

6-008 Licensing Standards for Child Caring Agencies: Each applicant for a child caring agency license shall meet these licensing standards and the requirements in 474 NAC 6-005 to obtain a license. A license issued before these regulations became effective is valid until the time of license renewal.

6-008.01 Administration

6-008.01A Incorporation: Any agency engaging in child-caring activities in Nebraska shall:

1. Incorporate as required by Nebraska state statutes. The purpose for which the agency is incorporated must be stated in its articles of incorporation; and
2. Develop a written statement of its functions, policies, and programs and provide it to the Department's licensing unit for approval.

6-008.01B Governing Board: The Child Caring Agency shall have a governing board (Board of Directors) which conforms to Nebraska laws concerning boards of incorporated bodies. The board shall:

1. Be representative of the agency's constituency;
2. Meet at least once a year and as often as necessary for the agency to function properly. Official minutes of board meetings must be kept permanently;
3. Employ an executive who:
 - a. Assumes responsibility for carrying out policies set by the board on a day to day basis;
 - b. Does not serve as a voting member of the board; and
 - c. Has the authority to hire and discharge employees directly responsible to the executive; and
4. Ensure that all local, state, and federal laws and administrative rules and regulations are followed by the agency.

6-008.01C Finances: The agency shall:

1. Have a sound financial program enabling it to carry out the functions shown in its articles of incorporation;
2. Operate on a budget approved by the governing board before the beginning of each fiscal year; and
3. Have all of its financial accounts reviewed by a certified accountant at least once a year.

6-008.01D Administrative Records and Reports: The agency shall maintain current, accurate records and include the location of each child in care.

The executive shall:

1. Compile and file with the governing board, a monthly report of the agency's activities and current financial situation;
2. Supply information and special reports requested by the Department; and
3. Inform the Department of any plans for major changes in services or facilities.

6-008.02 Personnel: The agency shall:

1. Have a written statement of policies which is approved and reviewed annually by the governing board and made available to all employees;
2. Maintain a file of job descriptions and qualifications for each full-time and each part-time position on the staff, including each volunteer position;
3. Maintain a personnel file for each full-time or part-time employee including an evaluation of staff performance and any information regarding disciplinary action. The file must be kept at the facility the employee is assigned, except when the facility and the administration office are located in the same city;
4. Maintain a file on each volunteer; and
5. Check the background of all employees and volunteers who have access to youth before participation with the agency. The background check shall include contacting the HHS Central Register of Abuse and Neglect, the HHS Adult Protective Services Central Registry, and the State Patrol Central Registry of Sex Offenders.

6-008.02A Staff Qualifications: All staff members shall have good character, emotional stability, and sufficient ability and education to perform their assigned duties. The agency shall employ no individual who has been convicted of, admitted to, or if there is substantial evidence of crimes involving intentional bodily harm, crimes against children, or crimes involving moral turpitude if these circumstances have current bearing on the applicant's provision of care. Center Staff shall not engage in or have a history of behavior injurious to or which may endanger the health or morals of the children in care.

Staff who provide medical, dental, or nursing care shall meet the qualifications of the State Board of Examiners. Teachers shall hold Nebraska certificates. Child Caring Agency workers must have a high school diploma or its equivalent.

All staff working directly with children must pass a medical examination before employment and every two years thereafter.

6-008.02B Staff Ratio: The licensee shall ensure that at least one employed staff member is on duty for every six children in care. The licensee shall ensure that at least one employed staff member is on duty for every twelve children during the overnight hours. Overnight hours are from the time children are in bed until the time children awaken.

The agency shall:

1. Consider only the staff directly responsible for children when determining the ratio of staff members to children under care; and
2. Maintain sufficient staff to ensure that those caring for children do not become over fatigued; and
3. Assure that all children are supervised. The children in care will be assessed and the licensee will ensure an appropriate staff/child ratio.

6-008.02C Training: Each staff member, including volunteers, who provide direct care of children shall obtain -

1. Twenty-four clock hours of Department-approved pre-service training before assuming his or her duties. Staff who are employed before the effective date of this regulation are exempt from this requirement; and
2. At least 15 clock hours of Department-approved in-service training annually within the effective dates of the agency's license.

Volunteers who provide occasional services and/or are supervised at all times are exempt from this requirement.

Each training hour must be approved by the licensing specialist and must be directly related to the skills necessary to care for children in out-of-home placement.

6-008.02D Activities Counted as Training: Each hour spent participating in any of the following types of child care-related activities counts toward pre-service and yearly in-service requirements:

1. Department-sponsored training;
2. Workshops;
3. In-service training sponsored by professional organizations or educational institutions;
4. Department-approved reading materials;
5. College courses;
6. Non-credit course work;
7. Adult education courses;
8. Videotaped material;
9. Audio taped material;
10. Continuing education units (CEU's); and
11. Other Department-approved material.

Written documentation must be available for each of the listed types of training.

6-008.03 Facility: The agency shall ensure that the following requirements are met:

1. Two types of care must not be offered at the same time in the same facility if there is conflict with the best interest of the children, the use of staff, or the use of the facility.
2. Grounds must be clean, neat, hazard free, and planned to meet the recreational needs of the children.
3. In structure and maintenance, all buildings must meet state and local standards for fire protection, health, and sanitation.
4. Rooms must be provided to allow privacy for interviewing a child or parents and for a child to visit relatives or guests.
5. When a school is maintained on the grounds, the school buildings and equipment must meet the requirements of the Nebraska Department of Education.
6. Each cottage or building in which children live must have room for recreation, leisure time use, and study.
7. The kitchen(s) must have sufficient storage space and equipment for the efficient preparation of food; for storage of food and utensils; and for dish washing.

8. Sleeping rooms must:
 - a. Provide a pleasant restful atmosphere conducive to uninterrupted sleep and privacy;
 - b. Contain a separate bed and bedding for each child;
 - c. Contain at least 80 square feet of usable floor space for a private room and 60 square feet per individual if the room is shared by two or more children (shared bedrooms for emergency shelter care must contain at least 40 square feet per individual); and
 - d. Have ceilings at least seven feet six inches high.
9. Adequate living quarters must be provided for live-in staff, including bathing and toilet facilities separate from those used by the children.
10. In new construction, one lavatory, one toilet, and one tub or shower must be provided for every six children. Privacy must be provided.
11. The facility must meet all zoning requirements as verified by the body enforcing zoning codes.

6-008.04 Admissions: The agency shall follow these admissions practices:

1. Develop and have written admissions policies and procedures;
2. Determine and document who holds legal custody of the child at or before admission;
3. Obtain a written agreement for admission and care, signed by both the person placing the child and the staff person admitting the child. The agreement must include the parent's/guardian's permission for the child to be given medical or dental care and emergency-medical procedures;
4. Provide care only for children under the age of majority;
5. Assess staff capacities, the facility, and the community to determine what services it can offer to children. Acceptance of the placement of a child must be based on this assessment and not on the race, color, national origin, or handicap of the child; and
6. If the Interstate Compact applies, require approval for admission before admission.

6-008.05 Case Reviews: The agency shall review each child's care plan:

1. Within 30 days after the placement; and
2. At least quarterly, thereafter.

The review must be documented in the child's record.

6-008.06 Health and Safety Requirements: The agency shall ensure that:

1. Each child receives a complete medical and dental exam within 14 days of initial foster care placement and annually thereafter. If there is no record of a previous exam, one must be completed within 60 days of placement for a secondary foster care placement.
2. Each child has regular physical and dental exams (The recommended schedule is annual physical exams through age six and exams at one to two year intervals thereafter, depending on the child's health status. Annual dental exams are recommended for children three and older, earlier if a dental problem arises.);
3. Complete medical and dental records are maintained for each child and that the location of the child's medical history is noted in the child's program file;
4. It has access to routine medical care and emergency medical care on a 24 hour a day, 7 days a week basis; and
5. All reasonable precautions are taken to avoid accidents to residents and staff. This includes observing all safety rules in regard to swimming, transportation, and equipment.

6-008.06A Transportation Safety: The agency shall ensure that safety restraints are available and used for each child transported, in compliance with Neb. Rev. Stat. Sections 60-6,267, 60-6,268, and 71-1907.

Restraints are not required for children transported by public transportation or school bus.

6-008.06B Fire Safety: Each Child Caring Agency shall meet all fire regulations set by the State Fire Marshal's Office for operating and design of "child caring agency-institution."

6-008.07 Personal Hygiene: Agency staff shall provide instruction to children in care regarding routine health and hygiene practices such as bathing, and proper sleep and eating habits.

6-008.08 Food and Nutrition: The agency shall ensure that:

1. Each child is provided with a daily balanced diet containing all basic foods in amounts necessary for good health; and
2. Diets for children with special health problems are prescribed by a physician and carefully observed.

6-008.09 Clothing: The agency shall ensure that:

1. A record is kept of the clothing and personal articles a child brings to the institution at admission; and updated every time the child acquires new items or an item is lost or damaged. The inventory shall be signed each time a new inventory is developed by the foster parent, child, and guardian, if possible. All items will be returned at the time the placement terminates.
2. Each child has sufficient clothing.

6-008.10 Discipline, Seclusion Rooms, and Physical Restraint: Any private child caring agency to which these regulations apply that fails to comply with any of the below stated regulations, including a failure to provide appropriate training and certification, shall not be eligible for participation in any program supported in whole or in part by funds administered by the Department of Health and Human Services.

6-008.10A Definitions

Assessment means a face-to-face evaluation of the child's current and past (if available) physical, mental, emotional, and behavioral health.

Chemical restraint means a drug or medication used to control acute episodic behavior by significantly lowering the child's level of consciousness or awareness, or restricting the movement of the child. A drug or medication ordered by a physician as part of the individual treatment plan for treating the symptoms of mental, emotional, behavioral or psychiatric disorders is not a chemical restraint.

Crisis intervention model means a model that identifies specialized interventions to guide, redirect, modify, or manage behavior of children and youth. The intervention model includes an entire spectrum of activities from preventive and planned use of routines and environment, to less restrictive interventions such as positive reinforcement, verbal interventions and de-escalation techniques, to more restrictive interventions such as seclusion, physical escorts, and physical restraint.

Deceleration techniques means physical strategies or actions taken to decrease a volatile situation to prevent harming of self or others, as well as to prevent displays of inappropriate or maladaptive behavior.

De-escalation means verbal skills used to defuse a volatile situation by "talking down" the child and therefore assisting the child to regain behavioral control, and avoid physical intervention.

Discipline means to establish self-control through training or instruction.

Emergency means a situation that poses an imminent threat of serious physical injury to self or others as a result of the immediate behaviors of the child.

Incident debriefing means a structured interview with the child and staff to assess the circumstances that led to the incident for purposes of gaining understanding closure. The incident debriefing with the child and staff shall occur within 24 hours of the restrictive procedure.

Informed consent means the requirement that any decision to authorize an intervention is based on the understanding of the risks and benefits of intervention, and those possible alternatives are described to the decision-maker. (See 390 NAC 11-002.04E.)

Mechanical restraint means the use of devices as a means of restricting a child's freedom of movement. It does not include devices such as orthopedically prescribed devices.

Monitoring means to repeatedly check the condition of the child while in seclusion or restraint.

Multi-disciplinary team means a group of qualified individuals who share their knowledge and expertise to assist and support the child receiving services and to be involved in all phases of the child's care and in the child's discharge planning. The child receiving services and the child's legal guardians are members of the team.

Pain compliance technique means any intervention that intentionally causes pain to gain control of a child, such as the use of tasers, pressure point control, and chemical sprays.

Physical escort means a temporary touching or holding of the hand, wrist, arm, shoulder or back for the purpose of inducing an acting-out child to walk to a safe location.

Physical intervention means any physical technique used to stop a person's behavior that is deemed harmful to self or others.

Physical restraint means any mechanical device or manual technique that restricts the movement or function of the child's body or any portion thereof, such as a standing restraint.

Restraint means any physical intervention used to restrict or control the movement of a child receiving services. Devices used to provide support for the achievement of functional body position or proper balance, and devices used for specific medical and surgical treatment, are excluded.

Seclusion means a behavior control technique that places the child in any room against his or her will, where the child cannot voluntarily leave the room and isolating him/her from any personal contact.

Treatment Team – See Multi-Disciplinary Team

6.008.10B Discipline: Each agency shall develop written policies regarding discipline. Policies shall require that the behavioral conditions for removal of disciplinary restrictions be specified each time that restraint or seclusion is imposed and provide that the child is notified, in terms they understand, of the criteria to be met before restraint or seclusion can end.

Agency staff shall:

1. Use discipline only as a learning process in which certain specified consequences are the result of unacceptable behavior; and
2. Never use the following as discipline:
 - a. Physical punishment or abuse;
 - b. Denial of necessities;
 - c. Chemical or mechanical restraints; or
 - d. Derogatory remarks, abusive or profane language, yelling or screaming, coercion, or threats of physical punishment.

6-008.10C Seclusion Rooms: If a seclusion room is used, the agency shall develop written policies and procedures for its use. Seclusion shall only be imposed in emergency circumstances to ensure the immediate physical safety of the child, staff member or others and after less restrictive deceleration and de-escalation interventions have been determined to be ineffective. If the less restrictive interventions are ineffective in preventing seclusion, the child's treatment team shall be convened within 24-hours of the imposition of seclusion to develop alternative effective deceleration and de-escalation techniques. Any agency using seclusion rooms must obtain written authorization from the child's guardian giving informed consent related to its potential use. This authorization shall occur upon intake or within 72 hours thereafter.

An incident report containing the following information must be completed within 24 hours from the time the seclusion began and made available to all multi-disciplinary team members and Department staff. The incident report shall include the following information:

1. The name of the child placed in seclusion;
2. Description of less restrictive intervention techniques used and why they were ineffective;
3. The reason for the seclusion;
4. The date and times the seclusion began and ended;
5. The staff who assigned the child to seclusion;
6. The assessments and monitoring provided while the child was in seclusion and immediately after the child was removed from seclusion;
7. A statement of the behavioral conditions that the child was required to meet in order to be removed from seclusion;
8. A summary of the debriefing that was conducted;

9. The frequency and types of restraints or seclusion used, over time, for the individual;

10. Any medical care needed by the child and/or staff as a result of the use of restriction or seclusion;
11. Documentation of Internal Review; and
12. Any other actual or planned follow-up actions.

Prohibited seclusion practices include:

1. Use as a form of punishment or discipline;
2. Use by peers;
3. Use by untrained staff ;
4. Use for the convenience of staff; and
5. Use as a substitute for care and/or treatment.

The agency shall notify the appropriate state professional licensure authority whenever any staff member engages in prohibited seclusion practices.

6.008.10D Physical Restraint: Any agency using physical restraint, shall use a Department-approved crisis intervention model and comply with all applicable state and federal laws and regulations. The agency shall develop written policies and procedures for its use. Any agency using physical restraint must obtain written authorization from the child's guardian giving informed consent related to its potential use. This authorization shall occur upon intake or within 72 hours thereafter.

Physical restraint shall only be imposed in emergency circumstances and only to ensure the immediate physical safety of the child, staff member or others. Any person doing a physical restraint must have completed formal training on the crisis intervention model. Any restraint must be limited to the least amount of time necessary to address the situation and restore safety. Physical restraint shall be used after less restrictive deceleration and de-escalation interventions have been determined ineffective by agency staff trained in the agency's crisis intervention model. If the less restrictive interventions are ineffective, the child's treatment team shall be convened within 24 hours of the imposition of physical restraint to develop effective alternative deceleration and de-escalation techniques. Less restrictive deceleration interventions may include:

1. Observing for antecedent behaviors;
2. Redirection;
3. Maintenance of personal space;
4. Modulation of voice; and
5. Increasing the presence of support staff.

Prohibited physical restraint practices include:

1. Pain compliance techniques;
2. Use as a form of punishment or discipline;

3. Use by peers;
4. Use by untrained staff;
5. Use for the convenience of staff;

6. Chemical and mechanical restraints;
7. Hyperextension of any part of the body (pushing or pulling of any part of the body beyond normal limits);
8. Joint or skin torsion;
9. Pressure or intensity of pressure on any part of the body not authorized by the physical restraint model.
10. Any type of choke hold; and
11. Any maneuver that involves choking, punching, hitting, poking, pinching, scratching or shoving.

The agency shall notify the appropriate state professional licensure authority whenever any licensed staff member engages in prohibited physical restraint practices.

An incident report must be completed within 24 hours from the time the physical restraint begins and is maintained and made available to all multi-disciplinary team members and Department staff. The incident report must contain:

1. The name of the child being physically restrained;
2. A description of the incident, alternative interventions and reason(s) the restraint was required including a description of less restrictive interventions and why they were ineffective;
3. The date and times the restraint began and ended;
4. Type of restraint used;
5. Staff member(s) involved in the restraint;
6. The assessments and monitoring provided while the child was being physically restrained and immediately after the restraint was removed;
7. Preventive actions, incident debriefing and any follow-up;
8. Any injuries sustained by the child and/or staff member;
9. A statement of the behavioral conditions that the child was required to meet in order to be released from physical restraint;
10. A summary of debriefing that was conducted;
11. The frequency and types of restraints or seclusion over time for the individual;
12. Any medical care needed by the child and/or staff as a result of the use of restriction or seclusion;
13. Documentation of internal review; and
14. Any other actual or planned follow-up actions.

6-008.10E Training: All training must be comprehensive and competency based meeting all requirements of the crisis intervention model being implemented by the agency. Comprehensive based training in the use of physical restraint shall involve repeated and on-going skill development, conditioning learned responses, rehearsals and practices. Only certified trainers shall provide physical restraint training.

6-008.10E1 Crisis intervention trainers must have current trainer certification from the organization that developed the crisis intervention model selected by the agency. Staff shall regularly receive training and refresher courses in

alternative non-intrusive behavior modification techniques. If a facility or program allows the use of restraint or seclusion, staff shall also receive ongoing education and training in the safe and appropriate use of restraints or seclusion. A record of training shall be kept which includes the name of the person trained, date(s), source, content, and length of each course.

6-008.10E2 Any crisis intervention model chosen by the agency should have a strong emphasis on children and youth. The crisis intervention models with physical restraint components selected by the agency must include the following minimum components:

1. Skills to identify warning signs of crisis;
2. Verbal de-escalation skills;
3. Physical restraint skills that are non-pain compliant and ensure safety to all youth and staff;
4. Skills directed to the debriefing of staff and youth;
5. Incident documentation; and
6. Monitoring physical signs of distress.

Components of various models may not be combined for use as an agency's identified single model except required competency in first aid and CPR.

The agency shall maintain written documentation of certification and re-certification training for each staff person. The agency shall make documentation available to the multi-disciplinary team members and Department staff.

6-008.10F Internal Review: Any agency using seclusion and/or physical restraint shall have a performance improvement program designed to continuously investigate, analyze, monitor, assess, and track the agency's use of seclusion and restraint practices and to specifically address injuries or death related to the use of seclusion and restraints. The process shall include, at a minimum, the review of:

1. Training proficiency;
2. Environmental triggers;
3. Systems issues;
4. Each use of restraint or seclusion;
5. Notification of family and need for medical care;
6. Administrative and/or program policy and procedure;
7. Incident debriefing and follow up; and
8. Aggregate data.

6-008.11 Opportunity for Instruction: The agency shall encourage the use of the following opportunities that it must provide to the children in care:

1. Academic and vocational education. Each child must be provided with opportunities for education in accordance with Nebraska statutes and his/her abilities. If the school is maintained by the institution, it must meet approval standards set by the Nebraska Department of Education. In the case of exceptional or handicapped children, the institution shall make appropriate use of all available facilities.

2. Use of library. Library facilities, either in the institution or in the community, must be accessible to the children.
3. Money management training (i.e., budgeting and making wise purchases), according to each child's ability.
4. Religious instruction, according to each child's own faith or that of his/her parents.
5. Recreation. The agency shall provide sufficient time, space, and equipment for indoor and out door recreation.
6. Community contacts. Each child must have the opportunity to participate in community activities appropriate to his/her age, cultural heritage, and interests.

6-008.12 Service Plan Goals: Agency staff shall discuss service plan goals, responsibilities, and privileges with the child's relatives or guardian and the child. If services are provided to parents, the agency shall set policies to preserve the parent-child relationship and to maintain the parental role as fully as possible.

6-008.13 Termination: The agency shall develop written termination policies and procedures, regarding the child in care, including:

1. Reason for termination;
2. The staff positions responsible for deciding to terminate a placement; and
3. The process used in terminating a placement.

A child's record must include a written description of termination, reason for termination, post-termination placement, and legal status. The agency shall inform the agency that originally placed the child of the placement termination.

6-008.14 Records: The agency shall maintain and update the following information on each child in a complete file at the location where the child resides:

1. Full name of the child;
2. Name, address, and phone number of the child's physician;
3. Name, address, and phone number of the person or agency holding custody of the child;
4. Past (if available) and current immunizations;
5. Significant health problems (if available);
6. Emergency medical treatment;
7. List of persons with whom the child may have telephone or personal contact or overnight or extended visits; and
8. A comprehensive record of his/her development while in the facility.

The agency shall consider all records confidential and shall safeguard the information from use which may harm the child. Records may be summarized of children no longer under care provided that identifying information is not released.

6-008.15 Emergency Shelter Care: Shelter staff shall follow these general admissions guidelines:

1. On admission, shelter staff shall start a case record that identifies the child and his/her immediate needs.
2. The following information must be obtained at admission or as soon as possible after admission:
 - a. The child's identity;
 - b. The name(s) and address(es) of the child's parent(s), guardian, or conservator;
 - c. Any medication the child is taking; and
 - d. The child's allergy to any medication, food, or other allergens.
3. During admission the following information must be obtained when possible:
 - a. The child's immediate needs;
 - b. The name of the referral source (e.g., placing agency or individual);
 - c. The date and time of placement;
 - d. The reason for the emergency placement;
 - e. The intake worker's observation of the child's condition;
 - f. The child's understanding of emergency shelter care; and
 - g. The child's feelings about the crisis situation and shelter care.
4. The shelter's policies and procedures must document which staff reviews admission information and makes admissions.
5. When a child is admitted, shelter staff shall try to contact the child's parent(s) or guardian within 24 hours if they are unaware of the placement. If the parent(s) or guardian cannot be contacted, shelter staff shall inform a public agency (child welfare, juvenile probation, or police department) of the child's presence. Efforts to contact the parent(s) or guardian and contacts with public agencies must be documented in the child's case record. Placements made by a public agency are excluded from this requirement.
6. The emergency shelter shall provide orientation for new children.

6-008.16 Wilderness Challenge Programs

6-008.16A Administration:

1. Records of admission of youth shall be on file at the primary site at all times.
2. The program shall have written procedures for handling any suspected incident of child abuse. These procedures will include a policy on the immediate reporting of incidents to law enforcement or the Department.

6-008.16B Program Requirements:

1. There shall be a written plan for expeditions, which shall not expose the child to unreasonable risks. The plan must be approved by an advisory committee prior to the expedition,
2. The program will be licensed as a Child Caring Agency and as a Recreational Camp.
3. Each child shall have clothing and equipment to protect the youth from the environment. This clothing and equipment shall never be removed, denied, or made unavailable to a child. There shall never be a deprivation of any clothing or equipment.
4. Each child shall have adequate potable water and food for all activities. Food and water shall never be removed, denied, or made unavailable to a child. There shall never be a deprivation of any food or water.
5. Each program will submit policies and procedures regarding the handling of privileged and non-privileged mail.
6. Each program will submit policies and procedures for the control of contraband in regards to mail, visitation, and personal affects.
7. All experiential challenge courses will be supervised by a staff person who is certified in the use and safety of course equipment. The courses included, but not limited to this regulation are:
 - a. Ropes courses
 - b. Rock climbing courses, both natural and man made
 - c. All boating type activitiesAny activity that will use a weapon, such as fire arms or arrows, are not permitted
8. The program will have policies and procedures regarding pre-employment drug and alcohol screenings and random screenings during employment of employees.

6-008.16C Staff Requirements:

1. Management and Supervisory staff shall have:
 - a. A BS or BA degree and equivalent training and experience in a related fields.
 - b. Be trained and certified annually, by a certified trainer, in CPR and First Aid.
2. Field Staff
 - a. Be a minimum of 21 years of age.
 - b. Be trained and certified annually, by a certified trainer, in CPR and First Aid.
3. Volunteers and Interns
 - a. Volunteers and Interns shall be under direct, constant supervision of field staff.
 - b. Volunteers shall not be left in the role of supervising child at any time.
 - c. Volunteers and Interns must have a completed Health Information Report before working directly with children and renewed every two years.
4. Staff who supervise experiential challenge courses must be certified in the use and safety of courses.
5. Staff will submit, with cause, to alcohol and drug screenings.

6-008.16D Staff Child Ratio:

1. The applicant/licensee shall employ at least one full-time staff member for every three youth in care.
2. In a mixed gender group, there shall be at least one female and one male staff person. In single gender groups, there must be at least one staff person of the same sex.
3. Volunteers and Interns can not be counted as staff when determining ratio.

6-008.16E Admission Requirements:

1. Children shall be at least 12 years of age to be admitted into the program and no older than 19 years of age prior to the completion of the program.
2. Admission screening must include:
 - a. A current health history, which includes notation of limitations and prescriptive medications, completed and submitted within 30 days prior to entrance into the program and verified by a parent or legal guardian.

- b. A review of the child's social and psychological history with parent or guardian.
- c. A review of the child's health history and physical examination 30 days prior to entrance into the program.
- d. A physical examination conducted by a licensed medical professional. This medical professional will have a written detailed description of the physical demands and environment of the program. The physical exam must include the following:
 - (1) Urinalysis drug screen;
 - (2) CBC, blood count;
 - (3) Urinalysis for possible infections;
 - (4) SMA-6, Electrolyte screen;
 - (5) Pregnancy test for all female youth;
 - (6) Physical assessment based on age, weight , and sex with regards to the potential demands of the program and environment.
- e. Prior to placement in the program, psychological evaluations will be completed and reviewed. A psychological examination shall have been conducted within the last year.
- f. Academic evaluation shall be completed on children enrolled in programs that provide academic credits.

6-008.16F Health and Safety Requirements:

1. All water from natural sources that will be used for consumption shall be treated for sanitation to eliminate health hazards;
2. The program shall have policies and procedures designed to prevent or eliminate infectious and communicable diseases in the field;
3. First Aid treatment shall be provided consistent with the certified first aid training received by all employees;
4. All First Aid kits must meet the standard of the American Red Cross;
5. Reliable two-way communication with a back up system must be available at all times. Expeditions must make contact with the primary site every 24 hours during an off primary site expedition.

6-008.16G Primary Site Requirements:

1. Each program must maintain a primary site.
2. Maintain a current file on each child.
3. Maintain a current list of names of staff and child in each field expedition.
4. Maintain a communications log containing:
 - a. Documentation of all communications between the expedition site and the primary site.
 - b. Documentation of all incidents.
 - c. Documentation of any injury.

6-008.16H Emergencies:

1. Each program shall have a written plan of action for disaster, casualties, and medical emergencies.

6-008.16I Food and Water Requirements:

1. Each child will receive a minimum of 3000 calories per day, This calorie requirement shall adjust to provide 30 to 100 percent increase when climate or exercises demands dictate.
2. Each child shall have 6 to 8 quarts per day of potable drinking water. These amounts shall increase when climate or exercise demands dictate.

6-008.17 Sanitation Regulations

6-008.17A Construction: The agency shall ensure that:

1. The walls, floors, and ceilings of all rooms are easily cleaned, washed, or painted, and are kept clean in good repair;
2. The construction and maintenance of all buildings prevents the entrance and harborage of any insects or rodents; and
3. The premises of all institutions are kept neat and clean and free from barnyard animals and poultry.

6-008.17B Heating: The agency shall ensure that heating is maintained at least 65 degrees Fahrenheit during cold weather. Night-time temperatures must not be less than 60 degrees Fahrenheit.

6-008.17C Toilet Facilities: Every institution shall provide conveniently located toilet facilities at a ratio of one toilet to six children. In institutions hereafter constructed, toilet rooms must not open directly into a room in which food, drink, or utensils are handled or stored. Toilet rooms must be kept clean, in good repair, well lighted, and well ventilated, toilets must be fully enclosed. Toilet facilities must be on the same floor as the children's sleeping rooms.

6-008.17D Lavatory Facilities: The institution shall provide hand-washing facilities at a ratio of not less than one lavatory to each toilet. Hot and cold running water, soap, individual towels, and wash cloths must be provided.

6-008.17E Water: The licensee shall ensure that:

1. The water supply is obtained from a source which is properly located, constructed, and operated to protect it from contamination and pollution;
2. Water meets the current standards of the Nebraska Department of Health and Human Services Regulation and Licensure as to bacteriological, chemical, and physical tests for purity;
3. Water is tested annually for bacteria;
4. Water is tested annually for nitrates if from a private well and there are children in care age one or younger;
5. The water heater has a pressure release valve;
6. Adequate water heating facilities are provided so that a sufficient amount of hot water for general cleaning and washing and sanitizing utensils is available at proper temperature; and
7. Drinking water is provided by sanitary drinking fountains or individual cups; the use of common drinking containers is prohibited.

6-008.17F Plumbing: The institution shall not install nor permit to exist any plumbing fixture or other device which provides a connection between a drinking water supply and a drainage, soil, waste, or sewer pipe so as to make possible the back flow or sewage or waste into the water supply system. Water that has been used for cooking or for any other purposes must not be returned to the system. All pipes and fixtures must be kept clean and in good repair. All plumbing must comply with local and or state plumbing ordinances and codes. Where no plumbing code is in effect, plumbing must conform to the National Plumbing Code USA A 40.8-1955.

6-008.17G Ventilation: The agency shall ensure that:

1. Dormitory and play areas have window area equal to not less than one-tenth of the floor area, which can be opened for ventilation; and
2. Kitchen, bathrooms, and services rooms are so located and ventilated, by window or mechanical means through a vent leading directly to the outside, that offensive odors will be prevented from entering children's rooms and hallways.

6-008.17H Sewage Disposal: Sewage must be discharged into a municipal sewage system where such a system is available; otherwise, the sewage disposal must comply with regulations set by the Nebraska Department of Health and Human Services Regulation and Licensure.

6-008.17I Garbage and Refuse Storage and Disposal: All garbage and refuse must be collected, stored, and disposed of in a manner that will not create a nuisance, or provide a breeding place for flies or harborage for rats. All containers for garbage and refuse must be water-tight, have tight fitting covers, and be fly and rodent proof. Garbage containers must be kept clean.

6-008.17J Lighting: The institution shall ensure that:

1. Each sleeping room is an outside room with a satisfactory amount of natural light.
2. The window area for new applications equals not less than one-tenth of the floor area.
3. Every room, including storerooms, hallways, stairways, inclines, ramps, and entrances are adequately lighted;
4. Lighting fixtures are selected and located with a view to the comfort and safety of residents and personnel; and
5. All service rooms, working centers, and medicine cabinets, are adequately lighted.

6-008.17K Food Services: All aspects of food service sanitation must comply with Part IV of the Food Service Sanitation Manual, 1976, Recommendation of the U. S. Public Health Services.

6-008.18 Recreational Camp Inspections: All Wilderness Challenge Programs must be licensed as a Recreational Camp by the Department of Health and Human Services Regulation and Licensure. See 178 NAC 1.

6-008.19 Experiential Challenge Course Inspections: All experiential activities that use equipment, other than basic camping equipment, shall be inspected every two years by the Department of Labor, Safety Division.