2. The validated permit will be distributed as follows:

- a. The OSFM shall retain the original;
- b. A copy to the sponsor;
- c. A copy to the supplier, which will authorize shipment of the fireworks;
- d. A copy to the AHJ providing the fire suppression equipment and personnel for the display;
- e. A copy posted at the display site.

3. All pyrotechnics shall be purchased from a pyrotechnic manufacturer or distributor licensed by the Board of Pyrotechnic Safety. A licensed Public Display Operator shall be present and supervise firing of all public fireworks displays.

4. The fireworks supplier shall carry a minimum of \$500,000 of Public Liability Insurance. The policy must list the display sponsor, the State of South Carolina, and its agents as additional insured. The coverage company must be an insurer which is either licensed by the DOI in this State or approved by the DOI as a nonadmitted surplus lines carrier for risks located in this State. In the event the liability insurance is canceled, suspended, or nonrenewed, the insurer shall give immediate notice to the OSFM.

C. Proximate Audience Display Permits.

1. Public Liability Insurance in the amount of \$500,000 shall be provided by the permittee. The permittee shall furnish a certificate of insurance in this amount with their application. The permittee shall list the State of South Carolina and its agents as additional insured.

2. Public Liability Insurance in the amount of \$1,000,000 shall be provided by any permittee involved with motion picture productions. Motion picture companies employing this person(s) shall list the State of South Carolina and its agents as additional insured.

3. The coverage company must be an insurer which is either licensed by the DOI in this State or approved by the DOI as a nonadmitted surplus lines carrier for risks located in this State. In the event the liability insurance is canceled, suspended, or nonrenewed, the insurer shall give immediate notice to the OSFM.

71-8305.6. General Operational Requirements of Displays.

A. All Displays.

1. The operator shall have their license in their possession when conducting a display and shall exhibit their license on request of any AHJ.

2. All displays must have a person in charge that holds the proper license issued by the OSFM for the type of display being conducted.

3. The SFM or any approved AHJ may enforce these laws and regulations.

4. Magazine log shall be available for inspection during normal work hours, 1 hour before, and 1 hour after each performance.

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5. Operators must notify the OSFM within 24 hours of any fires or thefts involving fireworks. The operators shall provide the OSFM with a copy of the report filed with the police department or the incident report from the fire department. Operators must also provide the OSFM with a copy of ATF Form 5400.5.

6. Any person who violates any provision of these laws and regulations will purchase the appropriate permit, pay the appropriate license fee, if any are required, and be subject to the following penalty provisions:

- a. S.C. Code Ann. Section 23-36-170, 1976, as amended.
- b. S.C. Code Ann. Section 23-35-150, 1976, as amended.

7. Confiscation, storage, or disposal of fireworks, pyrotechnic and explosive materials used for proximate audience or public firework displays by the SFM shall comply with S.C. Code Ann. Section 23-36-110, 1976, as amended.

8. Storage of special effects pyrotechnics and other material.

a. All classes of explosives shall be stored in accordance with the South Carolina Explosives Control Act (S.C. Code Ann. Section 23-36-10, et seq., 1976, as amended) or Title 27 Code of Federal Regulations, Subpart K.

b. All other fireworks or pyrotechnic materials shall be stored per the appropriate NFPA standard.

9. The AHJ may require the permittee to furnish fire support personnel other than local firefighters.

B. Public Fireworks Displays.

1. Where unusual conditions exist, the AHJ may increase the minimum clearances as necessary before granting approval of the display site. The AHJ may not reduce clearances specified in NFPA 1123 without written approval of the OSFM.

2. A copy of the display permit shall be kept at the firing station.

3. Operators shall never use damaged fireworks, fireworks that are wet, or fireworks damaged by moisture. Operators shall not dry wet pyrotechnics for reuse. Operators shall handle and dispose of wet or damaged pyrotechnics per the manufacturer's instructions.

4. The operator of the display shall keep a record of all shells that fail to ignite or function. The form shall be completed and returned to the supplier within fifteen days of the display and the operator shall retain a copy for their records. The operator and supplier shall retain Malfunction Reports for three years from the date of the display. The operator and supplier must produce these reports upon request of the OSFM. The "Malfunction Report" form shall be available on the OSFM website.

5. Moorings or anchors shall secure floating vessels or platforms used for firing of a Public Fireworks Display.

6. Operators shall not reload mortars during a display.

7. If a display is postponed, the sponsor of the display shall notify the OSFM and the department providing fire suppression equipment and personnel for the display of the alternate date before presenting the display.

8. It shall be the responsibility of the permittee to arrange with the AHJ for the detailing of firefighters and equipment as required.

C. Proximate Audience Display.

1. The licensed pyrotechnic operator is responsible for the storing, handling, supervision, discharge, and removal of all pyrotechnic devices and materials based on their license classification and the terms of their permit. The licensed pyrotechnic operator is responsible for supervising and training of their assistants in the safe handling and discharge of all pyrotechnic devices.

2. The permit package shall contain a copy of the permit, Certificate of Insurance, and the MSDS(s) for material used.

3. A copy of the permit package shall be kept at the control site used to initiate the display. An audible announcement shall be made not more than 10 minutes before the display to notify personnel of the use of proximate audience pyrotechnics.

4. Motion Picture productions shall display one permit package at the production office, and maintain the second permit package on the film site through the First Assistant Director. Before the start of any effect, verbal notification of Proximate Audience Pyrotechnic use shall be required before each camera roll.

5. The AHJ may inspect the proximate audience display. As a minimum, the inspection shall cover the requirements in Annex B of NFPA 1126.

6. The permittee shall furnish a fire watch during the times the special effects materials have been removed from storage and/or magazines and the conclusion of the performance. This person shall be identified by an

orange shirt or vest (or other color approved by the AHJ) with three-inch white letters on the front and back stating FIRE WATCH. For motion picture productions, the method for identifying the FIRE WATCH shall be a mutually agreed means of designation between the OSFM, the permittee, and the First Assistant Director.

7. Indoor facilities used for Proximate Audience Displays must be equipped with an automatic fire alarm system and a public address system.

a. The fire alarm system shall be zoned so that the areas affected by special effects smoke can be overridden during the event.

b. An override switch shall be provided at the firing point and a second switch in the control room to shut off stage sound and make the public address system available for evacuation instructions. These switches must be labeled and visible throughout the show.

c. The fire alarm system must be returned to normal operation before the fire watch and the display operator may leave the facility.

71-8305.7. Use of Consumer Fireworks in South Carolina.

A. It shall be deemed a violation of these regulations to:

1. Explode or ignite fireworks within 600 ft. of any Assembly Occupancy, Educational Occupancy, Hazardous Occupancy, Institutional Occupancy, or any facility storing or dispensing flammable liquids, combustible liquids, LP-Gas, or other hazardous materials;

2. Explode or ignite fireworks within 75 ft. of where fireworks are stored, sold or offered for sale;

3. Ignite, discharge, and/or throw fireworks from any motor vehicle or to place, ignite, discharge, and/or throw fireworks into or at any motor vehicle; and

4. Ignite or discharge fireworks in a wanton or reckless manner to constitute a threat to the personal safety or property of another.

B. The distances in R.71-8305.7 A (1) may be reduced if the display is permitted with the OSFM as a Public Fireworks Display or as a Proximate Audience Display.

C. Consumer Fireworks shall not be used for a Public Fireworks Display unless permitted by the OSFM per the applicable provisions of this regulation and all permit fees are paid.

71-8305.8. Transportation of Fireworks or Pyrotechnics in South Carolina.

A. Vehicles transporting Display Fireworks (pyrotechnics classified as 1.3 explosives) in any quantity and Consumer Fireworks (pyrotechnics classified as 1.4 explosives) in quantities greater than 1000 lbs. shall be in the custody of drivers with a CDL with a HAZMAT endorsement.

B. On both sides, on the front, and on the rear, vehicles transporting Display Fireworks (pyrotechnics classified as 1.3 explosives) in any quantity and Consumer Fireworks (pyrotechnics classified as 1.4 explosives) in quantities greater than 1000 lbs. shall prominently display signs marked "EXPLOSIVES" that conform to the USDOT and other federal regulations.

C. The fire and police departments shall be promptly notified when a vehicle transporting pyrotechnics is involved in an accident, break down, or fire. Only in the event of such an emergency shall the transfer of pyrotechnics from one vehicle to another be allowed on highways and then only when qualified supervision is provided.

D. Any vehicle used for the transportation of pyrotechnics covered by item A or B above shall have not less than one approved-type fire extinguisher with a minimum rating of 2A 10 B:C and shall be so located as to be readily available for use.

E. Operators must notify the OSFM within 24 hours of any fires or thefts involving fireworks. The operator shall provide the OSFM with a copy of the report filed with the police department or the incident report from the fire department. Operators must also provide the OSFM with a copy of ATF Form 5400.5.

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SUBARTICLE 7 HYDROGEN FACILITIES

71-8306. HYDROGEN FACILITIES.

(Statutory Authority: 1976 Code Section 23-9-550)

71-8306.1. General.

A. The purpose of these regulations are to provide reasonable safety and protection to the public, public property, private property from the hazards associated with the handling, use, storage, transfer and dispensing at a hydrogen facility.

B. This regulation shall apply to:

1. Hydrogen dispensing stations for public or commercial use as a transportation fuel and motor vehicle fuel or in a fuel cell
2. Bulk hydrogen compressed gas systems for a hydrogen facility
3. Bulk liquefied hydrogen gas systems for a hydrogen facility
4. Commercial hydrogen generation systems connected to a hydrogen facility
5. Engineered and pre-engineered hydrogen fuel cell systems

C. This regulation shall not apply to:

1. The manufacture, sale, or storage of small scale hydrogen generation or consumption systems where hydrogen is held in containers of one liter or less and Maximum Allowable Quantities (MAQ) are not exceeded.
2. The transportation, handling, and/or use of hydrogen by the State Fire Marshal, his employees, or any commissioned law enforcement officers acting within their official capacities.
3. The manufacture or transportation of bulk hydrogen.
4. Hydrogen used as an ingredient or by product in the manufacture of a product.

71-8306.2. Codes and standards.

A. All references to codes and standards found in these regulations refer to the editions adopted in R.71-8300.2 and are modified by the following regulations as shown below.

B. All facilities shall be designed and installed in accordance with the adopted codes and standards listed in R.71-8300.2.

C. Alternate Materials and Alternate Methods of Construction. Compliance with a current edition of NFPA 2 may be used for consideration of alternative means, methods and materials if found suitable by the State Fire Marshal per R.71-8300.3.

71-8306.3. Engineered and pre-engineered systems

A. Engineered hydrogen systems

1. All installations shall be in accordance with South Carolina Laws, Regulations, and adopted Codes.
2. Plans and specifications prepared by a licensed engineer or prepared under the licensee's direct supervision must be stamped with seals prior to submission and review by OSFM.

B. Pre-engineered hydrogen systems.

1. All installations shall be in accordance with South Carolina Laws, Regulations, and adopted Codes.
2. Plans and specifications are not required to be prepared by a licensed engineer nor be stamped with seals prior to submission and review by OSFM.

71-8306.4. Permit application requirements for hydrogen facilities.

A. The OSFM may issue a permit to a location when presented a completed application that contains at least the following, where applicable:

1. A site plan, drawn to scale, which shows equipment locations and point(s) of transfer with respect to property lines, nearby structures, roads & dikes, power lines, and other potential ignition sources;

2. An accidental release plan;
3. The piping layout with valves and fitting details;
4. Normal and emergency ventilation designs;
5. Container capacity (or capacities) and design standards;
6. Electrical plan;
7. Container and piping support details;
8. Information concerning onsite fire protection equipment;
9. Information concerning the project's beginning and ending points, if part of a larger system;
10. Listed equipment with listing agency;
11. Unless exempted, design documents sealed by an engineer licensed in South Carolina; and,
12. All applicable fees paid in full.

71-8306.5. Licensing and permitting fees.

- A. All fees are due at time of application for licenses, tests, or permitting.
- B. Permit applications are due in the OSFM prior to construction or installation.
- C. Approval of plans for hydrogen facilities are to be obtained prior to start of construction or installation.
- D. The OSFM is responsible for all administrative activities of the licensing program. The State Fire Marshal shall employ and supervise personnel necessary to effectuate the provisions of this article and shall establish fees sufficient but not excessive to cover expenses, including direct and indirect costs to the State for the operation of this licensing program.
- E. Fees shall be established for the following:
 1. Application fee \$10
 2. Permitting fee (includes plan review and initial site inspection) \$250 plus actual expenses incurred based upon location and complexity
 3. Inspection fee (semi-annual) \$100 plus actual expenses incurred based upon location and complexity
 4. Renewal of permits (annual – includes inspection) \$100 plus actual expenses incurred based upon location and complexity
- F. The application fee is due at time of application for license. All other fees will be billed and must be paid prior to issuance of license.
- G. All fees paid to the OSFM are nonrefundable.

Fiscal Impact Statement:

There will be no cost incurred by the State or any of its political subdivisions for these regulations.

Statement of Rationale:

The updated regulations will eliminate redundant and unnecessary regulations; update the remaining existing regulations; use a standardized format for all regulations; and to make the current regulations compatible with current federal and state statutes.

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Document No. 4505

**DEPARTMENT OF LABOR, LICENSING AND REGULATION
BOARD OF FUNERAL SERVICE
CHAPTER 57**

Statutory Authority: 1976 Code Sections 40-1-70, 40-19-50 and 40-19-60

57-12. Fees.

Synopsis:

The South Carolina Department of Labor, Licensing and Regulation proposes to amend Regulation 57-12 to remove the existing schedule of fees, cross-reference the fees in their new location in Chapter 10, and include in the regulation a link to the Board's website where the fees will also appear.

A Notice of Drafting was published in the *State Register* on September 26, 2014.

Instructions:

Regulation 57-12 is amended as shown below.

Text:

57-12. Fees.

(A) The Board may charge fees as shown in South Carolina Code of Regulations Chapter 10-17 and on the South Carolina Board of Funeral Service website at <http://llr.sc.gov/POL/Funeral/>.

(B) All fees are nonrefundable.

Fiscal Impact Statement:

There will be no cost incurred by the State or any of its political subdivisions for this regulation.

Statement of Rationale:

The updated regulation will centralize fee schedules and remove duplicative and outdated information.

Document No. 4506

**DEPARTMENT OF LABOR, LICENSING AND REGULATION
BOARD OF REGISTRATION FOR GEOLOGISTS
CHAPTER 131**

Statutory Authority: 1976 Code Sections 40-1-50, 40-1-70, 40-77-50, and 40-77-60

131-13. Fees.

Synopsis:

The South Carolina Department of Labor, Licensing and Regulation proposes to amend Regulation 131-13 to remove the existing schedule of fees, cross-reference the fees in their new location in Chapter 10, and include in the regulation a link to the Board's website where the fees will also appear.

A Notice of Drafting was published in the *State Register* on September 26, 2014.

Instructions:

Regulation 131-13 is amended as shown below.

Text:

131-13. Fees.

All fees required shall be transmitted by money order, bank draft, or a check made payable to the Board. No fees are refundable. The Board may charge fees as shown in South Carolina Code of Regulations Chapter 10-18 and on the South Carolina Board of Registration for Geologists website at <http://llr.sc.gov/POL/Geologists/>.

Fiscal Impact Statement:

There will be no cost incurred by the State or any of its political subdivisions for this regulation.

Statement of Rationale:

The updated regulation will centralize fee schedules and remove duplicative and outdated information.

Document No. 4557

**DEPARTMENT OF LABOR, LICENSING AND REGULATION
BOARD OF REGISTRATION FOR GEOLOGISTS
CHAPTER 131**

Statutory Authority: 1976 Code Section 40-77-290

131-11. Seals.

Synopsis:

The South Carolina Department of Labor, Licensing and Regulation, Board of Registration for Geologists proposes to amend Regulation 131-11 to permit the use of electronic signatures and seals.

A Notice of Drafting was published in the *State Register* on September 26, 2014.

Instructions:

Regulation 131-11 is amended as shown below.

Text:**131-11. Seals.**

(A) Each registered professional geologist shall obtain a seal, which may be an embosser or a rubber stamp bearing the registrant's name, registration number, and the legend "Registered Professional Geologist." The seal of the registrant shall be used in accordance with this section.

(B) The seal and signature of a registrant on a document constitutes a certification that the document was prepared by the registrant or under his direct supervision, and that the registrant has reviewed the document in sufficient depth to fully coordinate and assume responsibility for materials prepared by another registrant.

(C) When sealing of documents is required by statute, other authority or contract, an imprint of the registrant's valid seal shall appear, along with his signature and date, on the cover page of geologic reports or other geologic documents bound in book form as well as on each sheet of unbound geologic drawings, cross sections, or maps prepared by or under the responsible charge or direct supervision of the registrant whenever

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these documents are relevant to public welfare or the safeguard of life, health, property and the environment, pursuant to Section 40-77-290, South Carolina Code of Laws 1976, as amended.

(D) Additions, deletions, or other revisions to sealed documents shall not be made unless such changes are sealed, dated, and signed by the registrant who made the revisions or under whose direction and control said revisions were made.

(E) An electronic seal and signature are permitted to be used in lieu of an original seal and signature when the following criteria, and all other requirements of this section, are met:

- (1) it is a unique identification of the professional;
- (2) it is verifiable;
- (3) it is under the professional's direct and sole control;
- (4) it is linked to a document in such a manner that changes are readily determined and visually displayed if any data contained in the document file was changed subsequent to the electronic seal and signature having been affixed to the document; and
- (5) changes to the document after affixing the electronic seal and signature shall cause the electronic seal and signature to be removed or altered in such a way as to invalidate the electronic seal and signature;
- (6) once applied, the document shall be available in a view only format if the document is to be electronically transmitted;
- (7) the graphic image shall be readily available and produced in a manner consistent with Reg. 131-11.A and shall contain the same words and shall have substantially the same graphic appearance and size as required when the image of the electronically transmitted document is viewed at the same time as the document in its original form;
- (8) the graphic display of the seal shall be in compliance with state law; and
- (9) the electronic seal and signature must be acceptable to the receiving entity.

Fiscal Impact Statement:

There will be no cost incurred by the State or any of its political subdivisions for this regulation.

Statement of Rationale:

The updated regulation will modernize the process of signing and sealing documents.

Document No. 4508
DEPARTMENT OF LABOR, LICENSING AND REGULATION
MANUFACTURED HOUSING BOARD
CHAPTER 79
Statutory Authority: 1976 Code Sections 40-1-50, 40-1-70, and 40-29-10

79-26. Fees.

Synopsis:

The South Carolina Department of Labor, Licensing and Regulation proposes to amend Regulation 79-26 to remove the existing schedule of fees, cross-reference the fees in their new location in Chapter 10, and include in the regulation a link to the Board's website where the fees will also appear.

A Notice of Drafting was published in the *State Register* on September 26, 2014.

Instructions:

Regulation 79-26 is amended as shown below.

Text:

79-26. Fees.

(A) All fees are payable in advance and must be accompanied by an application.

(B) The Board may charge fees as shown in South Carolina Code of Regulations Chapter 10-22 and on the South Carolina Board of Manufactured Housing website at <http://llr.sc.gov/POL/ManufacturedHousing/>. Fees shall not be refunded.

(C) The Department will charge a fee each time a reinspection is performed on a manufactured home that is involved in a complaint. The fee will be charged to the dealer, manufacturer, installer, repairer or contractor as appropriate. If more than one entity is responsible for the reinspection, the fee will be prorated. If a reinspection reveals that all complaint items have been satisfied, no fee will be charged to any licensee. If it is determined by the Board that a reinspection requested by a consumer is frivolous or without basis, the fee will be charged to the consumer.

Fiscal Impact Statement:

There will be no cost incurred by the State or any of its political subdivisions for this regulation.

Statement of Rationale:

The updated regulation will centralize fee schedules and remove duplicative and outdated information.

Document No. 4510
DEPARTMENT OF LABOR, LICENSING AND REGULATION
BOARD OF NURSING
CHAPTER 91
Statutory Authority: 1976 Code Sections 40-1-50, 40-1-70, and 40-33-10

91-31. Fees.

Synopsis:

The South Carolina Department of Labor, Licensing and Regulation proposes to amend Regulation 91-31 to comport with establishment of fees in Chapter 10-25 of the Regulations.

A Notice of Drafting was published in the *State Register* on September 26, 2014.

Instructions:

Regulation 91-31 is amended as shown below.

Text:

91-31. Fees.

a. Names, addresses and authorized statistical data of licensed nurses may be released upon written request of agencies, individuals, and organizations. This service will be provided electronically or via CD for a cost of \$10.00.

b. Refund of fees will be made at the discretion of the Board.

c. The Board may charge fees as shown in South Carolina Code of Regulations Chapter 10-25 and on the South Carolina Board of Nursing website at <http://www.llr.state.sc.us/POL/Nursing/>.

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Fiscal Impact Statement:

There will be no cost incurred by the State or any of its political subdivisions for this regulation.

Statement of Rationale:

The updated regulation will centralize fee schedules and remove duplicative and outdated information.

Document No. 4558
DEPARTMENT OF LABOR, LICENSING AND REGULATION
OFFICE OF OCCUPATIONAL SAFETY AND HEALTH
CHAPTER 71

Statutory Authority: 1976 Code Section 41-15-220

71-302. Partial exemptions for establishments in certain industries

71-339. Reporting fatalities and multiple hospitalization incidents to OSHA

Synopsis:

The South Carolina Department of Labor, Licensing and Regulation, Division of Labor, Office of Occupational Safety and Health proposes to amend Regulation 71, Article I, Subarticle 3 to reflect changes since its promulgation.

A Notice of Drafting was published in the *State Register* on November 28, 2014.

Instructions:

Regulations Regulation 71, Article 1, Subarticle 3, Sections 71-302 and 71-339, and Non-Mandatory Appendix A to Subpart B are amended as shown below.

Text:

71-302. Partial exemptions for establishments in certain industries.

(a) Basic requirement. (1) If your business establishment is classified in a specific industry group listed in appendix A to this Subpart B, you do not need to keep OSHA injury and illness records unless the government asks you to keep the records under Sections 71-342. However, all employers must report to OSHA any workplace incident that results in an employee's fatality, in-patient hospitalization, amputation, or loss of an eye (see Sec. 71-339).

(2) If one or more of your company's establishments are classified in a non-exempt industry, you must keep OSHA injury and illness records for all of such establishments unless your company is partially exempted because of size under 71-301.

(b) Implementation.

(1) *Is the partial industry classification exemption based on the industry classification of my entire company or on the classification of individual business establishments operated by my company?* The partial industry classification exemption applies to individual business establishments. If a company has several business establishments engaged in different classes of business activities, some of the company's establishments may be required to keep records, while others may be partially exempt.

(2) How do I determine the correct NAICS code for my company or for individual establishments? You can determine your NAICS code by using one of three methods, or you may contact your nearest OSHA office or State agency for help in determining your NAICS code:

(i) You can use the search feature at the U.S. Census Bureau NAICS main Web page: <http://www.census.gov/eos/www/naics/>. In the search box for the most recent NAICS, enter a keyword that describes your kind of business. A list of primary business activities containing that keyword and the corresponding NAICS codes will appear. Choose the one that most closely corresponds to your primary business activity, or refine your search to obtain other choices.

(ii) Rather than searching through a list of primary business activities, you may also view the most recent complete NAICS structure with codes and titles by clicking on the link for the most recent NAICS on the U.S. Census Bureau NAICS main Web page: <http://www.census.gov/eos/www/naics/>. Then click on the two-digit Sector code to see all the NAICS codes under that Sector. Then choose the six-digit code of your interest to see the corresponding definition, as well as cross-references and index items, when available.

(iii) If you know your old SIC code, you can also find the appropriate 2002 NAICS code by using the detailed conversion (concordance) between the 1987 SIC and 2002 NAICS available in Excel format for download at the "Concordances" link at the U.S. Census Bureau NAICS main Web page: <http://www.census.gov/eos/www/naics/>.

(iv) Does the partial industry classification exemption apply to public sector [State of South Carolina and any political subdivision thereof]? No, the above exemption applies only to establishments in the private sector. The exemption does not apply to the State of South Carolina or any political subdivisions thereof.

(Cross Reference: 1904.2)

Non-Mandatory Appendix A to Subpart B--Partially Exempt Industries

Employers are not required to keep OSHA injury and illness records for any establishment classified in the following North American Industry Classification System (NAICS) codes, unless they are asked in writing to do so by OSHA, the Bureau of Labor Statistics (BLS), or a state agency operating under the authority of OSHA or the BLS. All employers, including those partially exempted by reason of company size or industry classification, must report to OSHA any employee's fatality, in-patient hospitalization, amputation, or loss of an eye (see Sec. 71-339). (Cross Reference: 1904.3)

NAICS Code	Industry
4412.....	Other Motor Vehicle Dealers.
4431.....	Electronics and Appliance Stores.
4461.....	Health and Personal Care Stores.
4471.....	Gasoline Stations.
4481.....	Clothing Stores.
4482.....	Shoe Stores.
4483.....	Jewelry, Luggage, and Leather Goods Stores.
4511.....	Sporting Goods, Hobby, and Musical Instrument Stores.
4512.....	Book, Periodical, and Music Stores.
4531.....	Florists.
4532.....	Office Supplies, Stationery, and Gift Stores.
4812.....	Nonscheduled Air Transportation.
4861.....	Pipeline Transportation of Crude Oil.
4862.....	Pipeline Transportation of Natural Gas.
4869.....	Other Pipeline Transportation.
4879.....	Scenic and Sightseeing Transportation, Other.
4885.....	Freight Transportation Arrangement.
5111.....	Newspaper, Periodical, Book, and Directory Publishers.
5112.....	Software Publishers.
5121.....	Motion Picture and Video Industries.
5122.....	Sound Recording Industries.
5151.....	Radio and Television Broadcasting.
5172.....	Wireless Telecommunications Carriers (except Satellite).

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5173.....	Telecommunications Resellers.
5179.....	Other Telecommunications.
5181.....	Internet Service Providers and Web Search Portals.
5182.....	Data Processing, Hosting, and Related Services.
5191.....	Other Information Services.
5211.....	Monetary Authorities--Central Bank.
5221.....	Depository Credit Intermediation.
5222.....	Nondepository Credit Intermediation.
5223.....	Activities Related to Credit Intermediation.
5231.....	Securities and Commodity Contracts Intermediation and Brokerage.
5232.....	Securities and Commodity Exchanges.
5239.....	Other Financial Investment Activities.
5241.....	Insurance Carriers.
5242.....	Agencies, Brokerages, and Other Insurance Related Activities.
5251.....	Insurance and Employee Benefit Funds.
5259.....	Other Investment Pools and Funds.
5312.....	Offices of Real Estate Agents and Brokers.
5331.....	Lessors of Nonfinancial Intangible Assets (except Copyrighted Works).
5411.....	Legal Services.
5412.....	Accounting, Tax Preparation, Bookkeeping, and Payroll Services.
5413.....	Architectural, Engineering, and Related Services.
5414.....	Specialized Design Services.
5415.....	Computer Systems Design and Related Services.
5416.....	Management, Scientific, and Technical Consulting Services.
5417.....	Scientific Research and Development Services.
5418.....	Advertising and Related Services.
5511.....	Management of Companies and Enterprises.
5611.....	Office Administrative Services.
5614.....	Business Support Services.
5615.....	Travel Arrangement and Reservation Services.
5616.....	Investigation and Security Services.
6111.....	Elementary and Secondary Schools.
6112.....	Junior Colleges.
6113.....	Colleges, Universities, and Professional Schools.
6114.....	Business Schools and Computer and Management Training.
6115.....	Technical and Trade Schools.
6116.....	Other Schools and Instruction.
6117.....	Educational Support Services.
6211.....	Offices of Physicians.
6212.....	Offices of Dentists.
6213.....	Offices of Other Health Practitioners.
6214.....	Outpatient Care Centers.
6215.....	Medical and Diagnostic Laboratories.
6244.....	Child Day Care Services.
7114.....	Agents and Managers for Artists, Athletes, Entertainers, and Other Public Figures.
7115.....	Independent Artists, Writers, and Performers.
7213.....	Rooming and Boarding Houses.
7221.....	Full-Service Restaurants.
7222.....	Limited-Service Eating Places.
7224.....	Drinking Places (Alcoholic Beverages).
8112.....	Electronic and Precision Equipment Repair and Maintenance.
8114.....	Personal and Household Goods Repair and Maintenance.

- 8121..... Personal Care Services.
- 8122..... Death Care Services.
- 8131..... Religious Organizations.
- 8132..... Grantmaking and Giving Services.
- 8133..... Social Advocacy Organizations.
- 8134..... Civic and Social Organizations.
- 8139..... Business, Professional, Labor, Political, and Similar Organizations.

 (Cross Reference: 1904.2)

71-339. Reporting fatalities, hospitalizations, amputations, and losses of an eye as a result of work-related incidents to OSHA.

(a) Basic requirement.

(1) Within eight (8) hours after the death of any employee as a result of a work-related incident, you must report the fatality to the Occupational Safety and Health Administration (OSHA), U.S. Department of Labor.

(2) Within twenty-four (24) hours after the in-patient hospitalization of one or more employees or an employee's amputation or an employee's loss of an eye, as a result of a work-related incident, you must report the in-patient hospitalization, amputation, or loss of an eye to OSHA.

(3) You must report the fatality, in-patient hospitalization, amputation, or loss of an eye using one of the following methods:

(i) By telephone (1-803-896-7672) or in person to the South Carolina OSHA Office.

(ii) By telephone to the OSHA toll-free central telephone number, 1-800-321-OSHA (1-800-321-6742).

(b) Implementation--(1) If the OSHA Office is closed, may I report the fatality, in-patient hospitalization, amputation, or loss of an eye by leaving a message on OSHA's answering machine, faxing the office, or sending an email?

No, if the OSHA Office is closed, you must report the fatality, in-patient hospitalization, amputation, or loss of an eye by either using 1-803-896-7672 or the 800 number.

(2) What information do I need to give to OSHA about the in-patient hospitalization, amputation, or loss of an eye? You must give OSHA the following information for each fatality, in-patient hospitalization, amputation, or loss of an eye:

(i) The establishment name;

(ii) The location of the work-related incident;

(iii) The time of the work-related incident;

(iv) The type of reportable event (i.e., fatality, in-patient hospitalization, amputation, or loss of an eye);

(v) The number of employees who suffered a fatality, in-patient hospitalization, amputation, or loss of an eye;

(vi) The names of the employees who suffered a fatality, in-patient hospitalization, amputation, or loss of an eye;

(vii) Your contact person and his or her phone number; and

(viii) A brief description of the work-related incident.

(3) Do I have to report the fatality, in-patient hospitalization, amputation, or loss of an eye if it resulted from a motor vehicle accident on a public street or highway? If the motor vehicle accident occurred in a construction work zone, you must report the fatality, in-patient hospitalization, amputation, or loss of an eye. If the motor vehicle accident occurred on a public street or highway, but not in a construction work zone, you do not have to report the fatality, in-patient hospitalization, amputation, or loss of an eye to OSHA. However, the fatality, in-patient hospitalization, amputation, or loss of an eye must be recorded on your OSHA injury and illness records, if you are required to keep such records.

(4) Do I have to report the fatality, in-patient hospitalization, amputation, or loss of an eye if it occurred on a commercial or public transportation system? No, you do not have to report the fatality, in-patient hospitalization, amputation, or loss of an eye to OSHA if it occurred on a commercial or public transportation system (e.g., airplane, train, subway, or bus). However, the fatality, in-patient hospitalization, amputation, or

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loss of an eye must be recorded on your OSHA injury and illness records, if you are required to keep such records.

(5) Do I have to report a work-related fatality or in-patient hospitalization caused by a heart attack? Yes, your local OSHA compliance office will decide whether to investigate the event, depending on the circumstances of the heart attack.

(6) What if the fatality, in-patient hospitalization, amputation, or loss of an eye does not occur during or right after the work-related incident? You must only report a fatality to OSHA if the fatality occurs within thirty (30) days of the work-related incident. For an in-patient hospitalization, amputation, or loss of an eye, you must only report the event to OSHA if it occurs within twenty-four (24) hours of the work-related incident. However, the fatality, in-patient hospitalization, amputation, or loss of an eye must be recorded on your OSHA injury and illness records, if you are required to keep such records.

(7) What if I don't learn about a reportable fatality, in-patient hospitalization, amputation, or loss of an eye right away? If you do not learn about a reportable fatality, in-patient hospitalization, amputation, or loss of an eye at the time it takes place, you must make the report to OSHA within the following time period after the fatality, in-patient hospitalization, amputation, or loss of an eye is reported to you or to any of your agent(s): Eight (8) hours for a fatality, and twenty-four (24) hours for an in-patient hospitalization, an amputation, or a loss of an eye.

(8) What if I don't learn right away that the reportable fatality, in-patient hospitalization, amputation, or loss of an eye was the result of a work-related incident? If you do not learn right away that the reportable fatality, in-patient hospitalization, amputation, or loss of an eye was the result of a work-related incident, you must make the report to OSHA within the following time period after you or any of your agent(s) learn that the reportable fatality, in-patient hospitalization, amputation, or loss of an eye was the result of a work-related incident: Eight (8) hours for a fatality, and twenty-four (24) hours for an in-patient hospitalization, an amputation, or a loss of an eye.

(9) How does OSHA define "in-patient hospitalization"? OSHA defines in-patient hospitalization as a formal admission to the in-patient service of a hospital or clinic for care or treatment.

(10) Do I have to report an in-patient hospitalization that involves only observation or diagnostic testing? No, you do not have to report an in-patient hospitalization that involves only observation or diagnostic testing. You must only report to OSHA each in-patient hospitalization that involves care or treatment.

(11) How does OSHA define "amputation"? An amputation is the traumatic loss of a limb or other external body part. Amputations include a part, such as a limb or appendage, that has been severed, cut off, amputated (either completely or partially); fingertip amputations with or without bone loss; medical amputations resulting from irreparable damage; amputations of body parts that have since been reattached. Amputations do not include avulsions, enucleations, degloving, scalplings, severed ears, or broken or chipped teeth.

(Cross Reference: 1904.39)

Fiscal Impact Statement:

There will be no cost incurred by the State or any of its political subdivisions for these regulations.

Statement of Rationale:

The updated regulations will clarify what is recognized and required by SC OSHA.

Document No. 4521
DEPARTMENT OF LABOR, LICENSING AND REGULATION
BOARD OF PHARMACY
 CHAPTER 99

Statutory Authority: 1976 Code Sections 40-1-70, 40-43-60(C) and (D)(8), 40-43-150(C), and 40-43-160

99-45. Administrative Citations and Penalties.

99-46. Fines.

Synopsis:

The South Carolina Department of Labor, Licensing and Regulation, Board of Pharmacy proposes to establish administrative citation authority and a penalty schedule for pharmacists, pharmacy technicians and permit holders, the Board is adding Regulations 99-45 and 99-46 in conformance with the Pharmacy Practice Act and current practice. To establish a fine amount as required by S.C. Code Ann. §§ 40-43-150(C) and -160, the Board is establishing fines in regulation.

The Notice of Drafting was published in the *State Register* on July 25, 2014.

Instructions:

Regulations 99-45 and 99-46 are added as shown below.

Text:

99-45. Administrative Citations and Penalties.

A. The board may issue administrative citations and cease and desist orders in person, or by certified mail, and may assess administrative penalties against an entity or individual for the violations listed below. If the licensee is working at his or her primary place of employment listed with the Board, the licensee must have his or her license or registration displayed. If the licensee is not working at his or her primary place of employment, the licensee must have a wallet card available for inspection. The citation must be signed by the Chief Drug Inspector.

1. Failure to Display Permit (Pharmacist-in-Charge)	\$50
2. Failure to Display License or Possess Wallet Card	\$100
3. Failure to Display Intern Certificate or Possess Wallet Card (PIC and Intern)	\$25
4. Failure to Display Pharmacy Technician Registration or Possess Wallet Card	\$25
5. Pharmacy Technician Working Without Registration (Permit Holder)	\$500
6. Pharmacy Technician Working Without Registration (PIC)	\$500
7. Pharmacy Technician Working With Lapsed Registration (Permit Holder)	\$500
8. Pharmacy Technician Working With Lapsed Registration (PIC)	\$500
9. Pharmacy Technician Working With Lapsed Registration (Technician)	\$50
10. Pharmacy Operating with greater than 3:1 Technician to Pharmacist Ratio (PIC)	\$500
11. Pharmacy Operating with greater than 3:1 Technician to Pharmacist Ratio (Permit Holder)	\$500
12. Failure to Notify Board of Facility Relocation	\$100
13. Failure to Notify Board of PIC Change	\$100
14. Flu Protocol—Technical Violation	\$500
15. Failure to Notify Board of Change in Ownership	\$100

B. Separate citations and administrative penalties may be assessed for each violation.

C. Administrative citations authorized under this section are separate from, and in addition to, all other remedies, either civil or criminal.

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D. A licensee assessed an administrative citation may appeal the citation to the board within thirty (30) calendar days of the receipt of the citation. If an appeal is filed, the department shall schedule a hearing before the board or its designee for a final determination on the matter. If no appeal is filed, the citation is deemed a final administrative order, and penalties are due within ninety calendar days of receipt of the citation, or other written demand.

E. Extensions to pay citations must be submitted in writing, and will be at the discretion of the Chairman.

F. Failure to pay a citation is considered a violation of this regulation, and may subject the entity to discipline under S.C. Code Ann. § 40-43-140(A)(1)(a).

G. Should a licensee or permittee receive one or more administrative violations of the same type in a five year period, any subsequent violation(s) must be referred to the board for disciplinary action.

99-46. Fines.

A. Upon determination by the board that one or more grounds for disciplining a licensee or permittee exists, the board may impose a fine of \$500 per violation, not to exceed a total amount of \$25,000 total per action, plus the costs of the disciplinary action. Fines are payable immediately upon the effective date of discipline unless otherwise provided by the board. Interest accrues after the fines are due at the maximum rate allowed by law. No licensee or permittee against whom a fine is levied is eligible for reinstatement until the fine has been paid in full.

B. An individual who has been found by the board to have unlawfully engaged in the practice of pharmacy under S.C. Code Ann. § 40-43-160(A) may be fined in an amount not to exceed \$25,000.

Fiscal Impact Statement:

There will be no cost incurred by the State or any of its political subdivisions for these regulations.

Statement of Rationale:

These regulations are added in conformance with the Board's practice act and current practice.

Document No. 4512

DEPARTMENT OF LABOR, LICENSING AND REGULATION
BOARD OF PHYSICAL THERAPY EXAMINERS
CHAPTER 101

Statutory Authority: 1976 Code Sections 40-1-50, 40-1-70, 40-45-50, and 40-45-60

101-08. Fees.

Synopsis:

The South Carolina Department of Labor, Licensing and Regulation proposes to amend Regulation 101-08 to remove the existing schedule of fees, cross-reference the fees in their new location in Chapter 10, and include in the regulation a link to the Board's website where the fees will also appear.

A Notice of Drafting was published in the *State Register* on September 26, 2014.

Instructions:

Regulation 101-08 is amended as shown below.

Text:

101-08. Fees.

(A) The Board may charge fees as shown in South Carolina Code of Regulations Chapter 10-30 and on the South Carolina Board of Physical Therapy Examiners website at <http://llr.sc.gov/POL/PhysicalTherapy/>.

(B) A check which is presented to the Board as payment for a fee which the Board is permitted to charge under this chapter and which is returned unpaid may be cause for denial of a license or for imposing a sanction authorized under this chapter or Section 40-1-50(G).

(C) The Board may direct applicants to pay an examination fee directly to a third party who has contracted to administer the examination.

(D) Fees are nonrefundable and may be prorated in order to comply with a biennial schedule.

Fiscal Impact Statement:

There will be no cost incurred by the State or any of its political subdivisions for this regulation.

Statement of Rationale:

The updated regulation will centralize fee schedules and remove duplicative and outdated information.

Document No. 4514

**DEPARTMENT OF LABOR, LICENSING AND REGULATION
BOARD OF EXAMINERS FOR LICENSURE OF PROFESSIONAL COUNSELORS, MARRIAGE
AND FAMILY THERAPISTS, AND PSYCHO-EDUCATIONAL SPECIALISTS
CHAPTER 36**

Statutory Authority: 1976 Code Sections 40-1-50, 40-1-70, and 40-75-60

36-15. Fees.

Synopsis:

The South Carolina Department of Labor, Licensing and Regulation proposes to amend Regulation 36-15 to remove the existing schedule of fees, cross-reference the fees in their new location in Chapter 10, and include in the regulation a link to the Board's website where the fees will also appear.

A Notice of Drafting was published in the *State Register* on September 26, 2014.

Instructions:

Regulation 36-15 is amended as shown below.

Text:

36-15. Fees.

(A) The Board may charge fees as shown in South Carolina Code of Regulations Chapter 10-33 and on the South Carolina Board of Examiners for the Licensure of Professional Counselors, Marriage and Family Therapists, and Psycho-Educational Specialists at <http://llr.sc.gov/POL/Counselors/>.

(B) All fees are nonrefundable.

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Fiscal Impact Statement:

There will be no cost incurred by the State or any of its political subdivisions for this regulation.

Statement of Rationale:

The updated regulation will centralize fee schedules and remove duplicative and outdated information.

Document No. 4516
DEPARTMENT OF LABOR, LICENSING AND REGULATION
REAL ESTATE APPRAISERS BOARD
CHAPTER 137

Statutory Authority: 1976 Code Sections 40-1-50, 40-1-70, 40-60-10 and 40-60-50

137-800.03. Annual Fee Schedule

Synopsis:

The South Carolina Department of Labor, Licensing and Regulation proposes to amend Regulation 137-800.03 to remove the existing schedule of fees, cross-reference the fees in their new location in Chapter 10, and include in the regulation a link to the Board's website where the fees will also appear.

A Notice of Drafting was published in the *State Register* on September 26, 2014.

Instructions:

Regulation 137-800.03 is amended as shown below.

Text:

137-800.03. Annual Fee Schedule.

The Board may charge fees as shown in South Carolina Code of Regulations Chapter 10-36 and on the South Carolina Real Estate Appraisers Board website at <http://llr.sc.gov/POL/REAB/>.

Fiscal Impact Statement:

There will be no cost incurred by the State or any of its political subdivisions for this regulation.

Statement of Rationale:

The updated regulation will centralize fee schedules and remove duplicative and outdated information.

Document No. 4517
DEPARTMENT OF LABOR, LICENSING AND REGULATION
REAL ESTATE COMMISSION
CHAPTER 105
Statutory Authority: 1976 Code Sections 40-1-50, 40-1-70, and 40-57-60

105-13. Fees

Synopsis:

The South Carolina Department of Labor, Licensing and Regulation proposes to amend Regulation 105-13 to remove the existing schedule of fees, cross-reference the fees in their new location in Chapter 10, and include in the regulation a link to the Commission's website where the fees will also appear.

A Notice of Drafting was published in the *State Register* on September 26, 2014.

Instructions:

Regulation 105-13 is amended as shown below.

Text:

105-13. Fees.

The Commission may charge fees as shown in South Carolina Code of Regulations Chapter 10-37 and on the South Carolina Real Estate Commission website at <http://llr.sc.gov/POL/REC/>.

Fiscal Impact Statement:

There will be no cost incurred by the State or any of its political subdivisions for this regulation.

Statement of Rationale:

The updated regulation will centralize fee schedules and remove duplicative and outdated information.

Document No. 4518
DEPARTMENT OF LABOR, LICENSING AND REGULATION
RESIDENTIAL BUILDERS COMMISSION
CHAPTER 106
Statutory Authority: 1976 Code Sections 40-1-50, 40-1-70, 40-59-70, and 40-59-610

106-3. Initial Fees

Synopsis:

The South Carolina Department of Labor, Licensing and Regulation proposes to amend Regulation 106-3 to remove the existing schedule of fees, cross-reference the fees in their new location in Chapter 10, and include in the regulation a link to the Commission's website where the fees will also appear.

A Notice of Drafting was published in the *State Register* on September 26, 2014.

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Instructions:

Regulation 106-3 is amended as shown below.

Text:

106-3. Initial Fees.

The Commission may charge fees as shown in South Carolina Code of Regulations Chapter 10-38 and on the South Carolina Residential Builders Commission website at <http://llr.sc.gov/POL/ResidentialBuilders/>.

Fiscal Impact Statement:

There will be no cost incurred by the State or any of its political subdivisions for this regulation.

Statement of Rationale:

The updated regulation will centralize fee schedules and remove duplicative and outdated information.

Document No. 4519

DEPARTMENT OF LABOR, LICENSING AND REGULATION

SOIL CLASSIFIER ADVISORY COUNCIL

CHAPTER 108

Statutory Authority: 1976 Code Sections 40-1-50, 40-1-70, and 40-65-70

108-7. Fees

Synopsis:

The South Carolina Department of Labor, Licensing and Regulation proposes to amend Regulation 108-7 to remove the existing schedule of fees, cross-reference the fees in their new location in Chapter 10, and include in the regulation a link to the Council's website where the fees will also appear.

A Notice of Drafting was published in the *State Register* on September 26, 2014.

Instructions:

Regulation 108-7 is amended as shown below.

Text:

108-7. Fees.

The Advisory Council may charge fees as shown in South Carolina Code of Regulations Chapter 10-40 and on the South Carolina Soil Classifiers Advisory Council website at <http://llr.sc.gov/POL/Soil/>.

Fiscal Impact Statement:

There will be no cost incurred by the State or any of its political subdivisions for this regulation.

Statement of Rationale:

The updated regulation will centralize fee schedules and remove duplicative and outdated information.

Document No. 4520
DEPARTMENT OF LABOR, LICENSING AND REGULATION
BOARD OF VETERINARY MEDICAL EXAMINERS
CHAPTER 120
Statutory Authority: 1976 Code Sections 40-1-50, 40-1-70, 40-69-60, and 40-69-70

120-14. Fees

Synopsis:

The South Carolina Department of Labor, Licensing and Regulation proposes to amend Regulation 120-14 to remove the existing schedule of fees, cross-reference the fees in their new location in Chapter 10, and include in the regulation a link to the Board's website where the fees will also appear.

A Notice of Drafting was published in the *State Register* on September 26, 2014.

Instructions:

Regulation 120-14 is amended as shown below.

Text:

120-14. Fees.

The Board may charge fees as shown in South Carolina Code of Regulations Chapter 10-42 and on the South Carolina Board of Veterinary Medical Examiners website at <http://llr.sc.gov/POL/Veterinary/>.

Fiscal Impact Statement:

There will be no cost incurred by the State or any of its political subdivisions for this regulation.

Statement of Rationale:

The updated regulation will centralize fee schedules and remove duplicative and outdated information.

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Document No. 4546

DEPARTMENT OF NATURAL RESOURCES

CHAPTER 123

Statutory Authority: 1976 Code Sections 50-1-200, 50-1-220, 50-11-10, 50-11-96, 50-11-105, 50-11-310, 50-11-335, 50-11-350, 50-11-390, 50-11-520, 50-11-530, 50-11-854, 50-11-2200 and 50-11-2210

123-40. Wildlife Management Area Regulations

123-51. Turkey Hunting Rules and Seasons

123-52. Either-sex Days and Antlerless Deer Limits for Private Lands in Game Zones 1-6

Synopsis:

These regulations amend Chapter 123-40 Wildlife Management Area Regulations in order to set seasons, bag limits and methods of hunting and taking of wildlife on existing and additional Wildlife Management Areas.

A Notice of Drafting for this regulation was published on November 28, 2014 in the *South Carolina State Register*, Volume 38, Issue No. 11.

Instructions:

Amend Regulations 123-40, 123-51, and 123-52 as follows: Included are specific changes, deletions and additions. Unless specifically listed as a change, all other existing regulations remain intact.

123-40

A. Game Zone 1

3. Stumphouse WMA - Add new (b). Delete (b), (c), & (d).

B. Game Zone 2

2. Keowee WMA - (e)(ii) - Change wording.

3. Draper WMA - (d)(ii) - Change wording. (f)(i) - Change wording.

4. Fant's Grove WMA - (e)(ii) - Change wording.

Add –

10. Liberty Hill WMA.

11. Delta North WMA

12. Delta South WMA

C. Game Zone 3

Add:

6. Francis Marion National Forest

7. Moultrie

8. Santee Cooper WMA

9. Webb WMA

10. Bear Island WMA

11. Donnelley WMA

12. Hatchery WMA

13. Bonneau Ferry WMA

14. Santee Coastal Reserve WMA

15. Dungannon Heritage Preserve WMA

16. Edisto River WMA

17. Canal WMA

18. Palachucola WMA

19. St. Helena Sound Heritage Preserve WMA

20. Tillman Sand Ridge Heritage Preserve WMA

21. Victoria Bluff Heritage Preserve WMA

22. Hamilton Ridge WMA

- 23. Old Island Heritage Preserve WMA
- 24. Botany Bay Plantation Heritage Preserve WMA
- 25. Congaree Bluffs Heritage Preserve WMA
- 26. Wateree River Heritage Preserve WMA

D. Game Zone 4

- 5. Pee Dee Station WMA –(c) - change wording.
Add:
- 8. Great Pee Dee Heritage Preserve WMA
- 9. Longleaf Pine Heritage Preserve WMA
- 10. Manchester State Forest WMA
- 11. Lynchburg Savannah Heritage Preserve WMA
- 12. Hickory Top WMA
- 13. Oak Lea WMA
- 14. Santee Dam WMA
- 15. Wee Tee WMA
- 16. Santee Delta WMA
- 17. Samworth WMA
- 18. Cartwheel Bay Heritage Preserve WMA
- 19. Lewis Ocean Bay Heritage Preserve WMA
- 20. Waccamaw River Heritage Preserve WMA
- 21. Liberty Hill WMA

Delete E. Game Zone 5

Delete F. Game Zone 6

- 3.1 - change wording.
- 3.3 - change wording.
- 4.4 (b) and 4.4 (c) - change wording.
- 4.5 - delete wording.
- 4.6 - change wording.
- 4.9 - add new regulation.
- 5.2 - change wording.
- 6.1 - change wording.
- 10.1 - change wording.
- 10.13 - add WMA
- 10.14
 - 13. (a) - change wording.
 - add 41. Wateree River HP

123-51

1. A. Game Zone 1– change WMA turkey season for all WMAs in Game Zone 1 from April 1- May 1 to April 1- May 5

1.(b) - change wording.

B. Game Zone 2– change WMA turkey season for all WMAs in Game Zone 2 from April 1- May 1 to April 1- May 5

1.(b) - change wording.

Add:

- 7. Fants Grove WMA
- 8. Liberty Hill WMA
- 9. Delta South WMA

C. Game Zone 3– change WMA turkey season for all WMAs in Game Zone 3 from April 1- May 1 to April 1- May 5

1.(c) - change wording.

Add:

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4. Francis Marion National Forest
5. Mountrie
6. Santee Cooper WMA
7. Webb, Palachucola and Hamilton Ridge WMAs
8. Donnelley WMA
9. Bonneau Ferry WMA
10. Santee Coastal Reserve WMA
11. Edisto River WMA
12. Tillman Sand Ridge Heritage Preserve WMA
13. Victoria Bluff Heritage Preserve WMA
14. Botany Bay Plantation WMA
15. Wateree River Heritage Preserve WMA

D. Game Zone 4— change WMA turkey season for all WMAs in Game Zone 4 from April 1- May 1 to April 1- May 5

1.(b) - Change wording.

1.(c) - Change wording.

Add:

8. Great Pee Dee Heritage Preserve WMA
9. Longleaf Pine Heritage Preserve WMA
10. Manchester State Forest WMA
11. Hickory Top WMA
12. Oak Lea WMA
13. Santee Dam WMA
14. Wee Tee WMA
15. Cartwheel Bay Heritage Preserve WMA
16. Lewis Ocean Bay Heritage Preserve WMA
17. Waccamaw River Heritage Preserve WMA
18. Samworth WMA
19. Liberty Hill WMA

Delete - E. Game Zone 5

Delete - F. Game Zone 6

Change G to E Statewide Youth Hunting Day

Add 1 (c).

123-52.

2. - change word

5. - change wording

6. - change wording

Add 7

Change 7 to 8

Text:

ARTICLE 3

WILDLIFE AND FRESH WATER FISHERIES DIVISION—HUNTING REGULATIONS

SUBARTICLE 1

HUNTING IN WILDLIFE MANAGEMENT AREAS

123-40. Wildlife Management Area Regulations.

1.1 The regulations governing hunting including prescribed schedules and seasons, methods of hunting and taking wildlife, and bag limits for Wildlife Management Areas and special restrictions for use of WMA lands are as follows:

A. Game Zone 1

1. Other WMAs

- (a) Archery Hunts for Deer
 - (i) Oct. 17 – Oct. 30 either-sex
- (b) Primitive Weapons for Deer
 - (i) Oct. 1 through Oct. 10
- (c) Still Gun Hunts for Deer
 - (i) Oct. 11 through Oct. 16; Oct. 31 – Jan. 1
- (d) Still Gun Hunts for Bear
 - (i) Oct. 17 through Oct. 23
 - (ii) 1 bear per person, no bears 100 lbs. or less, no sow with cubs at her side.
 - (iii) All harvested bear must be tagged and reported to the Clemson Wildlife Office @ 864-654-1671 within 24 hours of harvest.
- (e) Special Party Dog Hunt for Bear
 - (i) Oct. 24 through Oct. 30
 - (ii) 1 bear per person, 5 bears per party, no bears 100 lbs. or less, no sow with cubs at her side. Groups hunting together are considered 1 party. Hogs allowed.
 - (iii) Parties (maximum of 25) must register with SCDNR, 311 Natural Resources Drive, Clemson, SC 29631 by September 1.
 - (iv) All harvested bear must be tagged and reported to the Clemson Wildlife Office @ 864-654-1671 within 24 hours of harvest.
- (f) Small Game
 - (i) Game Zone 1 seasons and bag limits apply
- (g) Hog Hunts with Dogs
 - (i) Jan. 2 – Jan. 10, Mar. 20 - Mar. 28

2. Glassy Mountain Archery Only Area – Chestnut Ridge Heritage Preserve

- (a) Archery Hunts for Deer.
 - (i) Oct. 1 – Jan. 1, either-sex
- (b) Small Game
 - (i) Game Zone 1 seasons and bag limits apply

3. Stumphouse WMA

- (a) In order to fish or hunt Stumphouse WMA each adult (21 or older) must have at least one youth 17 or under accompanying them. Senior Citizens over 65 years of age may fish without a youth present. No motorized vehicles or horses allowed on the property except in designated parking areas. Walk in use only.
- (b) Game Zone 1 seasons and bag limits, except small game only between Thanksgiving Day and March 1.

4. Long Creek Tract

- (a) Game Zone 1 seasons and bag limits, except small game only between Thanksgiving Day and Mar. 1

B. Game Zone 2

1. Other WMAs

- (a) Archery Hunts for Deer
 - (i) Sept. 15 – Sept. 30, either-sex
- (b) Primitive Weapons for Deer
 - (i) Oct. 1 through Oct. 10
- (c) Still Gun Hunts for Deer
 - (i) Oct. 11 through Jan. 1
- (d) Small Game
 - (i) Game Zone 2 seasons and bag limits apply
- (e) Hog Hunts with Dogs

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(i) Jan. 2 - 10, Mar. 20 - 28

2. Keowee WMA

(a) Designated as a Quality Deer Management Area. No hunting is allowed in research and teaching areas of Keowee WMA posted with white signs except those special hunts for youth or mobility-impaired as conducted by the Department.

(b) North of Hwy 123 and west of the Keowee arm of Lake Hartwell, and west of Hwy 291, small game hunting with shotguns only. All other areas are archery only for small game.

(c) Archery Hunts for Deer

(i) Oct. 15- Dec. 22 either-sex

(d) Raccoon and Opossum

(i) Game Zone 2 seasons and bag limits

(e) Other Small Game

(i) Game Zone 2 seasons and bag limits apply.

(ii) No small game hunting during archery deer hunts except for waterfowl, designated dove field hunting, or raccoon and opossum hunting at night.

3. Draper WMA

(a) Data cards required for hunter access, except draw dove hunts. Completed data cards must be returned daily before leaving the WMA.

(b) Archery Hunts for Deer

(i) Sept. 15 - Sept. 30, either-sex

(c) Primitive Weapons for Deer

(i) Oct. 1 - Oct. 10

(d) Still Gun Hunts for Deer

(i) Oct. 11 - Jan. 1

(e) Quail Hunts

(i) 1st and 2nd Sat. in Dec., 3rd and 4th Wed. in Dec., 1st and 2nd Wed. and Sat. in Jan.

(ii) Game Zone 2 bag limit

(iii) PM Shooting hours end 30 minutes prior to official sunset.

(f) Rabbit Hunts

(i) Wed. and Sat. in Jan. and Feb. following the last scheduled quail hunt until Mar. 1

(ii) Game Zone 2 bag limit

(g) Other Small Game (No fox squirrels)

(i) Zone 2 seasons and bag limits apply

4. Fants Grove WMA

(a) Designated as a Quality Deer Management Area

(b) Archery Deer Hunts

(i) Oct. 15- Dec. 22, either-sex

(c) Special Gun Hunts for Deer

(i) Hunters selected by drawing

(ii) Total 2 deer, one antlerless deer per day, no more than one buck.

(d) Raccoon and Opossum

(i) Game Zone 2 seasons and bag limits

(e) Other Small Game

(i) Game Zone 2 seasons and bag limits apply

(ii) No small game hunting during archery deer hunts except for waterfowl, designated dove field hunting, or raccoon and opossum hunting at night.

(iii) Waterfowl may be hunted Wed. and Sat. AM only.

5. Rock Hill Blackjacks HP WMA

(a) Archery Deer Hunts

(i) Sept. 15 – Jan. 1, either-sex

(b) Small Game

(i) No small game hunting

6. Belfast WMA

(a) All terrain vehicles are prohibited. Fishing is not allowed except through permitted special events. All harvested deer and turkeys must be checked in at the Belfast Check Station. Belfast WMA is open to public access during daylight hours (1/2 hour before sunrise to 1/2 hour after sunset) except during special hunts and events regulated by DNR. Hunters may not enter the WMA prior to 5:00 AM on designated hunts. Public visitation is not allowed during scheduled deer and turkey hunts. Data cards required for hunter access. Completed data cards must be returned daily upon leaving Belfast WMA.

- (b) Designated as a Quality Deer Management Area.
- (c) Archery Hunts for Deer
 - (i) Sept. 15 - Sept. 30 either-sex
- (d) Still Gun Hunts for Deer
 - (i) Hunters selected by drawing
- (e) Small Game (no fox squirrels)
 - (i) Thanksgiving Day – Mar. 1
 - (ii) Game Zone 2 bag limits

7. Broad River Waterfowl Management Area

- (a) Archery Deer Hunts
 - (i) Sept. 15 – Oct. 31 either-sex
- (b) Small Game
 - (i) Feb. 8 – Mar. 1
 - (ii) Game Zone 2 bag limits

8. McCalla WMA

- (a) Designated as a Quality Deer Management Area.
- (b) Deer Hunts
 - (i) Game Zone 2 seasons
- (c) Small Game
 - (i) Game Zone 2 seasons and bag limits apply
- (d) Hog Hunts with Dogs
 - (i) Jan. 2 - 10, Mar. 20 - 28
- (e) Special Hunt Area for Youth and Mobility Impaired Hunters
 - (i) No open season except for hunters selected by drawing
 - (ii) 1 deer per day, either-sex

9. Worth Mountain WMA

- (a) Designated as a Quality Deer Management Area
- (b) Deer Hunts
 - (i) Game Zone 2 seasons
- (c) Small Game
 - (i) Game Zone 2 seasons and bag limits apply.

10. Liberty Hill WMA

- (a) Designated as a Quality Deer Management Area.
- (b) Archery Hunts for Deer
 - (i) Sept. 15 - Sept. 30, either-sex.
- (c) Primitive Weapons for Deer
 - (i) Oct. 1 - Oct. 10
- (d) Still Gun Hunts for Deer
 - (i) Oct. 11 - Jan. 1
- (e) Small Game (No fox squirrels)
 - (i) Zone 2 seasons and bag limits apply.

11. Delta North WMA

- (a) Deer Hunts
 - (i) Game Zone 2 seasons
- (b) Small Game (No fox squirrels)
 - (i) Game Zone 2 seasons and bag limits apply

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12. Delta South WMA

- (a) Deer Hunts
 - (i) No open season except for hunters selected by drawing
 - (ii) 1 deer per day, either-sex

C. Game Zone 3

1. Other WMAs

- (a) Archery Deer Hunts
 - (i) Sept. 15 - Sept. 30, either-sex
- (b) Still Gun Hunts for Deer
 - (i) Oct. 1 - Jan. 1
- (c) Small Game
 - (i) Game Zone 3 seasons and bag limits apply

2. Crackerneck WMA and Ecological Reserve

(a) All individuals must sign in and out at main gate. Designated as a Quality Deer Management Area. Scouting seasons (no weapons), will be Saturdays only during September and March. The gate opens at 6:00am and closes at 8:00pm. On deer hunt days, gates will open as follows: Oct., 4:30am-8:30pm; Nov. - Dec., 4:30am-7:30pm. For special hog hunts in Jan. and Feb., gate will be open from 5:30am-7:00pm. On Saturday night raccoon hunts, raccoon hunters must cease hunting by midnight and exit the gate by 1:00am. On Friday night raccoon hunts, raccoon hunters must cease hunting by 1 hour before official sunrise and exit the gate by official sunrise. All reptiles and amphibians are protected. No turtles, snakes, frogs, toads, salamanders etc. can be captured, removed, killed or harassed.

- (b) Archery Deer Hunts
 - (i) 1st Fri. and Sat. in Oct
 - (ii) 2 deer, either-sex, no more than 1 buck.
- (c) Primitive Weapons Deer Hunts (no buckshot).
 - (i) 2nd Fri. and Sat. in Oct.
 - (ii) 2 deer, either-sex, no more than 1 buck
- (d) Still Gun Hunts for Deer
 - (i) 3rd Fri. in Oct. – Jan. 1, Fri., Sat. and Thanksgiving Day only except closed Dec. 25.
 - (ii) 5 deer total, 2 per day, buck only except on either-sex days Fri. and Sat. only from the 1st Fri. of gun hunts before Thanksgiving and the 1st Fri. and Sat. after Thanksgiving weekend. Total not to include more than 3 bucks.
- (e) Raccoon and Opossum
 - (i) 3rd Sat. night in Oct. – Jan. 1, Sat. nights only, except closed Dec. 25, 1st Fri. night in Jan. to last Fri. or Sat. night in Feb., Fri. and Sat. nights only.
 - (ii) 3 raccoons per party per night
- (f) Hog Hunts with Dogs (handguns only)
 - (i) 1st Fri. after Jan. 1 – last Fri. in Feb. Fridays only
 - (ii) No limit.
- (g) Other Small Game (except no open season on bobcats, foxes, otters or fox squirrels).
 - (i) 3rd Fri. in Oct. – last Fri. or Sat. in Feb. Fri., Sat. and Thanksgiving Day only except closed Dec. 25.
 - (ii) Game Zone 3 bag limits

3. Aiken Gopher Tortoise Heritage Preserve WMA

- (a) Archery Deer Hunts
 - (i) Sept. 15 - Sept. 30, either-sex
- (b) Still Gun Hunts for Deer
 - (i) Oct. 1 – Jan. 1.
- (c) Small Game (No fox squirrels).
 - (i) Thanksgiving day – Mar. 1.
 - (ii) Game Zone 3 bag limits.

4. Ditch Pond Heritage Preserve WMA

- (a) Archery Deer Hunts.

- (i) Sept. 15 – Jan. 1, either-sex.
- (b) Small Game (No fox squirrels).
 - (i) Thanksgiving day – Mar. 1.
 - (ii) Game Zone 3 bag limits.

5. Henderson Heritage Preserve WMA

- (a) Archery Deer Hunts.
 - (i) Sept. 15 – Jan. 1, either-sex

6. Francis Marion National Forest

(a) During deer hunts when dogs are used, buckshot only is permitted. On either-sex hunts with dogs, all deer must be checked in by one hour after legal sunset. Individual antlerless deer tags are not valid during dog hunts for deer. Tibwin Special Use Area (in Wambaw) is closed to hunting except for Special hunts. On youth deer hunts, only youths 17 and younger may carry a gun and must be accompanied by an adult 21 years old or older. No fox or coyote hunting with dogs on the Francis Marion.

- (b) Hog Hunts with Dogs
 - (i) 3rd full week in Mar., 3rd full week in May
- (c) Still Hog Hunts
 - (i) First full week in Mar.

(d) Hellhole WMA

- (i) Archery Deer Hunts
 - (1) Sept. 15 - Oct. 10, either-sex
- (ii) Still Gun Hunts for Deer
 - (1) Oct. 11 – Jan. 1 except during scheduled dog drive hunts
- (iii) Deer Hunts with Dogs (shotguns only)
 - (1) 1st Sat. in Nov., 1st Sat. in Dec.
 - (a) 2 deer per day, buck only
- (iv) Youth Only Deer Hunt with Dogs
 - (1) Sat. following the 2-day Wambaw buck only hunt in Nov.
 - (2) Requirements and bag limits for youth are the same as the statewide youth deer hunt day.
- (v) Small Game (no open season for fox hunting)
 - (1) Game Zone 3 seasons and bag limits apply.
 - (2) Dogs allowed during small game gun season only. Closed during scheduled periods using dogs to hunt deer.

(e) Waterhorn WMA

- (i) Archery Deer Hunts
 - (1) Sept. 15 - Oct. 10, either-sex
- (ii) Muzzleloader Hunts for Deer
 - (1) Oct. 11 - Oct. 20
- (iii) Still Gun Hunts for Deer
 - (1) Every Friday and Saturday beginning Nov. 1.
- (iv) Small Game (no open season for fox hunting)
 - (1) Game Zone 3 seasons and bag limits apply.
 - (2) Dogs allowed during small game gun season only. Closed to small game and waterfowl hunting during scheduled deer hunt periods.

(f) Wambaw WMA

- (i) Archery Deer Hunts
 - (1) Sept. 15 - Oct. 10, either-sex
- (ii) Still Gun Hunts for Deer
 - (1) Oct. 11 – Jan. 1 except during scheduled dog drive hunts west of Hwy 17.
 - (2) Still gun hunts only East of Hwy 17. No buckshot.
- (iii) Deer Hunts with Dogs (shotguns only)
 - (1) Fri. in Sept. before the last Sat. Northampton dog hunt, Wed. and Thurs. before the 3rd Sat. in Nov. and 2nd Sat. in Oct., first 2 days excluding Sunday after Dec. 25
 - (a) 2 deer per day, buck only

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- (2) 2nd Sat. in Dec.
 - (a) 1 deer per day, either-sex
 - (b) All deer must be checked in at designated check stations.

(iv) Youth Only Deer Hunt with Dogs

- (1) 4th Sat. in Oct.
- (2) Requirements and bag limits for youth are the same as the statewide youth deer hunt day.

(v) Seewee Special Use Area

- (1) Archery Deer Hunts
- (2) Sept. 15 – Jan. 1, either-sex

(vi) Small Game (no open season for fox hunting)

- (1) Game Zone 3 seasons and bag limits apply.

(2) Dogs allowed during small game gun season only. Closed during scheduled periods using dogs to hunt deer.

(g) Northampton WMA

(i) Archery Deer Hunts

- (1) Sept. 15 - Oct. 10, either-sex

(ii) Still Gun Hunts for Deer

- (1) Oct. 11 – Jan. 1 except during scheduled dog drive hunts.

(iii) Deer Hunts with Dogs (shotguns only)

(1) Last Sat. in Sept., Wed. and Thurs. before the 2nd Sat. in Oct., Fri. before the 4th Sat. in Nov., 3rd day excluding Sunday after Dec. 25

- (a) 2 deer per day, buck only

- (2) 2nd Sat. in Dec.

- (a) 1 deer per day, either-sex

- (b) All deer must be checked in at at designated check stations.

(iv) Youth Only Deer Hunt with Dogs

- (1) Last Saturday in Nov.
- (2) Requirements and bag limits for youth are the same as the statewide youth deer hunt day.

(v) Small Game (no open season for fox hunting)

- (1) Game Zone 3 seasons and bag limits apply.

(2) Dogs allowed during small game gun season only. Closed during scheduled periods using dogs to hunt deer.

(h) Santee WMA

(i) Archery Deer Hunts

- (1) Sept. 15 - Oct. 10, either-sex

(ii) Still Gun Hunts for Deer

- (1) Oct. 11 – Jan. 1 except during scheduled dog drive hunts

(iii) Deer Hunts with Dogs (shotguns only)

- (1) 2nd Fri. and Sat. in Sept., Wed. and Thurs. before the 4th Sat. in Oct., 1st Fri. in Dec.

- (a) 2 deer per day, buck only

- (2) 2nd Sat. in Dec.

- (a) 1 deer per day, either-sex

- (b) All deer must be checked in at designated check stations.

(iv) Youth Only Deer Hunt with Dogs

- (1) 3rd Sat. in Oct.
- (2) Requirements and bag limits for youth are the same as the statewide youth deer hunt day.

(v) Small Game (no open season for fox hunting)

- (1) Game Zone 3 seasons and bag limits apply.

(2) Dogs allowed during small game gun season only. Closed during scheduled periods using dogs to hunt deer.

7. Moultrie

(a) No hunting or shooting within fifty feet of the center of any road during gun hunts for deer except for SCDNR draw youth hunts.

(b) Bluefield WMA

- (i) Open only to youth 17 years of age or younger who must be accompanied by an adult at least 21 years of age. Youth hunters must carry a firearm and hunt. Adults with youth are allowed to carry a weapon and hunt.
- (ii) Still Gun Hunts for Deer
 - (1) Sept. 15 – Jan. 1, Wed. and Sat. only
- (iii) Small Game (no fox squirrels)
 - (1) Game Zone 3 seasons and bag limits apply.
 - (2) No small game hunting during scheduled deer hunts.

(c) Greenfield WMA

- (i) Still Gun Hunts for Deer
 - (1) Sept. 15 – Jan. 1
- (ii) Small Game (no fox squirrels)
 - (1) Thanksgiving Day - Mar. 1
 - (2) Game Zone 3 bag limits

(d) North Dike WMA

- (i) Still Gun Hunts for Deer
 - (1) Sept. 15 - Oct. 15.
- (ii) Special Gun Hunts for youth and women
 - (1) Hunters selected by drawing.
 - (2) 1 deer per day, either-sex
- (iii) Small Game (no fox squirrels)
 - (1) Jan. 2 - Mar. 1
 - (2) Game Zone 3 bag limits.
 - (3) Sandy Beach Waterfowl Area open for raccoon hunting Feb. 1 – Mar. 1

(e) Porcher and Hall WMAs

- (i) Archery Deer Hunts
 - (1) Sept. 15 – Jan. 1, either-sex
- (ii) Small Game (no fox squirrels) shotguns only
 - (1) Jan. 2 – Mar. 1
 - (2) Game Zone 3 bag limits

(f) Cross Station Site

- (i) Special Gun Hunts for youth and women
 - (1) No open season except hunters selected by drawing
 - (2) 1 deer per day, either-sex

8. Santee Cooper WMA

- (a) Data cards required for hunter access. Completed data cards must be returned daily upon leaving. Hunters limited to two deer/tree stands which must contain a label with the hunter's name and address. No stands may be placed on Santee Cooper WMA prior to Sept. 1. Campground is open during scheduled deer hunts only.
- (b) Designated as a Quality Deer Management Area
- (c) Archery Deer Hunts
 - (i) Sept. 15 - Oct. 31, either-sex
- (d) Primitive Weapons Deer Hunts
 - (i) Nov. 1 - Monday before Thanksgiving Day
- (e) Small Game
 - (i) Thanksgiving Day – Mar. 1
 - (ii) Game Zone 3 bag limits

9. Webb WMA

- (a) Data cards are required for hunter access. Completed data cards must be returned daily upon leaving. Designated as a Quality Deer Management Area.
- (b) Still Gun Hunts for Deer
 - (i) Hunters selected by drawing
 - (ii) 2 deer, either-sex but only 1 buck
- (c) Hog Hunts with Dogs

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- (i) 1st Thurs. – Sat. in Mar., 2nd Thurs. – Sat. in May, and last Thurs. - Sat. in August
- (d) Quail Hunts
 - (i) 2nd and 4th Wed. in Jan., 2nd and 4th Sat. in Jan., 1st and 3rd Sat. in Feb., 1st and 3rd Wed. in Feb.
 - (ii) Game Zone 3 bag limit
 - (iii) Shooting hours end 30 minutes prior to official sunset
- (e) Other Small Game (no fox squirrels)
 - (i) The full week of Thanksgiving, Dec. 15 - Mar. 1
 - (ii) Game Zone 3 bag limits
- (f) Dove Hunting
 - (i) Designated public dove field only on specified days.

10. Bear Island WMA

- (a) All hunters must sign in and out at the Bear Island Office. Hunting in designated areas only. Designated as a Quality Deer Management Area.
- (b) Archery Deer Hunts
 - (i) Oct. 1 - Oct. 10, either-sex
- (c) Still Gun Hunts for Deer
 - (i) Hunters selected by drawing
 - (ii) 3 deer, either-sex but only 1 buck
- (d) Hog Hunts with Dogs
 - (i) 1st Thurs. – Sat. in March
- (e) Alligator Hunts (Bear Island East and West Units only)
 - (i) Hunters selected by drawing only. Limited season with restricted access.
 - (ii) Limit and size restrictions as prescribed.
- (f) Small Game
 - (i) Feb. 8 - Mar. 1
 - (ii) Game Zone 3 bag limits

11. Donnelley WMA

- (a) All hunters must sign in and out at the check station. Hunting in designated areas only. Designated as a Quality Deer Management Area.
- (b) Archery Deer Hunts
 - (i) Sept. 15 - Sept. 30, either-sex
- (c) Still Gun Hunts for Deer
 - (i) Hunters selected by drawing
 - (ii) 3 deer, either-sex but only 1 buck
- (d) Hog Hunts with Dogs
 - (i) 1st Thurs. – Sat. in March
- (e) Small Game (no fox squirrels)
 - (i) Thanksgiving Day - Mar. 1
 - (ii) Game Zone 3 bag limits

12. Hatchery WMA

- (a) Archery Deer Hunts
 - (i) Sept. 15 - Jan. 1, either-sex

13. Bonneau Ferry WMA

(a) All terrain vehicles prohibited. Hunting access by boat is prohibited. For hunting, the Adult/youth side is open only to youth 17 years old or younger who must be accompanied by only one adult 21 years of age or older. Youth hunters must carry a firearm and hunt. Adults with youth hunters may also carry a firearm and hunt. For deer and small game, regulations for the adult/youth and general use sides of the property will alternate each year as prescribed by the Department. All hunters must sign in and sign out upon entering or leaving. All deer must be checked out at the main entrance. Closed to public access one hour after sunset until one hour before sunrise except for special hunts regulated by DNR. Hunters may not enter WMA prior to 5:00 AM on designated hunts. All impoundments and adjacent posted buffers are closed to all public access Nov. 1 – Mar. 1 except for special draw deer hunts and waterfowl hunts regulated by DNR during the regular waterfowl season. Hunted areas are closed to general public access during scheduled deer, turkey and waterfowl hunts. No fox hunting.

- (b) Adult/Youth Side
 - (i) Still Gun Hunts for Deer
 - (1) Sept. 15 – Jan. 1, Wed., Fri. and Sat., entire week of Thanksgiving and 5 days before Christmas until Jan. 1.
- (c) General Use Side
 - (i) Archery Deer Hunts
 - (1) Sept. 15 - Sept. 30, either-sex
 - (ii) Still Gun Hunts for Deer
 - (1) Hunters selected by drawing
 - (2) Total 3 deer, either-sex except only 1 buck.
 - (3) Hunters are required to have permit in possession and must sign in and out (Name, permit # and deer killed each day).
- (d) Small Game (no fox squirrels or fox)
 - (i) Jan. 2 – Mar. 1
 - (ii) Game Zone 3 bag limits
 - (iii) Dogs allowed during gun seasons only
- (e) Bonneau Ferry Fishing Regulations
 - (i) Open to fishing on Thurs. through Sun. from Mar. 2 – Oct. 31 during daylight hours only
 - (ii) Adult/youth fishing only. Each youth (17 years and under) must be accompanied by no more than two adults 18 years of age or older.
 - (iii) The youth must actively fish.
 - (iv) Fishing is not allowed during scheduled deer and turkey hunts.
 - (v) Only electric motors may be used.
 - (vi) Creel limits per person per day are: largemouth bass – 2, panfish (bluegill, redear, crappie, pumpkinseed, redbreast) – 10, catfish – 5, species not listed – no limit. Grass carp must be released alive immediately.

14. Santee Coastal Reserve WMA

- (a) Archery Deer Hunts
 - (i) Sept. 15 - Jan. 1, either-sex
 - (ii) Hunting on mainland only
- (b) Hog Hunts with Dogs
 - (i) 2nd full week in March
- (c) Alligator Hunts
 - (i) Hunters selected by drawing only. Limited season with restricted access.
 - (ii) Limit and size restrictions as prescribed
- (d) Small Game (no fox squirrels)
 - (i) Thanksgiving Day – Mar. 1
 - (ii) Game Zone 3 bag limits

15. Dungannon Heritage Preserve WMA

- (a) Archery Deer Hunts
 - (i) Sept. 15 - Jan. 1, either-sex
- (b) Small Game (no fox squirrels)
 - (i) Thanksgiving Day - Jan. 31
 - (ii) Game Zone 3 bag limits

16. Edisto River WMA

- (a) Archery Deer Hunts
 - (i) Sept. 15 – Oct. 10, either-sex
- (b) Still Gun Hunts for Deer
 - (i) Oct. 11 – Jan. 1
- (c) Raccoon and Opossum
 - (i) Game Zone 3 seasons and bag limits
- (d) Other Small Game
 - (i) Thanksgiving Day - Mar. 1

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- (ii) Game Zone 3 bag limits

17. Canal WMA

- (a) Quail Hunts
 - (i) Game Zone 3 season and bag limit

18. Palachucola WMA

(a) Data cards are required for hunter access. Completed data cards must be returned daily upon leaving WMA. Designated as a Quality Deer Management Area.

- (b) Archery Deer Hunts
 - (i) Sept. 15 - Oct. 10, either-sex
- (c) Still Gun Hunts for Deer
 - (i) Hunters selected by drawing
 - (ii) 3 deer, either-sex but only 1 buck
- (d) Hog Hunts with Dogs
 - (i) 1st Thurs. – Sat. in Mar., 2nd Thurs. – Sat. in May, and last Thurs. - Sat. in August
- (e) Quail Hunts
 - (i) 2nd and 4th Wed. in Jan., 2nd and 4th Sat. in Jan., 1st and 3rd Sat. in Feb., 1st and 3rd Wed. in Feb.
 - (ii) Game Zone 3 bag limit
 - (iii) Shooting hours end 30 minutes prior to official sunset.
- (f) Other Small Game (no fox squirrels)
 - (i) The full week of Thanksgiving, Dec. 15 - Mar. 1
 - (ii) Game Zone 3 bag limits

19. St. Helena Sound Heritage Preserve WMA

(a) Deer hunting by permit only obtained at McKenzie Field Station. Camping by special permit only and on Otter Island only. No small game hunting.

- (b) Ashe, Beet, Warren, Otter, Big and South Williman Archery Deer Hunts
 - (i) Sept. 15 – Jan. 1, either-sex

20. Tillman Sand Ridge Heritage Preserve WMA

- (a) Archery Deer Hunts
 - (i) Sept. 15 - Jan. 1, either-sex
- (b) Small Game (no fox squirrels)
 - (i) Thanksgiving Day - Mar. 1
 - (ii) Game Zone 3 bag limits

21. Victoria Bluff Heritage Preserve WMA

- (a) Archery Deer Hunts
 - (i) Sept. 15 - Jan. 1, either-sex
- (b) Small Game (no fox squirrels)
 - (i) Jan. 2 - Mar. 1
 - (ii) Game Zone 3 bag limits
 - (iii) Shotguns only

22. Hamilton Ridge WMA

(a) Designated as a Quality Deer Management Area. Horseback riding by permit only. No ATVs allowed. Data cards are required for hunter access. Completed data cards must be returned daily upon leaving the WMA.

- (b) Archery Deer Hunts
 - (i) Sept. 15 - Oct. 10, either-sex
- (c) Still Gun Hunts for Deer
 - (i) Hunters selected by drawing
 - (ii) 3 deer, either-sex but only 1 buck
- (d) Hog Hunts with Dogs
 - (i) 1st Thurs. – Sat. in Mar., 2nd Thurs. – Sat. in May, and last Thurs. - Sat. in August.
- (e) Quail Hunts
 - (i) 2nd and 4th Wed. in Jan., 2nd and 4th Sat. in Jan., 1st and 3rd Sat. in Feb., 1st and 3rd Wed. in Feb.
 - (ii) Game Zone 3 bag limit
 - (iii) Shooting hours end 30 minutes prior to official sunset.

- (f) Other Small Game (no fox squirrels)
 - (i) The full week of Thanksgiving, Dec. 15 - Mar. 1.
 - (ii) Game Zone 3 bag limits
 - (iii) Dove hunting on designated public dove field only

23. Old Island Heritage Preserve WMA

- (a) Archery Deer Hunts
 - (i) Sept. 15 – Jan. 1, either-sex

24. Botany Bay Plantation Heritage Preserve WMA

(a) Designated as a Quality Deer Management Area. All hunters, fishermen and visitors must obtain and complete a day use pass upon entering the area and follow all instructions on the pass. Botany Bay Plantation WMA is open to public access during daylight hours (1/2 hour before sunrise to 1/2 hour after sunset) except during special hunts and events regulated by DNR. Area is closed to general public access during special scheduled hunts. Hunting in designated areas only. Hunting access by boat is prohibited. Fishing in the Jason's Lake complex and all other ponds is adult/youth catch and release only on designated days. For adult/youth fishing, youth must be accompanied by no more than two adults 18 years old or older. Adult may also fish.

- (b) Archery Deer Hunts
 - (i) Sept. 15 - Oct. 10, Mon. – Sat. during the week of Thanksgiving, Mon. – Sat. during the week of Christmas, either-sex.
- (c) Still Gun Hunts for Deer
 - (i) Hunters selected by drawing
 - (ii) Total 3 deer, either-sex but only 1 buck
 - (iii) Hunters are required to have permit in possession and must sign in and sign out (Name, permit # and deer killed each day) at the designated check station. All harvested deer must be checked in at the designated check station.
- (d) Small Game (no fox squirrels or foxes)
 - (i) Jan. 2 – Mar. 1 (Wed. through Sat. only)
 - (ii) Game Zone 3 bag limits
 - (iii) Dogs allowed during gun seasons only

25. Congaree Bluffs Heritage Preserve WMA

- (a) Still Gun Hunts for Deer
 - (i) Hunters selected by drawing.
 - (ii) Total 1 deer per day, either-sex

26. Wateree River Heritage Preserve WMA

- (a) Data cards are required for hunter access. Completed data cards must be returned daily upon leaving WMA. Designated as a Quality Deer Management Area.
- (b) Archery Deer Hunts
 - (i) Sept. 15 - Oct. 10, either-sex
- (c) Still Gun Hunts for Deer
 - (i) Hunters selected by drawing
 - (ii) 3 deer, either-sex but only 1 buck
- (f) Small Game (no fox squirrels)
 - (i) Thanksgiving - Mar. 1
 - (ii) Game Zone 3 bag limits.

D. Game Zone 4

1. Other WMAs

- (a) Archery Deer Hunts.
 - (i) Sept. 15 - Oct. 10, either-sex
- (b) Still Gun Hunts for Deer
 - (i) Oct. 11 – Jan. 1
- (c) Small Game
 - (i) Game Zone 4 seasons and bag limits apply

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2. Marsh WMA

(a) All visitors to Marsh WMA are required to sign in upon entry to the WMA and sign out upon exit from the WMA and provide any additional information requested. No ATVs allowed.

(b) Special Hunt Area for Youth and Mobility Impaired Hunters

(i) No open season except for hunters selected by drawing

(ii) 1 deer per day, either-sex

(c) Archery Deer Hunts

(i) Sept. 15 - Oct. 31, either-sex

(d) Still Gun Hunts for Deer

(i) Nov. 1 - Nov. 30

(e) Still Hog Hunts

(i) First full week in Mar.

(f) Hog Hunts with Dogs

(i) 3rd full week in Mar. and 3rd full week in May

(g) Raccoon and Opossum Hunts

(i) Game Zone 4 seasons and bag limits

(h) Small Game (No fox squirrels)

(i) Thanksgiving – Mar. 1

(ii) Game Zone 4 bag limits

3. Sand Hills State Forest WMA

(a) Hunting by the general public closed during scheduled field trials on the Sand Hills State Forest Special Field Trial Area. Hunting allowed during permitted field trials on the Sand Hills State Forest Special Field Trial Area in compliance with R.123-96. No man-drives allowed.

(b) Archery Deer Hunts

(i) Sept. 15 – Oct. 10, either-sex

(c) Still Gun Hunts for Deer

(i) Oct. 11 – Jan. 1

(d) Small Game

(i) Game Zones 4 seasons and bag limits apply. No daytime fox hunting from Sept. 15 – Jan. 1

4. McBee WMA

(a) Archery Deer Hunts

(i) Sept. 15 – Oct. 10, either-sex

(b) Still Gun Hunts for Deer.

(i) Oct. 11 - Saturday before Thanksgiving

(c) Quail

(i) no open season except hunter selected by drawing. Game Zone 4 bag limit.

(d) Other Small Game (no fox squirrels)

(i) Jan. 15 - Mar. 1

(ii) Game Zone 4 bag limits

5. Pee Dee Station Site WMA

(a) All visitors are required to sign in upon entry to the WMA and sign out upon exit and provide any additional information requested on sign in sheets at the kiosk. No ATVs allowed.

(b) Archery Deer Hunts

(i) Sept. 15 - Oct. 31, either-sex

(c) Primitive Weapons Deer Hunts

(i) Nov. 1 - Nov. 30

(d) Small Game (no fox squirrels)

(i) Thanksgiving Day - Mar. 1

(ii) Game Zone 4 bag limits

6. Woodbury WMA

(a) All visitors are required to sign in upon entry and sign out upon exit and provide any additional information requested on sign in sheets at the kiosk. No ATVs allowed.

(b) Designated as a Quality Deer Management Area

- (c) Archery Deer Hunts
 - (i) Sept. 15 – Oct. 10, either-sex
- (d) Primitive Weapons Deer Hunts
 - (i) Oct. 11 - Oct. 20
- (e) Still Gun Hunts for Deer
 - (i) Oct. 21 - Jan. 1
- (f) Still Hog Hunts
 - (i) First full week in Mar.
- (g) Hog Hunts with Dogs
 - (i) 3rd full week in Mar. and 3rd full week in May
- (h) Raccoon and opossum
 - (i) Game Zone 4 seasons and bag limits
- (i) Other Small Game (no fox squirrels)
 - (i) Thanksgiving Day - Mar. 1
 - (ii) Game Zone 4 bag limits

7. Little Pee Dee Complex WMA

(a) Includes Little Pee Dee River HP, Tilghman HP, Dargan HP and Ward HP in Horry and Marion Counties. This also includes the Upper Gunters Island and Huggins tracts in Horry Co. which are part of Dargan HP.

- (b) Archery Deer Hunts
 - (i) Sept. 15 – Oct. 10, either-sex
- (c) Primitive Weapons Deer Hunts
 - (i) Oct. 11 – Oct. 20.
- (d) Still Gun Hunts for Deer
 - (i) Nov. 6 - Jan. 1.
- (e) Still Hog Hunts
 - (i) First full week in Mar.
- (f) Hog Hunts with Dogs
 - (i) 2nd full week in Mar.
- (g) Raccoon and Opossum
 - (i) Game Zone 4 seasons and bag limits
- (h) Other Small Game (no fox squirrels)
 - (i) Thanksgiving Day – Mar. 1
 - (ii) Game Zone 4 bag limits

8. Great Pee Dee Heritage Preserve WMA

(a) All visitors are required to sign in upon entry and sign out upon exit and provide any additional information requested on sign in sheets at the kiosk. No ATVs allowed.

(b) For big game hunting, access is restricted from two hours before sunrise to two hours after official sunset.

- (c) Archery Deer Hunts
 - (i) Sept. 15 - Oct. 31, either sex
- (d) Still Gun Hunts for Deer
 - (i) Nov. 1 - Nov. 30
- (e) Still Hog Hunts
 - (i) First full week in March
- (f) Hog Hunts with Dogs
 - (i) 3rd full week in Mar. and 3rd full week in May
- (g) Raccoon and Opossum
 - (i) Game Zone 4 seasons and bag limits
- (h) Other Small Game (no fox squirrels)
 - (i) Thanksgiving Day to Mar. 1
 - (ii) Game Zone 4 bag limits.

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9. Longleaf Pine Heritage Preserve WMA

- (a) Archery Deer Hunts
 - (i) Sept. 15 - Oct. 10, either-sex
- (b) Still Gun Hunts for Deer
 - (i) Oct. 11 - Jan. 1
- (c) Small Game (no fox squirrels)
 - (i) Thanksgiving Day – Mar. 1
 - (ii) Game Zone 4 bag limits.

10. Manchester State Forest WMA

(a) Deer must be checked at designated check stations. Individual antlerless deer tags are not valid during dog hunts for deer.

- (b) Archery Deer Hunts
 - (i) 3rd Mon. in Sept. – the following Sat., either-sex
- (c) Primitive Weapons Deer Hunts
 - (i) 4th Mon. in Sept. – following Sat.
- (d) Deer Hunts with Dogs
 - (i) Clubs selected by drawing.
 - (ii) 10 antlered deer per day per club, 5 antlerless deer per day per club, 1 deer per person.
- (e) Still Gun Hunts for Deer
 - (i) 5th Mon. in Sept. – following Sat., 1st Mon. in Oct. – following Sat., 2nd Mon. in Oct. – following Sat., 3rd Tues. in Oct. – following Fri., 4th Tues. in Oct. – following Fri., 5th Tues. in Oct. – following Thurs., 1st Tues. in Nov. – following Fri., 2nd Tues. in Nov. – following Sat., 3rd Tues. in Nov. – following Fri., Mon. – Sat. the week of Thanksgiving, 4th Mon. in Nov. – following Fri., 1st Tues. in Dec. – following Fri., 1st full week following the 1st Tues. in Dec. – following Fri., 2nd full week following the 1st Tues. in Dec. – following Fri., 3rd full week following 1st Tues. in Dec. – following Sat.
 - (ii) In years when there is a fifth Tues. in Oct., additional deer hunts may be scheduled on Fri. and Sat. during Oct. and Nov.
 - (iii) In years when there is a fifth Mon. in Dec., additional hunts may be scheduled that week.
- (f) Small Game
 - (i) Thanksgiving Day – Mar. 1.
 - (ii) Game Zone 4 bag limits.
- (g) Hog Hunts with Dogs
 - (i) 2nd full week in Mar.

11. Lynchburg Savanna Heritage Preserve WMA

- (a) Small Game Only (no fox squirrels)
 - (i) Game Zone 4 seasons and bag limits

12. Hickory Top WMA

(a) Data cards required for hunter access. Completed data cards must be returned daily upon leaving. The Greentree Reservoir is open to hunting during the regular Hickory Top seasons during years when the Greentree Reservoir remains unflooded.

- (b) Archery Deer Hunts
 - (i) Sept. 15 - Oct. 31, either-sex
- (c) Primitive Weapons Deer Hunts
 - (i) Nov. 1 – Jan. 1
- (d) Hog Hunts with Dogs
 - (i) 2nd full week in Mar.
- (e) Small Game (no fox squirrels)
 - (i) Game Zone 4 seasons and bag limits apply.

13. Oak Lea WMA

(a) Data cards required for hunter access during archery deer hunts, turkey hunts and small game hunts. Completed data cards must be returned daily upon leaving the WMA.

- (b) Archery Deer Hunts
 - (i) Sept. 15 - 30, either-sex

- (c) Still Gun Hunts for Deer
 - (i) Hunters selected by drawing
 - (ii) Total 20 deer per hunt party, either-sex
- (d) Small Game (except quail)
 - (i) Jan. 2 – Mar. 1 except no small game hunting during scheduled quail hunts
 - (ii) Game Zone 4 bag limits
- (e) Quail
 - (i) Designated dates within Game Zone 5 season
 - (ii) Game Zone 4 bag limit

14. Santee Dam WMA

- (a) Archery Deer Hunts
 - (i) Sept. 15 - Oct. 31, either-sex
- (b) Primitive Weapons Deer Hunts
 - (i) Nov. 1 – Jan. 1
- (c) Hog Hunts with Dogs
 - (i) 2nd full week in March
- (d) Small Game (no fox squirrels)
 - (i) Jan. 2 – Mar. 1
 - (ii) Game Zone 4 bag limits

15. Wee Tee WMA

- (a) Archery Deer Hunts
 - (i) Sept. 15 – Oct. 10, either-sex
- (b) Still Gun Hunts for Deer
 - (i) Oct. 11 – Jan. 1
- (c) Still Hog Hunts
 - (i) First full week in March
- (d) Hog Hunts with Dogs
 - (i) 2nd full week in March
- (e) Raccoon and Opossum
 - (i) Game Zone 4 seasons and bag limits
- (f) Other Small Game (no fox squirrels, no fox hunting)
 - (i) Thanksgiving Day - Mar. 1
 - (ii) Game Zone 4 bag limits
 - (iii) Dogs allowed during small game gun season only

16. Santee Delta WMA

- (a) Archery Deer Hunts (impoundments only)
 - (i) Sept. 15 - Oct. 10, either-sex
- (b) Hog Hunts with Dogs
 - (i) 2nd full week in Mar. (impoundments only)

17. Samworth WMA

- (a) Archery Deer Hunts (impoundments only)
 - (i) Sept. 15 - Oct. 10, either-sex
- (b) Hog Hunts with Dogs
 - (i) 2nd full week of Mar. (impoundments only)

18. Cartwheel Bay Heritage Preserve WMA

- (a) Archery Deer Hunts
 - (i) Sept. 15 – Oct 23, Nov. 6 - Jan. 1, either-sex
- (b) Small Game (no fox squirrels)
 - (i) Thanksgiving Day - Mar. 1
 - (ii) Game Zone 4 bag limits

19. Lewis Ocean Bay Heritage Preserve WMA

- (a) All deer hunters must sign in and sign out daily and record harvest at the kiosk.
- (b) Archery Deer Hunts

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- (i) Sept. 15 - Oct. 10, either-sex
- (c) Primitive Weapons Deer Hunts
 - (i) Oct. 11 - Oct. 20
- (d) Still Gun Hunts for Deer
 - (i) Nov. 6 - Jan. 1.
- (e) Small Game (no fox squirrels).
 - (i) Thanksgiving Day – Mar. 1
 - (ii) Game Zone 4 bag limits

20. Waccamaw River Heritage Preserve WMA

- (a) Archery Deer Hunts
 - (i) Sept. 15 - Oct. 10, either-sex
- (b) Primitive Weapons Deer Hunts
 - (i) Oct. 11 - Oct. 20
- (c) Still Gun Hunts for Deer
 - (i) Nov. 6 - Jan. 1
- (d) Still Hog Hunts
 - (i) First full week in March
- (e) Hog Hunts with Dogs
 - (i) 2nd full week in Mar.
- (f) Small Game (no fox squirrels)
 - (i) Thanksgiving Day – Mar. 1
 - (ii) Game Zone 4 bag limits

21. Liberty Hill WMA

- (a) Designated as a Quality Deer Management Area
- (b) Archery Hunts for Deer
 - (i) Sept. 15 - Sept. 30, either-sex
- (c) Primitive Weapons for Deer
 - (i) Oct. 1 - Oct. 10
- (d) Still Gun Hunts for Deer
 - (i) Oct. 11 - Jan. 1
- (e) Small Game (No fox squirrels)
 - (i) Zone 4 seasons and bag limits apply.

GENERAL REGULATIONS

2.1 Except as provided in these regulations, no person may hunt or take wildlife on areas designated by the South Carolina Department of Natural Resources (SCDNR) as Wildlife Management Area (WMA) lands.

2.2 Entry onto WMA land is done wholly and completely at the risk of the individual. Neither the landowners nor the State of South Carolina nor the South Carolina Department of Natural Resources accepts any responsibility for acts, omissions, or activities or conditions on these lands which cause personal injury or property damage.

2.3 Entry onto WMA land constitutes consent to an inspection and search of the person, game bag or creel.

2.4 No person may hunt or take wildlife on WMA land unless an individual is in possession of a valid South Carolina license, a valid WMA permit, and other applicable federal or state permits, stamps or licenses.

2.5 No Sunday hunting is permitted on any WMA lands.

2.6 On all WMA lands, baiting or hunting over a baited area is prohibited. As used in this section, “bait” or “baiting” means the placing, depositing, exposing, distributing, or scattering of shelled, shucked, or unshucked corn, wheat, or other grain or other food stuffs to constitute an attraction, lure, or enticement to, on, or over any area. “Baited area” means an area where bait is directly or indirectly placed, deposited, exposed, distributed, or scattered and the area remains a baited area for ten (10) days following the complete removal of all bait. Salt/minerals are not considered bait.

2.7 On WMA lands, construction or use of tree stands is prohibited if the tree stand is constructed by driving nails or other devices into trees or if wire is wrapped around trees. Other tree stands are permitted provided they

are not permanently affixed or embedded in the tree. All stands and temporary climbing devices must be removed by the end of the deer hunting season.

2.8 On WMA lands, any hunter younger than sixteen (16) years of age must be accompanied by an adult (21 years or older) who is validly licensed and holds applicable permits, licenses or stamps for the use of WMA lands. Sight and voice contact must be maintained.

2.9 Notwithstanding any other provision of these regulations, the Department may permit special hunts on any day during the regular hunting season.

2.10 No person may release or attempt to release any animal onto WMA lands without approval from the Department.

2.11 While participating in a hunt on WMAs, no person may possess, consume or be under the influence of intoxicants, including beer, wine, liquor or drugs.

2.12 On WMA lands, during the designated statewide youth deer hunt day, only still hunting is allowed. The limit is two deer total to include no more than one antlerless deer.

2.13 Taking or destroying timber, other forest products or cutting firewood on WMA lands without written permission from the landowner or his agent is prohibited. Users of WMA lands are prohibited from planting, attempting to plant, burning or otherwise attempting to manipulate crops, natural vegetation or openings without written permission from the landowner or his agent.

2.14 On WMA lands, hunting armadillos and coyotes at night is prohibited. Armadillos and coyotes may be hunted during any open season for game during daylight hours with no bag limit. Weapon(s) used to hunt armadillos and coyotes are limited to the weapon(s) that are allowed for the current open season on WMA.

2.15 On WMA lands during special designated hunts, a WMA may be closed to other public access.

2.16 Still hunting for hogs is permitted on WMAs during any open season for game during daylight hours with only the weapons allowed during the hunting season in progress unless otherwise prohibited. No hog may be transported alive from a WMA. Hogs may not be hunted at night. There is no bag limit on hogs. Hunters must wear a hat, coat, or vest of solid international orange while hog hunting. Buckshot is prohibited. During hog hunts with dogs, no still or stalk hunting is allowed and only handguns are permitted. No hog hunting with dogs is allowed except during special designated seasons.

2.17 Unless otherwise specified, small game hunting seasons and bag limits are the same as Game Zone seasons and bag limits except no hunting before Sept. 1 or after Mar. 1.

WEAPONS

3.1 On WMA lands hunters may use any shotgun, rifle, bow and arrow, crossbow or hand gun except that specific weapons may be prohibited on certain hunts. Blow guns, dart guns, drugged arrows or arrows with exploding tips are not permitted. Small game hunters may possess or use shotguns with shot no larger than No. 2 or .22 rimfire or smaller rifles/handguns or primitive muzzle-loading rifles of .40 caliber or smaller. Small game hunters may not possess or use buckshot, slugs or shot larger than No. 2. Small game hunters using archery equipment must use small game tips on the arrows (judo points, bludgeon points, etc.).

3.2 For Special Primitive Weapons Seasons, primitive weapons include bow and arrow, crossbow and muzzle-loading shotguns (20 gauge or larger) and rifles (.36 caliber or larger) with open or peep sights or scopes, which use black powder or a black powder substitute that does not contain nitro-cellulose or nitro-glycerin components as the propellant charge. There are no restrictions on ignition systems (e.g. flintstone, percussion cap, shotgun primer, disk, electronic, etc.). During primitive weapons season, no revolving rifles are permitted.

3.3 On WMA lands big game hunters are not allowed to use armor-piercing, tracer, incendiary, or full metal jacket bullets or .22 or smaller rimfire. Buckshot is prohibited during still gun hunts for deer on WMA lands in Game Zones 3 & 4.

3.4 On WMAs all firearms transported in vehicles must be unloaded and secured in a weapons case, or in the trunk of a vehicle or in a locked toolbox. On the Francis Marion Hunt Unit during deer hunts with dogs, loaded shotguns may be transported in vehicles. Any shotgun, centerfire rifle, rimfire rifle or pistol with a shell in the chamber or magazine, or a muzzleloader with a cap on the nipple or a flintlock with powder in the flash pan is considered loaded.

3.5 No target practice is permitted on WMA lands except in specifically designated areas.

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3.6 On WMA lands during still gun hunts for deer or hogs there shall be no hunting or shooting from, on or across any road open to vehicle traffic. During any deer or hog hunt there shall be no open season for hunting on any designated recreational trail on U.S Forest Service or S.C. Public Service Authority property.

DEER

4.1 On WMA lands with designated check stations, all deer bagged must be checked at a check station. Deer bagged too late for reporting one day must be reported the following day.

4.2 Unless otherwise specified by the Department, only bucks (male deer) may be taken on all WMA lands. Antlered bucks must have antlers visible two (2) inches above the hairline to be legally bagged on "bucks only" hunts. Male deer with visible antlers of less than two (2) inches above the hairline must be taken only on either-sex days or pursuant to permits issued by the Department. A point is any projection at least one inch long and longer than wide at some location at least one inch from the tip of the projection.

4.3 On WMA lands, man drives for deer are permitted between 10:00 a.m. and 2:00 p.m. only, except that no man drives may be conducted on days designated by the Department for taking deer of either sex except on WMA lands in Game Zones 1 and 2, man drives will be permitted on the last two (2) scheduled either-sex days. A man drive is defined as an organized hunting technique involving two (2) or more individuals whereby an attempt is made to drive game animals from cover or habitat for the purpose of shooting, killing, or moving such animals toward other hunters. On WMA lands, drivers participating in man drives are prohibited from carrying or using weapons.

4.4 Deer either-sex days for still gun hunts on WMAs are as follows:

(a) Game Zone 1: The last three Sat. in Nov.

(b) Game Zones 2 – 4: The first three Saturdays in Oct., the last three Saturdays in November, the Saturday after Christmas, and Jan. 1.

(c) In all Game Zones, hunters using archery equipment may take either-sex during all archery only and primitive weapon seasons for deer without being required to tag the animal. Game Zone WMA limits apply.

(d) On special mobility impaired and youth deer hunts sanctioned by the Department and during the statewide youth deer hunt day, participants may take two deer total, to include no more than one antlerless deer.

4.5 For all WMAs combined statewide, the limit for all seasons and methods combined is two deer per day, 5 deer total, no more than two bucks, unless otherwise specified. Antlerless deer limit is one deer per day, unless otherwise specified. Buck only, except either-sex on Game Zone either-sex days. 4.6 Individual antlerless deer tags are valid in Game Zones 1 & 2 beginning Oct. 1 and in Game Zones 3 & 4 beginning Sept. 15. For all WMAs combined, a maximum of 2 individual antlerless deer tags may be used during primitive weapons or still gun deer seasons in all Game Zones except only one individual antlerless deer tag may be used in Game Zone 1. Tags do not alter the daily (1 per day) or seasonal limit or change the type of weapons that can be used during special weapons seasons.

4.7 Except on either-sex days, antlerless deer must be tagged immediately after harvest and before being moved from the point of kill and the tag must be validated as prescribed by the SCDNR.

4.8 For WMAs designated as Quality Deer Management Areas, all antlered bucks must have a minimum 4 points on one side or a minimum 12-inch antler spread except during designated special youth hunts. Antler spread is the greatest outside measurement (main beam or points) on a plane perpendicular to the skull.

4.9 On WMA lands, deer, hogs, or bear may not be hunted with a firearm within 300 yards of a residence.

DOGS

5.1 On all WMA lands, dogs may be used for small game hunting unless otherwise specified.

5.2 Dogs may be trained for quail, rabbit and squirrel hunting from Sept. 1 - 14 (no guns).

5.3 On WMA lands, dogs may be used for hunting foxes, raccoons, bobcats or opossums only between thirty (30) minutes after official sunset and 30 minutes before official sunrise.

5.4 Unless otherwise specified, deer hunting with dogs on WMA lands is prohibited. The Department may permit deer hunting with dogs on WMA lands not located in Game Zones 1 and 2. For the purposes of tracking a wounded deer, a hunter may use one dog which is kept on a leash.

5.5 Dogs may be used to hunt bear on WMA lands in Game Zone 1 during the special party dog bear season.

5.6 On WMA lands, dogs may be used to hunt hogs only during special designated hog hunts with dogs.

VEHICLES

6.1 On all WMA lands, no hunter may shoot from a vehicle unless permitted by the Department.

6.2 On WMA lands, motor driven land conveyances must be operated only on designated roads or trails. Unless otherwise specified, roads or trails which are closed by barricades and/or signs, either permanently or temporarily, are off limits to motor-driven land conveyances.

6.3 A person may not obstruct or cause to be obstructed travel routes on WMA lands.

VISIBLE COLOR CLOTHING

7.1 On all WMA lands during any gun and muzzleloader hunting seasons for deer, bear and hogs, all hunters including small game hunters must wear either a hat, coat, or vest of solid visible international orange, except hunters for dove, turkey, ducks, geese and other hunted migratory birds including crows are exempt from this requirement while hunting for those species.

CAMPING

8.1 Camping is not permitted on WMA lands except in designated camp sites.

TRAPPING

9.1 Trapping on WMA lands is not permitted.

WATERFOWL & DOVE REGULATIONS

10.1 Unless specially designated by the Department as a Wildlife Management Area for Waterfowl or a Wildlife Management Area for Dove, all Wildlife Management Areas are open during the regular season for hunting and taking of migratory birds except where restricted.

10.2 The Department may designate sections of Wildlife Management Areas and other lands and waters under the control of the Department as Designated Waterfowl Management Areas or Designated Dove Management Areas. All laws and regulations governing Wildlife Management Areas apply to these special areas. In addition, the Department may set special shooting hours, bag limits, and methods of hunting and taking waterfowl and doves on those areas. All State and Federal migratory bird laws and regulations apply. Regulations pertaining to the use of Dove Management Areas will be filed annually.

10.3 On areas where blinds are not provided, only portable blinds which are removed at the conclusion of the hunt or temporary blinds of native vegetation may be used. Temporary blinds once vacated may be used by other hunters.

10.4 On Designated Waterfowl Areas, no species other than waterfowl may be taken during waterfowl hunts. On Designated Dove Management Areas no species other than doves may be taken during dove hunts. Only dove hunting is allowed at Lake Wallace.

10.5 No fishing is permitted in any Category I Designated Waterfowl Area during scheduled waterfowl hunts.

10.6 The Bordeaux Work Center Area is closed to hunting except for special hunts as designated by the SCDNR.

10.7 Sandy Beach Waterfowl Area and the impoundments on Bonneau Ferry WMA are closed to public access from Nov. 1 - Mar. 1, except for special hunts designated by the Department.

10.8 Broad River Waterfowl Management Area is closed to public access during the period Nov. 1 - Feb. 8 except for special hunts designated by the Department.

10.9 Impoundments on Bear Island, Donnelley, Samworth, Santee Coastal Reserve and Santee Delta WMAs are closed to all public access during the period Nov. 1 - Feb. 8 except during special hunts designated by the Department. All public access during the period Feb. 9 - Oct. 31 is limited to designated areas. On Bear Island

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WMA, Mathews' Canal is closed to all hunting from Nov. 1 – Feb. 15 beyond a point 0.8 mile from the confluence of Mathews' Canal with the South Edisto River.

10.10 Potato Creek Hatchery Waterfowl Area is closed to hunting access and fishing during the period one week prior to and two weeks after the Federal waterfowl season except for scheduled waterfowl hunts. All hunters must enter and leave the Potato Creek Hatchery Waterfowl Area through the designated public landing on secondary road 260 and complete a data card and deposit card in receptacle prior to leaving the area. No airboats are allowed for hunting or fishing and no hunting from secondary road 260.

10.11 On Hatchery WMA, hunters must leave the area by 1 PM, except on the last Saturday of the waterfowl season when hunters may hunt until sunset. Each hunter is limited to twenty-five Federally-approved nontoxic shot shells per hunt. No airboats are allowed in the Hatchery WMA for hunting or fishing during the period Nov. 15 - Jan. 31. No fishing allowed during scheduled waterfowl hunts.

10.12 On Crackerneck WMA, waterfowl may be hunted only on Fri., Sat. and Thanksgiving Day within the regular migratory bird seasons and no hunting on Dec. 25; Fant's Grove WMA is open AM only on Wednesdays and Saturdays during the regular migratory bird seasons; Palachuola WMA, Tillman Sand Ridge WMA, Hamilton Ridge WMA and Webb WMA are open AM only for waterfowl hunting during the regular migratory bird seasons only on days when small game hunting is allowed.

10.13 Category I Designated Waterfowl Areas include Beaverdam, Bonneau Ferry, Broad River, Clemson, Sandy Beach, Samworth, Santee Coastal Reserve, Santee-Delta, Tibwin, Bear Island, Wateree River Heritage Preserve and Donnelley Wildlife Management Areas. Hunting in Category I Designated Waterfowl Areas is by special permit obtained through annual computer drawing.

10.14 Category II Designated Waterfowl Areas include Biedler Impoundment, Carr Creek (bounded by Samworth WMA), Little Carr Creek (bounded by Samworth WMA), Lake Cunningham, Russell Creek, Monticello Reservoir, Parr Reservoir, Duncan Creek, Dunaway, Dungannon, Enoree River, Moultrie, Hatchery, Hickory Top, Hickory Top Greentree Reservoir, Lancaster Reservoir, Turtle Island, Little Pee Dee River Complex (including Ervin Dargan, Horace Tilghman), Great Pee Dee River, Potato Creek Hatchery, Sampson Island Unit (Bear Island), Tyger River, Marsh, Wee Tee, Woodbury, Ditch Pond, Waccamaw River Heritage Preserve, Santee Cooper and 40 Acre Rock Waterfowl Management Areas. Hunting on Category II Designated Waterfowl Areas is in accordance with scheduled dates and times.

1. Biedler Impoundment
 - (a) Sat. AM only during regular season
 - (b) State bag limits
2. Bear Island
 - (a) Hunters selected by drawing during regular season
 - (b) State bag limits
3. Beaverdam
 - (a) Hunters selected by drawing during regular season
 - (b) State bag limits
4. Bonneau Ferry
 - (a) Hunters selected by drawing during regular season
 - (b) State bag limits
5. Broad River
 - (a) Hunters selected by drawing during regular season
 - (b) State bag limits
- 6 Carr Creek (bounded by Samworth WMA, no hunting in impoundments)
 - (a) Wed. and Sat. AM only during regular season
 - (b) State bag limits
7. Little Carr Creek (bounded by Samworth WMA, no hunting in impoundments)
 - (a) Wed. and Sat. AM only during regular season
 - (b) State bag limits
8. Clemson
 - (a) Hunters selected by drawing during regular season
 - (b) State bag limits

9. Ditch Pond
 - (a) Wed. AM only during regular season
 - (b) State bag limits
10. Donnelley
 - (a) Hunters selected by drawing during regular season
 - (b) State bag limits
11. Dunaway
 - (a) Sat. AM only during regular season
 - (b) State bag limits
12. Duncan Creek
 - (a) Sat. AM only during regular season
 - (b) State bag limits
13. Dungannon
 - (a) Wed. AM only during regular season
 - (b) State bag limits
 - (c) No hunting from the Boardwalk
14. Enoree River
 - (a) Sat. AM only during regular season
 - (b) State bag limits
15. Hatchery
 - (a) Sat. AM only and until sunset on the last Sat. of the regular waterfowl season
 - (b) State bag limits
16. Hickory Top
 - (a) Mon. through Sat. during regular season
 - (b) State bag limits
17. Hickory Top Greentree Reservoir
 - (a) Sat. AM only during regular season
 - (b) State bag limits
 - (c) No hunting from roads and dikes
18. Lake Cunningham
 - (a) Wed. AM only during the regular season
 - (b) State bag limits
19. Lancaster Reservoir
 - (a) Mon. and Fri. AM only during the regular season
 - (b) State bag limits
20. Marsh
 - (a) Wed. and Sat. AM only during regular season
 - (b) State bag limits
21. Monticello Reservoir
 - (a) Wed. and Sat. AM only during regular season
 - (b) State bag limits
22. Moultrie
 - (a) Mon. through Sat. during regular season.
 - (b) State bag limits
23. Parr Reservoir
 - (a) Mon. through Sat. during regular season.
 - (b) State bag limits
24. Potato Creek Hatchery
 - (a) Wed. and Sat. only during regular season
 - (b) State bag limits
25. Russell Creek
 - (a) Wed. and Sat. AM only during regular season
 - (b) State bag limits

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26. Sampson Island Unit (Bear Island)
 - (a) Thurs. and Sat. AM only during the regular season
 - (b) State bag limits
27. Samworth
 - (a) Hunters selected by drawing during regular season
 - (b) State bag limits
28. Sandy Beach
 - (a) Hunters selected by drawing during regular season
 - (b) State bag limits
29. Santee Coastal Reserve
 - (a) Hunters selected by drawing during regular season
 - (b) State bag limits
30. Santee Cooper
 - (a) Sat. AM only during regular season
 - (b) State bag limits
31. Santee-Delta
 - (a) Hunters selected by drawing during regular season
 - (b) State bag limits
32. Tibwin
 - (a) Special hunts by drawing during regular season
 - (b) State bag limits
33. Turtle Island
 - (a) Wed. and Sat. AM only during regular season
 - (b) State bag limits
34. Tyger River
 - (a) Sat. AM only during regular season
 - (b) State bag limits
35. Wee Tee
 - (a) Wed. and Sat. AM only during regular season
 - (b) State bag limits
36. Woodbury
 - (a) Wed. and Sat. AM only during regular season
 - (b) State bag limits
37. Great Pee Dee
 - (a) Wed. AM only during regular season
 - (b) State bag limits
38. Little Pee Dee River Complex
 - (a) Wed. AM only during regular season
 - (b) State bag limits
39. Waccamaw River HP
 - (a) Wed. and Sat. AM only during regular season
 - (b) State bag limits
40. 40-acre Rock
 - (a) Sat. AM only during regular season
 - (b) State bag limits
41. Wateree River HP
 - (a) Hunters selected by drawing during regular season
 - (b) State bag limits

10.15 On Hickory Top WMA public waterfowl hunting without a Wildlife Management Area (WMA) permit is allowed on all land and water below 76.8'. Waterfowl hunting at or above elevation 76.8' requires a WMA permit. A WMA permit is required for waterfowl hunting in the Hickory Top Greentree Reservoir.

10.16 Designated Dove Management Areas include all dove management areas as published by the Department in the annual listing of WMA public dove fields and are subject to regulations filed annually.

10.17 Hickory Top Greentree Reservoir is closed to hunting access November 1 until March 1, except for special hunts designated by SCDNR. All hunters must accurately complete a data card and deposit card in receptacle prior to leaving the area. Hunting hours are from 30 minutes before legal sunrise until 11:00 am. Hunters may not enter the area prior to 5:00 am on hunt days. No open season on roads and dikes. Hunters may only use electric motors on boats.

10.18 On all State-owned, US Forest Service and other Federally-owned Category I and II Waterfowl Management Areas each hunter is limited to 25 Federally-approved non-toxic shells per hunt.

10.19 On Enoree River, Dunaway, Duncan Creek, Russell Creek and Tyger River Waterfowl Areas data cards are required for hunter access during scheduled waterfowl hunts. Completed data cards must be returned daily upon leaving each of these areas.

10.20 Woodbury Waterfowl Management Area includes all SCDNR-owned property south of US Hwy 378 and bounded on the west by the Great Pee Dee River and Bluff Road and to the east by the Little Pee Dee River except no waterfowl hunting allowed in the area known as Hass Pond that is bounded on all sides by Hass Pond Road.

AMPHIBIANS AND REPTILES

11.1 Taking of any amphibian or reptile, except the bullfrog, is prohibited on any Department-owned Wildlife Management Areas without written permission of the Department.

SUBARTICLE 2

CROW HUNTING SEASON

123-50. Crow Hunting Season.

The following rules and regulations shall hereby be provided for the hunting of crows in this State.

1. Crows shall not be hunted from aircraft.
2. The hunting season in this State shall extend from Nov. 1 until Mar. 1 of each year.
3. The penalty for the violation of these rules and regulations is that prescribed by 50-11-10 of the 1976 Code.
4. Crow hunting on WMAs is allowed during the small game season for each WMA. No hunting before Nov. 1 or after Mar. 1.

SUBARTICLE 3

OTHER BIG GAME

123-51. Turkey Hunting Rules and Seasons.

1. Total limit of 3 turkeys statewide per person, 2 per day, gobblers only, unless otherwise specified. Total statewide limit includes turkeys harvested on Wildlife Management Areas (WMAs). Small unnamed WMAs in counties indicated are open for turkey hunting. Turkey seasons and bag limits for Wildlife Management Area lands are as follows:

A. Game Zone 1

1. Other WMAs
 - (a) Apr. 1 – May 5
 - (b) Bag limit 3

B. Game Zone 2

1. Other WMAs

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- (a) Apr. 1 – May 5
- (b) Bag limit 3
- 2. Keowee WMA
 - (a) Apr. 1 – May 5
 - (b) Bag limit 2
 - (c) Shotguns only –north of Hwy 123 and west of the Keowee Arm of Lake Hartwell and west of Hwy 291. Archery only on other sections.
- 3. Draper WMA
 - (a) Apr. 1 – May 5
 - (b) Bag limit 2
 - (c) Thurs through Sat. only
- 4. Belfast WMA
 - (a) Apr. 1 – May 5
 - (b) Bag limit 1
 - (c) Hunters by drawing only
- 5. Worth Mountain WMA
 - (a) Apr. 1 – May 5
 - (b) Bag limit 2
 - (c) Thurs through Sat. only
- 6. McCalla WMA
 - (a) April 1 – May 5
 - (b) Bag Limit 2
- 7. Fants Grove WMA
 - (a) April 1 - May 5
 - (b) Bag Limit 2
- 8. Liberty Hill WMA
 - (a) April 1 - May 5
 - (b) Bag Limit 2
- 9. Delta South WMA
 - (a) Apr. 1 – May 5
 - (b) Hunters by drawing only

C. Game Zone 3

- 1. Other WMAs
 - (a) Apr. 1 – May 5
 - (b) Bag limit 2
- 2. Crackerneck WMA
 - (a) Apr. 1 – May 5
 - (b) Bag limit 3
 - (c) Fri. and Sat. only
 - (d) Sign in and out at the gate required.
 - (e) Main gate opens at 4:30 am and closes at 1:00 pm.
- 3. Aiken Gopher Tortoise HP WMA
 - (a) Apr. 1 – May 5
 - (b) Bag limit 2
- 4. Francis Marion National Forest
 - (a) Apr. 1 – May 5
 - (b) Bag limit 2
 - (c) Tibwin Special Use Area
 - (1) Apr. 1 – May 5
 - (2) Bag limit 2
 - (3) Special hunts for youth or mobility impaired hunters as published by SCDNR.
- 5. Moultrie

- (a) Apr. 1 – May 5
- (b) Bag limit 2
- (c) Thurs through Sat. only
- (d) Bluefield WMA
 - (1) Apr. 1 – May 5
 - (2) Bag limit 2
 - (3) Adult/Youth only
- (e) Hall WMA
 - (1) Apr. 1 – May 5
 - (2) Bag limit 2
- 6. Santee Cooper WMA
 - (a) Apr. 1 – May 5
 - (b) Bag limit 1
 - (c) Hunting by public draw only
- 7. Webb, Palachucola and Hamilton Ridge WMAs
 - (a) Apr. 1 – May 5
 - (b) Bag limit 2
 - (c) All hunters must pick up and return data cards at kiosk and display hangtags on vehicles.
- 8. Donnelley WMA
 - (a) Apr. 1 – May 5
 - (b) Bag limit 1
 - (c) Hunting by public draw only
- 9. Bonneau Ferry WMA
 - (a) Apr. 1 – May 5
 - (b) Bag limit 1
 - (c) Hunting by public draw only
 - (d) Closed to public access during hunts.
- 10. Santee Coastal Reserve WMA
 - (a) Apr. 1 – May 5
 - (b) Bag limit 1
 - (c) Youth or mobility impaired hunting by draw only.
- 11. Edisto River WMA
 - (a) Apr. 1 – May 5
 - (b) Bag limit 2
 - (c) Thurs through Sat. only
- 12. Tillman Sand Ridge Heritage Preserve WMA
 - (a) Apr. 1 – May 5
 - (b) Bag limit 2
 - (c) Thurs through Sat. only
- 13. Victoria Bluff Heritage Preserve WMA
 - (a) Apr. 1 – May 5
 - (b) Bag limit 2
 - (c) Thurs through Sat. only
- 14. Botany Bay Plantation WMA
 - (a) Apr. 1 – May 5
 - (b) Bag limit 1
 - (c) Youth hunting by draw only.
- 15. Wateree River HP WMA
 - (a) Apr. 1 – May 5
 - (b) Bag limit 1
 - (c) Hunting by public draw only

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D. Game Zone 4

1. Other WMAs
 - (a) Apr. 1 – May 5
 - (b) Bag limit 3
2. Marsh WMA
 - (a) Apr. 1 – May 5
 - (b) Bag limit 2
 - (c) Thurs through Sat. only
 - (d) Sign in and out at the kiosk required.
3. Sand Hills State Forest WMA
 - (a) Apr. 1 – May 5
 - (b) Bag limit 2
4. McBee WMA
 - (a) Apr. 1 – May 5
 - (b) Bag limit 2
 - (c) Thurs through Sat. only
5. Little Pee Dee Complex WMA
 - (a) Apr. 1 – May 5
 - (b) Bag limit 2
 - (c) Thurs through Sat. only
6. Pee Dee Station Site WMA
 - (a) Apr. 1 – May 5
 - (b) Bag limit 2
 - (c) Thurs through Sat. only
 - (d) All hunters must sign in and sign out at kiosk.
7. Woodbury WMA
 - (a) Apr. 1 – May 5
 - (b) Bag limit 2
 - (c) Thurs through Sat. only
 - (d) All hunters must sign in and sign out at kiosk.
8. Great Pee Dee Heritage Preserve WMA
 - (a) Apr. 1 – May 5
 - (b) Bag limit 2
 - (c) Thurs through Sat. only
 - (d) All hunters must sign in and sign out at kiosk.
9. Longleaf Pine Heritage Preserve WMA
 - (a) Apr. 1 – May 5
 - (b) Bag limit 2
 - (c) Thurs through Sat. only
10. Manchester State Forest WMA
 - (a) Apr. 1 – May 5
 - (b) Bag limit 2
 - (c) Thurs through Sat. only
11. Hickory Top WMA
 - (a) Apr. 1 – May 5
 - (b) Bag limit 2
12. Oak Lea WMA
 - (a) Apr. 1 – May 5
 - (b) Bag limit 2
 - (c) Thurs through Sat.
13. Santee Dam WMA
 - (a) Apr. 1 – May 5
 - (b) Bag limit 2

14. Wee Tee WMA
 - (a) Apr. 1 – May 5
 - (b) Bag limit 2
 - (c) Thurs through Sat. only
15. Cartwheel Bay Heritage Preserve WMA
 - (a) Apr. 1 – May 5
 - (b) Bag limit 2
 - (c) Thurs through Sat. only
16. Lewis Ocean Bay Heritage Preserve WMA
 - (a) Apr. 1 – May 5
 - (b) Bag limit 2
 - (c) Thurs through Sat. only
17. Waccamaw River Heritage Preserve WMA
 - (a) Apr. 1 – May 5
 - (b) Bag limit 2
 - (c) Thurs through Sat. only
18. Samworth WMA
 - (a) Apr. 1 – May 5
 - (b) Bag limit 1
 - (c) Youth hunting by draw only.
19. Liberty Hill WMA
 - (a) April 1 - May 5
 - (b) Bag Limit 2

E. Statewide Youth Hunting Day on WMAs

1. Sat. before April 1
 - (a) Bag limit 2
 - (b) Youth Only
 - (c) Only Includes WMAs designated by the Department.
2. The following regulations apply statewide. No turkey hunting permitted on Turkey Restoration Sites which have not been formally opened by the Department.
 - (a) During the spring turkey hunting season, only turkey gobblers (male birds) may be taken.
 - (b) Shotguns, muzzleloader shotguns, or archery equipment are permitted. All other weapons and methods of taking are prohibited including rifles, pistols, buckshot and slugs.
 - (c) Turkeys may not be hunted with dogs.
 - (d) Live decoys are prohibited.
 - (e) A tag issued by the Department must be placed around a harvested bird's leg before the bird is moved from the point of kill and the tag must be validated by the hunter as prescribed by the SCDNR.

123-52. Either-sex Days and Antlerless Deer Limits for Private Lands in Game Zones 1-4.

1. Game Zone 1: The last three Saturdays in Nov.
2. Game Zones 2 – 4: The first three Saturdays in Oct.; the last three Saturdays in Nov.; the last Saturday in Dec; Jan. 1.
3. The daily bag limit on either-sex days is 1 antlerless deer.
4. On special mobility impaired and youth deer hunts sanctioned by the Department and during the statewide youth deer hunt day, participants may take antlerless deer, 1 per day.
5. Hunters using archery equipment may take either-sex during all archery-only and primitive weapons seasons for deer beginning September 15 without being required to tag the animal.
6. Individual Deer Tags: Only 1 Individual Antlerless Deer Tag may be used in Game Zone 1. Tags are valid in Game Zones 3 – 4 beginning Sept. 15 and in Game Zones 1 & 2 beginning Oct. 1. Individual tags are not valid on properties enrolled in the Antlerless Deer Quota Program. Tags do not alter the daily (1 per day) or seasonal limit or change the type of weapons that can be used during special weapons seasons.

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7. Antlerless Deer Limits: Game Zone 1 - Primitive Weapons Season 1 per day, 2 total (muzzleloader is buck only except with individual antlerless deer tag). Gun Season - 1 per day, 5 total for all methods combined (Gun Season is buck only except on either-sex days or with individual antlerless tags). Game Zone 2 - Archery Only Season 1 per day, 2 total. Primitive Weapons Season 1 per day, 2 total (muzzleloader is buck only except on either-sex day or with individual antlerless tags). Gun Season 1 per day, 5 total all methods combined (firearms are buck only except on either-sex days or with individual antlerless tags). Game Zones 3 - 4, 1 per day on either-sex days or with individual antlerless tags. Game Zone season and daily limits do not apply on properties enrolled in the Antlerless Deer Quota Program.

8. Except on either-sex days, antlerless deer must be tagged immediately after harvest and before being moved from the point of kill and the tag must be validated as prescribed by the SCDNR.

123-53 Bear Hunting Rules and Seasons

1. The open season for taking bear by special draw hunt in Georgetown County, Horry County and Williamsburg County on private and WMA land is October 24 – November 5.

2. Legal weapons include archery equipment, muzzleloaders (.36 caliber or greater), centerfire rifles, centerfire handguns and shotguns with slugs or buckshot.

3. The permit issued by the Department must be displayed in a visible location on the dash of the vehicle while the person is actively bear hunting.

4. Harvested bear must be reported to SCDNR by telephone within 12 hours of the kill.

5. All harvested bears must be tagged immediately after harvest and before being moved from the point of kill and the tag must be validated as prescribed by the SCDNR.

6. All persons drawn for the hunt must submit a harvest report and return unused tags to the Department no later than 7 days after the close of the season, regardless of whether or not a bear was harvested.

Fiscal Impact Statement:

The amendment of Regulations 123-40, 123-51, and 123-52 will result in increased public hunting opportunities which should generate additional State revenue through license sales. In addition, the local economy should benefit from sales of hunting supplies, food and overnight accommodations. Sales taxes on these items will also directly benefit government.

Statement of Rationale:

Rationale for the formulation of these regulations is based on over 60 years of experience by SCDNR in establishing public hunting areas. New areas are evaluated on location, size, current wildlife presence, access and recreation use potential. Contractual agreements with the landowners provide guidelines for the use and management of the property. Wildlife Management Area agreements are on file with the Wildlife Management Section of the Department of Natural Resources, Room 267, Dennis Building, 1000 Assembly Street, Columbia.

Document No. 4454
PUBLIC SERVICE COMMISSION
CHAPTER 103
Statutory Authority: 1976 Code Section 58-3-140

103-811. Commissioners.

Synopsis:

At present, there are seven Congressional Districts in South Carolina. Regulation 103-811 currently references seven commissioners, one from each of six Congressional Districts and one at-large. However, at present, the Commission is a seven-member quasi-judicial body with a member from one of each of the seven Congressional Districts. S.C. Code Ann. Section 58-3-20 states, in part, that when there are seven Congressional Districts, a member representing the Seventh Congressional District must be elected. The current version of Regulation 103-811 must be repealed due to the amendment of S.C. Code Ann. Section 58-3-20.

The Notice of Drafting regarding this regulation was published on November 22, 2013, in the *State Register*.

Instructions:

Repeal Regulation 103-811.

Text:

103-811. Repealed.

Fiscal Impact Statement:

There will be no increased costs to the State or its political subdivisions.

Statement of Rationale:

The substance of Regulation 103-811 currently contains language that is inconsistent with the amended portions of S.C. Code Ann. Section 58-3-20. The rationale for repealing Regulation 103-811 is that S.C. Code Ann. Section 58-3-20 governs the election of Public Service Commission commissioners. There was no scientific or technical basis relied upon in the development of Regulation 103-811.

Document No. 4455
PUBLIC SERVICE COMMISSION
CHAPTER 103
Statutory Authority: 1976 Code Section 58-3-140

103-817. Proceedings.

Synopsis:

Recently, the General Assembly of South Carolina amended S.C. Code Ann. Section 58-3-250 to allow the Public Service Commission to serve every final order or decision of the Commission by electronic service, registered or certified mail. The Commission routinely issues Prefile Testimony Letters, Transmittal Letters, Notices of Filing, Notices of Filing and Hearing, and Notices of Hearing by regular or certified mail to the parties and other interested persons in a case. As S.C. Code Ann. Section 58-3-250 allows the Commission to serve its Orders by electronic service, registered or certified mail, the Commission seeks to amend Regulation 103-817

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to allow the Commission to forward to parties and interested persons its Prefile Testimony Letters, Transmittal Letters, Notices of Filing, Notices of Filing and Hearing, and Notices of Hearing by electronic service or by U.S. Mail, including certified mail.

The Notice of Drafting regarding this regulation was published on November 22, 2013, in the *State Register*.

Instructions:

Print Regulation 103-817 as shown below.

Text:

103-817. Proceedings.

A. Nature of Proceedings. If required by law and upon filing of a pleading as set forth in R.103-819, et. seq., proceedings for the purpose of rulemaking, ratemaking, licensing, determining rights, duties, or privileges of any party, and undertaking an official inquiry for the purposes of gathering information or making determinations, which fall under the jurisdiction of the Commission, shall be conducted by one or more Commissioners, or by a hearing examiner through the development of a formal record.

B. Initiation of Proceedings.

(1) All proceedings shall be initiated by filing with the Chief Clerk at the business offices at the Commission an original and copies, as determined by the Commission, of an appropriate pleading unless otherwise provided, as designated in R.103-819, et seq.

(2) The Chief Clerk may refuse to accept for filing any pleading which does not conform to the rules of the Commission, and shall mail written notice to the party or the authorized representative within ten days after receipt, stating why it has not been accepted for filing.

C. Conduct of Proceedings.

(1) All pleadings initiating proceedings shall be dated upon receipt and shall be assigned a docket number after filing, and all subsequent pleadings or correspondence shall refer to that docket number. Pleadings will be captioned in accordance with R.103-819, et seq., and shall be processed pursuant to these rules.

(2) The Chief Clerk after filing of the pleadings shall give the Commission notice of such filing at the next regular meeting of the Commission. Where provided by law, any proceeding initiated under these rules may be disposed of without hearing by Order of the Commission within 14 days after the pleading has been accepted for filing, upon the written opinion of the Commission that the pleading on its face shows that a hearing is not necessary, in the public interest, or for the protection of substantial rights.

(3) After any pleading has been accepted for filing, the Chief Clerk may:

(a) Serve the pleadings, as required, in accordance with R.103-830, or within fourteen (14) days, provide the party filing the pleading a Notice of Filing, and, where required by law, the party at its own expense shall publish such notice one time in newspapers having general circulation in the State, or, if applicable, in newspapers having general circulation in the party's service area. Except for good cause shown, proof of publication must be filed on or before the return date. The Chief Clerk, pursuant to other rules of the Commission, may require that the Notice of Filing be mailed to customers and other persons and a certificate of mailing be filed on or before the return date.

(b) Fix a date for hearing, as soon as practicable, and when a date is available on the docket calendar. If the hearing date has not been included in the Notice of Filing, the Chief Clerk shall prepare a Notice of Hearing, and shall forward such Notice of Hearing to all parties. Proof of mailing must be placed in the formal record.

(c) Assign a time and place for any public hearing necessary in the conduct of any proceeding. The Chief Clerk shall likewise cause the pleadings to be served pursuant to these rules or issue written notice of the filing of pleadings which shall be published pursuant to law, and notice of the hearing date assigned for the conduct of any formal proceeding, as provided by law.

(d) The Chief Clerk shall forward a copy of a Notice of Filing, a Prefile Testimony Letter, or a Transmittal Letter to all parties by electronic service or by U.S. Mail. The Chief Clerk shall forward a Notice of Filing and

Hearing, a Notice of Hearing or any other document containing a hearing date to all parties by electronic service or by certified mail.

(e) Require from a person filing a pleading a letter incorporating a statement presenting the number of witnesses the person expects to offer in the proceeding and an estimate of the time required for the presentation of testimony and exhibits.

(4) Public hearings in the conduct of proceedings shall be held pursuant to R.103-836, et seq.

D. Final Disposition of Proceedings. Proceedings shall be concluded upon the issuance of an order by the Commission or upon a settlement or agreement reached by all parties to the proceedings and formally acknowledged by the Commission by issuance of an order.

Fiscal Impact Statement:

The Commission anticipates incurring some costs to configure its Docket Management System to electronically serve the documents referenced in the proposed Regulation 103-817; however, the Agency expects postage and other related costs to decrease when the proposed amendments are implemented.

Statement of Rationale:

The purpose for the proposed amendments to Regulation 103-817 is to recommend certain minor grammatical changes and to modify this Regulation to allow the Commission to serve certain procedural documents by electronic service and U.S. Mail. The proposed amendments promote an improved and more efficient process to serve parties with important Commission documents. There was no scientific or technical basis relied upon in the development of this regulation.