



Town of Wheatland Board of Adjustments

AGENDA

February 15, 2022 7:00 PM
Town Hall Council Chamber
600 9th Street, Wheatland, WY

- A. Call to Order – Roll Call
- B. Declaration of Conflicts of Interest
- C. Scheduled Matters
 - a. **Request:** Variance for a temporary Special Use Permit to operate a Medical Facility within a Conservancy District
 - i. **Applicant:** Lacy Mansfield
 - ii. **Location:** 754 Cole Street, Wheatland, Wyoming
- D. Citizen Comments
- E. Approval of Minutes from the previous meeting
- F. Board Discussion (if any)
- G. Adjournment

Next Board of Adjustments Meeting: TBD

This agenda is not exclusive. Other business may be discussed as necessary



TOWN OF WHEATLAND

PLANNING OFFICE

600 9TH STREET • WHEATLAND • WYOMING

OFFICE 307 • 322 • 2692 FAX 307 • 322 • 2968

Applicant: Lacy Mansfield
Request: Temporary Special Use Permit (SUP) to operate a medical facility in a Conservancy District
Location: 754 Cole Street, Wheatland, Wyoming

Proposal Details

Lacy Mansfield has requested a special use permit to operate a medical facility in a Conservancy District. Per Mrs. Mansfield's letter of intent, she hopes to be able to operate a medical facility to offer midwife and birthing services to the community. In addition, Mrs. Mansfield will be assisting students obtain their clinic hours to satisfy the training requirements for their degrees/licensure.

Agency Comments

Electric Superintendent Pinneo: No problems.

Town Clerk Wright: If the utilities are not on separate meters the entire property would be charged the commercial rate for all town services. The property owners do have the option to have separate water and electric meters. This would allow for the business to be charged the commercial rate for water and electricity and keep the house at the residential rate. The new services would require separate meters to be installed with additional meter deposits. Trash would remain at the commercial rate.

Neighbor Comments

Neighbors asked why the facility couldn't be located in the rear of the property. How will the Town ensure that this building is not used as a rental unit or bunkhouse for the Mansfield's children?

Analysis

Lacy Mansfield's request for a temporary special use permit to operate a medical facility in a Conservancy District. located at 754 Cole Street, Wheatland, Wyoming is a requirement of the Wheatland Municipal Code. Due to the Conservancy District having one use that requires a special use permit (single-family mobile home) and stating, "Any developments other than those uses listed above shall require a land use district boundary change to that allowing such use", this request comes before the Board of Adjustments. Setbacks within the Conservancy District will require that the medical facility be a minimum of twelve feet from the side property lines and a minimum of twenty-five feet from the front and rear property lines. If any

of these distances are in question the landowner may be required to obtain a survey before placement of the facility can occur. Due to the size and utilization of the parcels located along the north side of Cole Street, the area should be zoned Low Density Suburban Residential (LSDR). If the area was zoned LSDR or Residential; health care facilities within those districts require a special use permit and accessory uses are addressed as those that are clearly incidental to the use of the principal building.

Mrs. Mansfield's business, Sacred Birth LLC, is licensed through the state and is in good standing.

Currently, 754 Cole Street is utilized as a residential property. If this request for a temporary special use permit is approved, Mrs. Mansfield will need to obtain a Building Permit from the Building Inspector, install handicap parking and off-street parking spaces, complete any ADA required upgrades, complete all fire, life, safety required upgrades, obtain a sign permit from the Planning and Zoning Commission, and sign building permit from the Building Inspector.

Per the Wyoming Department of Health, a Birthing Center is any health facility, place, professional office, or institution which is not a hospital or in a hospital and where births are planned to occur away from the mother's residence following normal uncomplicated pregnancy. A valid state license is required prior to providing care to any client/patient/resident. The State requests the following information to obtain a state permit: copy of policies and procedures for anesthetic agents, copy of admission policies, copy of policy on staffing requirements during delivery and after delivery, copy of operational policies for informed consent, orientation and education of patients/family/support person regarding childbirth and newborn care, transfer and transport to hospital, discharge, follow-up care and postpartum evaluation after discharge, and registration of birth and reporting of complications, copy of emergency preparedness plan, copy of patient rights policy, copy of written plan, policies, and procedures for quality management, copy of medical records policy, and a copy of policy for hiring employees with verification of BLS certification, a DFS Central Registry Screen and a fingerprint-based national criminal background check for all current direct care staff. In addition, the State requires that all building plans be discussed with and approved by their engineers. Additional information can be found at: <https://health.wyo.gov/aging/hls/facility-types/birthing-center-wyoming-licensure-information/>

Wheatland and Platte County lacks alternative medical options. The addition of this medical facility would be of great benefit to the community and could bring in additional residents if students decide to return after completing their schooling. Additional businesses within the Town add to the Town's tax base and increase economic development.

The Planning Office recommends approval of Lacy Mansfield's request for a temporary special use permit to operate a medical facility in a Conservancy District. located at 754 Cole Street, Wheatland, Wyoming and recommends the Board add some of the following conditions:

- 1) Approve for a term of 8 months to allow time for Mrs. Mansfield to rezone the property to Residential District and obtain a Special Use Permit for a health care facility through the Planning and Zoning Commission.
- 2) Approve for the life of the business.

- 3) Obtain and maintain a valid state license **BEFORE** providing services. Provide a copy of the license to the Planning Office.
- 4) Provide the Building Inspector with approved plans from the Wyoming Department of Health Engineer.
- 5) Obtain a building permit from the Building Inspector.
- 6) Complete all required additions and/or upgrades required by the Building and Electrical Inspectors.
- 7) Have a surveyor mark the property lines if requested by the Building Inspector to verify the placement is not within the setbacks.
- 8) Coordinate with the Building Inspector for the off-street parking plan and install off-street parking before beginning business.
- 9) Obtain a Sign Permit from the Planning and Zoning Commission for the business sign.
- 10) Obtain a Building Permit for the sign from the Building Inspector after approval of the Sign Permit.
- 11) Facility be inspected by the building inspector on an annual basis.
- 12) Landowner shall remove the structure upon closing, lapse in medical licensure, or relocation of the business.

Planning and Zoning Commission Options

- 1) Approve the request as proposed;
- 2) Approve the request with conditions recommended (if applicable);
- 3) Postpone to a definite time – continues the request to the next regularly scheduled meeting of the commission to allow further review to be done (applicant would not need to reapply, certified mailing and public notice fees would be billed to the Town.);
- 4) Postpone Indefinitely – the request or motion is neither approved or disapproved and the request or motion cannot be brought up again during the meeting; however, it can be brought back as a new request at a future meeting (applicant would have to reapply and would pay the application fee, certified mailing fee, and public notice fee); or
- 5) Deny the request (with or without prejudice).

Failure to achieve a quorum result in an automatic continuance to the next regularly scheduled meeting, and a motion fails due to the lack of a second.

Sacred Birth



Sacred Birth

Lacy Mansfield, CPM, LM

PO Box 934

Guernsey, WY 82214

NPI #: 1356996482 WY License#: 22

(307) 331-7430

To Whom It May Concern:

Re: Variance for 754 E Cole Street

On January 20, 2022, my husband, Anthony Mansfield, and I will be signing papers to purchase the residence of 754 E Cole Street. My intent for our land there is to move my premade building that is in Guernsey onto the front west side of the property. The building is a 16'x40' lofted "tiny cabin". I currently use it to conduct prenatal and postpartum exams for my clients and on occasion, they are able to use it as a birthing suite and deliver their baby there.

My business offers personal prenatal care, delivery of babies at home or my birth center and postpartum and newborn care up to 6 weeks postpartum. Currently there are only six licensed midwives in the whole state of Wyoming and I serve the whole SE corner. Of those six, there are only four of us that are currently practicing. This coming summer I will be taking a student on and will be teaching her how to become a midwife. I will be her preceptor by helping her with her apprenticeship through her school in Utah. My student also needs a certain number of clinical hours for her schooling. This is essential in training up more midwives for our area and our state.

Currently I use my birth center two days a week for my office exam days. On those days I see approximately 4-6 clients. So, travel will not be an issue, or will an excessive amount of parking.

I have also included a diagram of the floor plan on my birth center building for your viewing so you can see the layout.

Thank you for your time and consideration,

Lacy R Mansfield, CPM, LM

Right of Way Drive

Property Line

Driveway

House

East Cole Street



12 Feet off Property Line

25 Feet off Property Line

Handicapped

You are currently running an experimental version of Earth.

[Learn more](#)

[Send feedback](#)



754 Cole St
754 Cole St, Wheatlan...
42.05°N, 104.95°W



754 Cole St



St

E Cole St

E Cole St



Google Earth

Imagery date: 7/1...

10 m

Camera: 1,519 m 42°02'42"N 104...



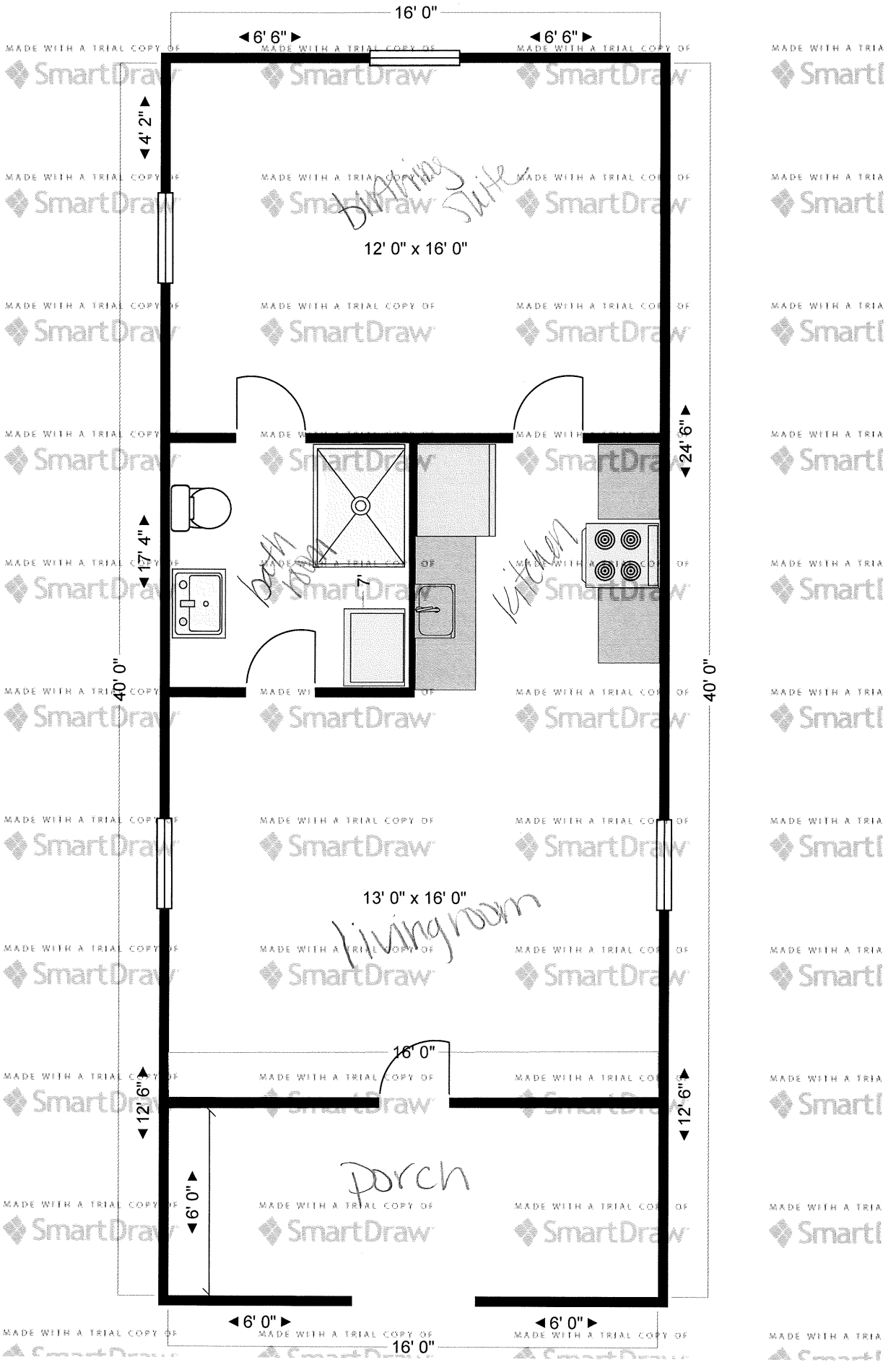
KUPFERSCHMIDT
CHRISTINA
CANCINO
C/O
CANCINO
ARNOLD

CANCINO
ERIN

LOSEKE
JEFFREY V
& RITA C

JAIRELL
ROBERT D &
MORGANS
STEPHANIE
L





CHAPTER 26

BIRTHING CENTERS

Section 1. Authority. The Wyoming Department of Health (Department) promulgates this Chapter under Wyoming Statutes 35-2-904, -907, and -908.

Section 2. Purpose and Applicability.

- (a) This Chapter applies to the operation of a birthing center.
- (b) This Chapter does not apply to the operation of a birthing center that is exempt from licensure under Section 4(b) of this Chapter.
- (c) The Department may issue a provider manual, provider bulletin, or other guidance materials to interpret the provisions of this Chapter. Such guidance must be consistent with and reflect the policies contained in this rule.
- (d) If any portion of this Chapter is found to be invalid or unenforceable, the remainder shall continue in effect.

Section 3. Definitions.

- (a) The following definitions apply to this Chapter:
 - (i) “Administration of Drugs” means the act in which a single dose of a prescribed drug or biological is given to a patient by a licensed person in accordance with all laws and regulations governing such acts.
 - (ii) “Activity, Pulse, Grimace, Appearance, and Respiration” or “APGAR” means the overall assessment of the newborn.
 - (iii) “Bathing Facility” means a bathtub or shower.
 - (iv) “Birthing Center” means a facility which operates for the primary purpose of performing deliveries and is not part of a hospital.
 - (v) “Birthing Room” means a room and environment designed, equipped and arranged to provide for the care of a woman and newborn and to accommodate her support person(s) during the process of vaginal delivery.
 - (vi) “Certified Nurse Midwife” or “CNM” means a midwife who is licensed as an Advanced Practice Registered Nurse by the Wyoming State Board of Nursing and is certified by the American Midwifery Certification Board.

(vii) “Central Registry” means the registry operated by the Wyoming Department of Family Services to index individuals who have been substantiated for:

(A) Abuse or neglect of children under W.S. 14-3-213; or

(B) Abuse, neglect, exploitation, or abandonment of vulnerable adults under W.S. 35-20-115.

(viii) “Certified Professional Midwife” or “CPM” means a midwife who is certified by the North American Registry of Midwives (NARM) and currently licensed by the Wyoming Board of Midwifery.

(ix) “Clinical Staff” means the physicians, CNMs, or CPM’s hired to practice within the birthing center and licensed by the state of Wyoming.

(x) “Governing Body” means an individual or group which is legally responsible for the operation, control and maintenance of the birthing center.

(xi) “Immediate jeopardy” means a situation in which a center’s noncompliance with one or more requirements of these Rules has caused, or is likely to cause, serious injury, harm, impairment, or death to a patient.

(xii) “Low Risk” means normal, uncomplicated prenatal course as determined by adequate prenatal care and prospects for a normal, uncomplicated delivery as defined by reasonable and generally accepted criteria of maternal and fetal health. These services shall be limited to mothers not falling in the categories of conditions and needs listed in Section 11 of this Chapter.

(xiii) “Patient” means a pregnant woman or the newborn receiving care in a birthing center.

(xiv) “Personnel” mean individuals employed by the birthing center.

(xv) “Physician” means a person authorized by the Wyoming Board of Medicine to practice medicine pursuant to W.S. 33-26-301.

(xvi) “Plan of correction” means a center’s plan to correct the deficiencies identified during a survey conducted by the State Survey Agency.

(xvii) “Recovery” means that period or duration of time starting at birth and ending with the discharge of a patient from the birthing center.

(xviii) “State Survey Agency” means the Department of Health, Aging Division, Healthcare Licensing and Surveys, including its staff and designees.

(xix) “Support Person” means the individual(s) selected or chosen by a mother to provide emotional support and to assist her during the process of labor and childbirth.

(xx) “Survey” means an onsite or offsite inspection conducted by the State Survey Agency to determine compliance with these Rules. The term includes activities commonly referred to in the field as surveys, revisits, complaint investigations, periodic surveys, and other inspections deemed necessary by the State Survey Agency.

Section 4. Licensing.

(a) A birthing center may not operate in Wyoming unless the center is licensed by the State Survey Agency under this Chapter.

(b) Despite the licensure requirement under Subsection (a) of this Section, a center may operate without a license if the center:

(i) Consists of no more than one (1) birthing room; and

(ii) Is located within thirty (30) road miles of an acute care hospital.

(c) A center shall display its current license in a public area within the center.

(d) The State Survey Agency may issue a center a provisional license according to the following conditions:

(i) A provisional license provides a center with temporary authorization to operate while the center pursues compliance with these Rules. A provisional license is effective for no more than three (3) months. The State Survey Agency may extend the term of a provisional license for an additional three (3) months, as deemed necessary by the State Survey Agency.

(ii) To apply for a provisional license, a center shall submit the following to the State Survey Agency:

(A) A complete and accurate application form, available from the State Survey Agency upon request or at <http://health.wyo.gov/aging/hls>;

(B) A complete and accurate Freestanding Emergency Center Required Licensure Documentation Checklist, available from the State Survey Agency upon request or at <http://health.wyo.gov/aging/hls>; and

(C) The required licensure fee, in the form of a check or money order made payable to “Treasurer, State of Wyoming,” identified in *Rules, Wyoming Department of Health, Health Quality*, Chapter 1 (1998).

(iii) Upon receipt and review of the required application, checklist, and fee, the State Survey Agency may issue the center a provisional license if the State Survey Agency finds

the center has demonstrated a good faith effort to comply with these Rules. The State Survey Agency may also issue a provisional license to the center as the State Survey Agency deems necessary to allow the center to become compliant with these Rules.

(e) After the State Survey Agency completes a survey under Section 5(b)(i) of this Chapter, the State Survey Agency may issue a license to a provisionally-licensed center if the State Survey Agency determines the center has submitted an acceptable plan of correction, or corrected any deficiencies cited by the State Survey Agency.

(f) The renewal of a license is subject to the following:

(i) To apply for licensure renewal, a center shall submit the following to the State Survey Agency:

(A) A complete and accurate application form, available from the State Survey Agency upon request or at <http://health.wyo.gov/aging/hls>; and

(B) The required licensure fee, in the form of a check or money order made payable to “Treasurer, State of Wyoming,” identified in *Rules, Wyoming Department of Health, Health Quality*, Chapter 1 (1998).

(ii) Upon receipt of the required application and fee, the State Survey Agency may renew the center’s license if the State Survey Agency finds the center has demonstrated a good faith effort to comply with the regulatory requirements.

(g) A center may not transfer a license, even if the center changes ownership.

(i) If a center undergoes a change of ownership, the center shall:

(A) Provide written notice no later than sixty (60) days prior to the effective date of the change of ownership to the State Survey Agency that outlines the specific details of the change, parties involved, and proposed effective date;

(B) Within twenty-four (24) hours of the effective change of ownership date, submit a copy of the signed bill of sale and any lease agreements that reflects the effective date of the sale or lease; and

(C) Obtain a new license according to the provisions of this Section before the center may continue operations.

(ii) A change of ownership occurs when there is a change in the legal entity responsible for the operation of the center, whether by lease or by ownership.

(h) If a center changes the center’s name or address, the center shall submit the appropriate form and fee established by the State Survey Agency no later than sixty (60) days before the change in center name or address is effective.

(i) If a center voluntarily terminates operations, the center shall notify the State Survey Agency in writing within sixty (60) days before the voluntary termination of operations.

(i) A center voluntarily terminating operations shall provide for the continued storage of medical, financial, and personnel records for a period of six (6) years.

(ii) The notice provided to the State Survey Agency must include the name, address, email, and other contact information of the custodian of the center's medical, financial, and personnel records.

Section 5. Surveys.

(a) A center shall submit to and comply with a survey performed by the State Survey Agency.

(b) The State Survey Agency shall perform:

(i) A survey before the State Survey Agency may issue a license under Section 4(e) of this Chapter;

(ii) A survey as necessary to monitor or resolve previously-identified deficiencies;

(iii) A survey as necessary to periodically monitor compliance with these Rules;

(iv) A survey upon receipt of a complaint against a center for the alleged violation of these Rules or other applicable laws; and

(v) Any other surveys the State Survey Agency deems necessary to enforce the provisions of these Rules, to enforce other applicable law, or to protect the public health, safety, or welfare.

(c) The State Survey Agency may conduct a survey off-site, or remotely, as the State Survey Agency deems necessary.

(d) While under survey, a center shall provide the State Survey Agency with immediate access to all center records.

(e) If immediate jeopardy is identified during a survey, the State Survey Agency shall verbally notify the administrator or the administrator's designee. The center shall:

(i) Immediately develop a written action plan to remove the immediate risk to the patient(s);

(ii) Provide the written action plan to the State Survey Agency for review and approval; and

(iii) Upon approval, implement the action plan.

(f) The State Survey Agency shall notify the administrator or administrator's designee when an immediate jeopardy situation has been removed.

Section 6. Deficiencies and Actions Against a License.

(a) If the State Survey Agency determines during a survey that a center is out of compliance with any provision of these Rules or other applicable law, the following conditions apply:

(i) The State Survey Agency shall provide the center a statement of deficiencies within ten (10) business days of the survey exit date.

(ii) If a center receives a statement of deficiencies, the center shall comply with the following provisions.

(A) The center shall submit an acceptable plan of correction to the State Survey Agency within ten (10) business days.

(B) The plan of correction must be a written document that provides the following information:

(I) Who will be charged with the responsibility to correct each deficiency;

(II) What will be done to correct each deficiency;

(III) How the plan of correction will be incorporated into the center's quality management program;

(IV) Who will be charged with monitoring the center to ensure each deficiency does not occur or develop again; and

(V) The date the center expects to correct all deficiencies, which may not exceed sixty (60) calendar days after the survey exit date.

(iii) If the State Survey Agency determines it will take the center longer than the sixty (60) days to implement the plan of correction and there is no threat to the health or safety of patients, the State Survey Agency may extend the sixty (60) day deadline.

(b) Pursuant to W.S. 35-2-905, the State Survey Agency may take action against a center according to the following conditions:

(i) The State Survey Agency may take action against a center if the State Survey Agency finds that the center:

(A) Violated a provision of these Rules or other applicable laws;

(B) Permitted, aided, or abetted the commission of any illegal act by a facility licensed by the State Survey Agency; or

(C) Conducted practices detrimental to the health, safety, or welfare of the patients of the center.

(ii) Action against a center may include:

(A) Placing conditions upon the center's license;

(B) Installing a monitor or manager, at the center's expense, that has been approved by the State Survey Agency;

(C) Suspending the admission of new patients at the center; or

(D) Denying, suspending, or revoking a center's license.

Section 7. Governing Body.

(a) The governing body of a center shall:

(i) Adopt and maintain bylaws that define, identify, and establish responsibilities for the operation and performance of the center,

(ii) Establish administrative policies including qualifications and responsibilities of the center administrator;

(iii) Provide the appropriate personnel, equipment, supplies and special services necessary to provide safe and effective care; and

(iv) Meet at least annually and keep minutes or other records necessary for the orderly conduct of the center. Meetings held by the center's governing body shall be separate meetings with separate minutes.

Section 8. Center Administrator.

(a) Prior to licensure, a center shall employ and designate a center administrator.

- (b) The center administrator shall:
 - (i) Oversee management and operation for the center;
 - (ii) Comply with policies, rules and regulations and statutory provisions pertaining to the health and safety of patients;
 - (iii) Serve as the liaison between the governing body and the staff;
 - (iv) Plan, organize and direct activities that may be delegated by the governing body;
 - (v) Control the purchase, maintenance, and distribution of the equipment, materials, and facilities of the center;
 - (vi) Establish lines of authority, accountability, and supervision of staff;
 - (vii) Establish controls related to the custody of the official documents of the center and to maintaining the confidentiality, security, and physical safety of data on patients and staff; and
 - (viii) Ensure personnel policies are adopted, implemented, and enforced to facilitate attainment of the mission, goals, and objectives of the center.

Section 9. Duties and Powers of a Birthing Center.

- (a) A center shall provide:
 - (i) Anesthetic agents according to Section 10 of this Chapter;
 - (ii) Provision of services according to Section 11 of this Chapter; and
 - (iii) Pharmaceutical services according to Section 12 of this Chapter.
- (b) A center shall adopt, implement, and enforce:
 - (i) An emergency preparedness plan according to Section 13 of this Chapter;
 - (ii) A patient rights policy according to Section 14 of this Chapter;
 - (iii) A quality management program according to Section 15 of this Chapter;
 - (iv) A records policy according to Section 16 of this Chapter; and
 - (v) A staffing policy according to Section 17 of this Chapter.

(c) A center shall purchase and maintain equipment and supplies according to Section 18 of this Chapter.

(d) A center shall maintain a physical environment according to the following conditions:

(i) A facility must be designed, constructed, arranged, equipped and maintained, including the provision of fire safety, in accordance with Chapter 3 of these Rules.

(ii) If a facility constructs, remodels, or changes the use of facility space, the facility shall comply with Chapter 3 of these Rules.

(e) A center shall provide, disclose, or otherwise make available medical records, personnel records, incident reports, and other documents related to compliance with these Rules upon the written request of the State Survey Agency.

Section 10. Anesthetic Agents.

(a) A center may not administer general or conduction anesthesia.

(b) A center may administer:

(i) Systemic analgesia for pain control; and

(ii) Local anesthesia for perineal repair if indicated.

(c) A center shall adopt, implement, and enforce policies and procedures for the proper use of anesthetic agents, including relevant techniques, at the center.

Section 11. Provision of Services.

(a) A center may not accept a pregnant woman under sixteen (16) years of age for care.

(b) A center may not perform a delivery if the pregnant woman exhibits medical evidence of the following conditions:

(i) Hypertension, pre-eclampsia, or eclampsia;

(ii) Multiple gestation (i.e. twins);

(iii) Placental abnormalities, including previa or abruptio, which may threaten the neonate;

(iv) Premature labor, post-maturity labor, or medically-induced labor;

(v) More than one (1) prior cesarean section with no history of a vaginal delivery; a cesarean section within eighteen (18) months of the current delivery; or, any cesarean section that was surgically closed with a classical or vertical uterine incision; or

(vi) Known breech or other abnormal, non-vertex, presentation.

(c) If a center accepts a pregnant woman, the center shall provide services according to the following standards:

(i) A physician, CNM, or CPM shall attend each delivery at the center. A second staff member shall also attend the delivery.

(ii) If more than one patient is in labor at a center, a minimum of one staff member per a patient must be present at the center.

(iii) After a delivery, a CNM, CPM, or RN shall be present in the center at all times until the mother and newborn are stable and discharged from care.

(d) A center shall develop, implement, and enforce written operational policies for:

(i) Informed consent that is obtained prior to the onset of labor and shall include evidence of an explanation by personnel of the services offered and potential risks;

(ii) Orientation and education of patients, family, and support persons regarding childbirth and newborn care;

(iii) Consultation, back-up services, transfer, and transport of the patient(s) to the hospital where appropriate care is available;

(iv) Emergency transport of the patient(s) if indicated, including method of providing pertinent medical information to the receiving hospital;

(v) Discharge of the mothers and newborns within 24 hours after delivery;

(vi) A program for prompt follow-up care and postpartum evaluation after discharge; and

(vii) Registration of birth and reporting of complications, anomalies, and stillbirths.

Section 12. Pharmaceutical Services.

(a) A center shall provide pharmaceutical services necessary to meet the needs of patients and to adequately support the center's clinical capabilities.

(b) A center shall:

- (i) Maintain the pharmacy or drug storage area according to relevant federal and state law;
 - (ii) Package and dispense drugs and biologicals according to relevant federal and state law;
 - (iii) Keep drugs and biologicals in a locked storage area; and
 - (iv) Destroy drugs and biologicals as necessary according to accepted medical practices. If the drug is a controlled substance, a RN shall destroy the drug in the presence of another qualified professional and shall document the destruction in the patient's medical record.
- (c) A staff member shall immediately report a drug administration error, adverse drug reaction, or incompatibility to the clinical staff.

Section 13. Emergency Preparedness.

- (a) A center shall develop and maintain an emergency preparedness plan according to Chapter 3 of these Rules.
- (b) A center shall:
 - (i) Ensure the plan includes ongoing coordination with community agencies and other local health care facilities;
 - (ii) Review the plan annually; and
 - (iii) Update the plan as necessary.

Section 14. Patient Rights.

- (a) A center shall promote and protect patient rights.
- (b) A center shall:
 - (i) Treat a patient with respect, consideration, and dignity;
 - (ii) Provide a patient appropriate privacy;
 - (iii) Provide a patient, to the degree known by the center, appropriate information concerning the patient's diagnosis, treatment, and prognosis. When it is medically inadvisable to give such information to a patient, the center shall provide the information to a person designated by the patient or to a legally authorized person;

(iv) Provide a patient the opportunity to participate in decisions involving the patient's health care, except when the patient's participation is contraindicated for medical reasons; and

(v) Provide the patient written information regarding the patient's rights including the following subjects:

(A) Patient conduct and responsibilities;

(B) Services available at the center;

(C) The center's transfer policy and procedures;

(D) Fees for services provided at the center;

(E) The center's payment policies; and

(F) The center's procedure for filing and pursuing a grievance, including all relevant steps from filing the initial grievance to achieving a resolution.

Section 15. Quality Management.

(a) A center shall implement a quality management function under W.S. 35-2-910.

(b) A center's quality management program must:

(i) Ensure and evaluate the quality of patient care provided at the center; and

(ii) Provide for the annual review of:

(A) The utilization of the center's services, including the number of patients served and volume of services;

(B) The center's health care policies;

(C) The center's infection control program including antibiotic stewardship; and

(D) The initiation and documentation of appropriate remedial action to address deficiencies found through the quality management program, as well as documentation of the outcome of remedial action.

Section 16. Records.

(a) If a patient receives services at a center, the center shall maintain a patient medical record. As applicable, a patient medical record must include:

(i) Regarding a pregnant woman or mother:

(A) Documentation of prenatal care, including:

(I) A complete blood count;

(II) Urinalysis;

(III) Prenatal blood serology;

(IV) Rhesus factor (Rh) determination and evidence of a plan for the appropriate use of Rh immune globulin;

(V) Past obstetrical history;

(VI) Physical examination;

(VII) Rubella titer;

(VIII) Identification data including patient history and physical examination;

(IX) Signed consent;

(X) Medication orders signed by licensed provider (Physician, CNM or CPM); and

(XI) Other laboratory test results.

(ii) Regarding the labor and delivery:

(A) Documentation of the labor and delivery:

(I) Anesthesia and analgesia and medication given in the course of labor, delivery, and postpartum;

(II) Administration of rhesus (Rh) immune globulin, if any;

(III) Recovery and other progress notes;

(IV) Medications administered;

(V) Condition and referral on discharge; and

(VI) Home visits following discharge.

(iii) Regarding a newborn:

(A) Documentation of newborn care, including:

(I) Date and hour of birth;

(II) Birth weight;

(III) Length;

(IV) Estimation of gestational age;

(V) Gender;

(VI) Condition of infant on delivery including APGAR;

(VII) Record of ophthalmic prophylaxis and Vitamin K, or refusal thereof;

(VIII) Appropriate physical examination at birth and at discharge by physician or midwife;

(IX) Genetic screening, phenylketonuria (PKU) or other metabolic disorders report or refusal thereof; and

(X) Fetal monitoring record.

(b) A center shall register a birth according to W.S. 35-1-410 and *Rules, Wyoming Department of Health, Vital Records Services, Chapter 3 (2008)*. A center shall include the birth registration information as part of the medical record.

(c) A center shall comply with the Health Insurance Portability and Accountability Act (HIPAA) of 1996, the implementing regulations of HIPAA, and any other applicable law relating to the maintenance or disclosure of health information.

(d) A center shall maintain all records according to professional standards of practice, including storage of records in a secure and designated area.

(e) A center's medical records policy must:

- (i) Ensure the confidentiality of medical records and safeguard against loss, destruction, or unauthorized use, in accordance with applicable law;
 - (ii) Govern the use and removal of records from the record storage area;
 - (iii) Specify the conditions under which record information may be released and to whom;
 - (iv) Specify when the patient's written consent is required for release of information;
 - (v) Ensure all entries are dated, signed, and legible;
 - (vi) Ensure all information to a patient's care and stay is documented in the patient's medical record; and
 - (vii) Ensure that medical records are preserved in physical or electronic form.
- (f) A center shall maintain personnel records for each individual employed at the center that include:
- (i) An employment application;
 - (ii) Verification of criminal background check and Central Registry check;
 - (iii) Licensure verification;
 - (iv) Copies of certifications required under Section 17;
 - (v) Immunizations and other medical tests; and
 - (vi) Results of medical examinations required as a part of employment.
- (g) A center shall maintain equipment records per the manufacturer's recommendations.

Section 17. Staff.

- (a) A center may not permit a staff member to provide a service unless:
- (i) The staff member possesses the necessary education, training, experience, licensure, and certifications; and
 - (ii) The staff member is certified in Basic Life Support (BLS) and has required training in bloodborne pathogens.

- (b) A center shall employ sufficient staff to allow for:
 - (i) A practitioner, CNM or CPM to be on-site at the center when patients are present;
 - (ii) A practitioner to be on-call and immediately available by telephone or radio if there is no practitioner on-site at the center; and
 - (iii) An adequate number of practitioners, RNs or CPMs to be available on-call to meet the emergency needs of patients in a timely manner.
- (c) A center shall require all direct care center staff to submit to a Child & Adult Abuse/Neglect Central Registry Screen, through the Wyoming Department of Family Services, and a full fingerprint-based national criminal background check.
 - (i) If a direct care staff member is found to have previously committed abuse/neglect or a criminal offence, the center must not allow the staff member to work independently and unsupervised unless the center:
 - (A) Investigates the conduct at issue in a thorough manner;
 - (B) Determines, based on the findings of its investigation, that the direct care staff member may be allowed to have unsupervised access to patients and the center's operational systems; and
 - (C) Maintains documentation of its investigation and determination in the direct care staff member's subsequent personnel file.

Section 18. Equipment and Supplies.

- (a) A center shall maintain appropriate equipment and supplies, including:
 - (i) A bed suitable for labor, delivery, and recovery;
 - (ii) Oxygen with flow meters and masks or equivalent;
 - (iii) Mechanical suction or bulb suction;
 - (iv) Endotracheal tubes;
 - (v) Oral airways;
 - (vi) Needles;
 - (vii) Syringes;

- (viii) Emergency drugs;
- (ix) A laryngoscope;
- (x) An automated external defibrillator;
- (xi) Emergency medications, intravenous fluids, and related supplies and equipment for both mother and newborn;
- (xii) Equipment for monitoring fetal heartrate;
- (xiii) Equipment specifically designed for thermal regulation and transport of newborns, and regular training and review in proper use of equipment;
- (xiv) An infant scale;
- (xv) A clock;
- (xvi) Sterile suturing equipment and supplies;
- (xvii) Adjustable lighting that is adequate for examinations;
- (xviii) Containers for soiled linen which shall be closed or covered;
- (xix) Infection control supplies for the sanitary disposal of all wastes;
- (xx) An emergency communication system;
- (xxi) A sphygmomanometer, stethoscope and fetoscope;
- (xxii) Supplies for routine laboratory testing; and
- (xxiii) Any other equipment necessary to ensure the safety of pregnant women, mothers, and children.

INITIAL OR CHANGE IN OWNERSHIP LICENSE APPLICATION INSTRUCTIONS

Important Information: Not all sections pertain to every type of facility. As of 07/01/2021 the Wyoming State Statute changed and the licensure fees have been changed. Please read the facility application form for the appropriate fee to be submitted.

- **The application is a Word fillable form and must be in print layout view. You must tab through the form to advance in the document.**
- All sections of the application must be completed.
- An application for each facility must be submitted separately.
- Only checks are accepted for payment. Please make payable to:
Wyoming Department of Health
- **Submission:**

IF MAILED:

- If you mail the application, instead of sending via Email, ensure it is a complete application (all sections are completed, signatures, attachments and fee) and all documentation comes in together. Mail to the address at the top of the application form.

IF EMAILED:

- If Emailed, please use the subject line: **License Application Submission**
- If Emailed, ensure all appropriate attachments are included in the Email. **An original signature page (no copies) along with the appropriate fee must still be mailed in. Only send the signature page, DO NOT send a hard copy of the entire application, this may cause delays; as we will need to review the hard copy to ensure nothing has changed from the Emailed copy.**
- Please ensure the signature page (with facility name at the top) and check are **sent in together** so payment can be easily matched up to the right provider application. A check must be submitted with EACH application.

General Information:

Based on the healthcare facility type, some of these areas are not applicable on all license applications.

- Type of Application –
 - Initial Application – This is for a brand new facility
 - Change in Ownership – This is when an existing facility is changing ownership. Licenses are not transferrable. A change in ownership is processed the same way an initial application is processed.

- Contact person – This is the person Healthcare Licensing and Surveys (HLS) will contact if there are any concerns or questions upon review of the license application. Communication will be sent via Email to this person.

- Facility name – This is how the facility’s name will appear on the license. If the facility is a Medicare/Medicaid certified provider, the name here should match the name in which the CMS Certification Number (CCN) and provider agreement are filed under.

- Physical address – This is the main physical location where the facility being licensed is located.

- Mailing address – This is the address that will be used to send any hard copy correspondence.

- Fiscal year end date – This is the date marking the end of the facility’s fiscal year for purposes of financial reporting and Medicare/Medicaid reporting.

- Phone – This is the phone number of the actual facility. This is the number HLS will use when needing to reach the facility administrator or other staff. This will also be the number listed in the public HLS Facility Directory on our web page, for consumers wanting to reach the provider.

- Email – This is the Email address HLS will use for official correspondence, notices, and most importantly the survey results. Only one Email can be used, so please ensure this is an Email that will be maintained and monitored closely. Centers for Medicare and Medicaid Services (CMS) will also use this Email address for their correspondences. Also, please be aware that Emails will be sent encrypted and secure. We recommend this be someone directly at the facility versus a corporate address.

NOTE: For Nursing Homes, the surveys will be sent via the new ePOC process. Please ensure you have at least two ePOC users signed up and that their account remains active. Guidance is on our webpage at <https://health.wyo.gov/aging/hls/facility-types/nursing-care-facility-nursing-home-wyoming-licensure-information/>

- CMS Certification Number (CCN) – This is the number CMS assigned to the facility upon initial certification and is used to track certification of the provider agreement between CMS and the provider. The number will start with a 53.

- National Provider Identify Number (NPI) – This is the standard unique health identifier for health care providers adopted by the Secretary of Health and Human Services in accordance with the Health Insurance Portability and Accountability Act of 1996 (HIPAA). All individuals and organizations who meet the definition of health care provider as described at 45 CFR 160.103 are eligible to obtain an NPI. If you are a HIPAA covered provider or if you are a health care provider/supplier who bills Medicare for your services, you need an NPI.
- Employer Tax ID # (EIN) – This is also known as a Federal Tax Identification Number, and is used by the IRS to identify the taxpayer. EINs must be used by business entities--corporations, partnerships, and limited liability companies. However, most sole proprietors do not need to obtain an EIN and can use their Social Security numbers instead.
- Fidelity bond – A fidelity bond guarantees performance of a certain act (trustworthiness of employees). You can file a claim against a bond as if you would an insurance policy. A bond does not have a deductible where as an insurance policy does and the concern with an insurance policy would be if the provider would have the capability of covering the expenses to the deductible amount. The rules and regulations specifically state a fidelity bond.
- Provider-based – This is an entity that furnishes services that are integrated with another entity as the main provider, such as a hospital for one example. For CMS certification, all provider-based requirements and approval must be met to obtain such status.
- Free-standing – This is an entity that is not integrated with any other entity as a main provider and operates independently.
- Geographic Service Area – This is the location(s) served by the home health agency or hospice provider. This is defined by entire counties, either by cities/towns, or by zip code areas, and must be listed as such on the license application. For CMS certified providers this service area is also defined when submitting a CMS Application (855) to the Medicare program. The geographic service area must be the same for licensure and certification. You must also include a map clearly identifying the geographic service with the license application. If you wish to expand or decrease your geographic service area, please contact HLS for further information.
- Provider Transaction Access Number (PTAN) – This is the number that will be issued upon application (CMS-855) to a Medicare Administrative Contractor (MAC). While only the NPI can be submitted on claims, the PTAN is a critical number directly linked to the provider or supplier's NPI. The NPI and the PTAN are related to each other for Medicare purposes. A provider must have one NPI and will have one, or more, PTAN(s) related to it in the Medicare system, representing the provider's enrollment. If the provider has relationships with one or more medical groups or practices or with multiple Medicare contractors, separate PTANS are generally assigned. All providers and suppliers should carefully review their Provider Enrollment and Chain/Ownership System (PECOS) records

in order to protect themselves and their practices from identity theft. PECOS is an online Medicare enrollment system where providers and suppliers can submit, view, update, etc. Medicare enrollment applications. PECOS should only contain active enrollment records that reflect current practice and group affiliations.

- Admission & Occupancy Data – This information is only required on annual renewal applications. Instructions for calculation are included at the end of these instructions.
- Deemed Status – Medicare-participating healthcare providers and suppliers are surveyed either by State Survey Agencies or by Accrediting Organizations (AOs) to ensure that they meet CMS’ quality and safety standards. AOs receive deeming authority from CMS, which affirms that AOs’ health and safety standards meet or exceeds those of Medicare. Deemed status is voluntary, meaning a provider could belong to an AO and not be deemed. To obtain deemed status the provider must request and receive approval from CMS to accept the AO’s survey process instead of using the State Survey Agency for provider certification survey. If you do have deemed status, you must send a copy of the most recent accrediting survey and any subsequent surveys; do not send a copy of your State survey. If you are not a deemed provider, no survey documents need to be submitted.
- Accrediting Organization (AO) Acronyms:
 - TJC – The Joint Commission
 - AAAHHC – Accreditation Association for Ambulatory Health Care
 - ACHC – Accreditation Commission for Health Care, Inc.
 - AAAASF – American Association for Accreditation of Ambulatory Surgery Facilities, Inc.
 - HFAP – American Osteopathic Association/Healthcare Facilities Accrediting Program
 - CIHQ – Center for Improvement in Healthcare Quality
 - CHAP – Community Health Accreditation Partner
 - DNV – DNV Healthcare (Det Norske Veritas)
 - IMQ – Institute for Medical Quality
 - NDAC – National Dialysis Accreditation Commission
 - TJC – The Joint Commission
 - TCT – The Compliance Team

The HLS website has contact information for the AOs at:
<https://health.wyo.gov/aging/hls/forms-and-policies>

- Name/Title of Person in Charge of Facility – Depending on the facility organizational structure, this could be the CEO, etc. or it could be the same person listed in the Administrator/Director section.
- Locations/Buildings: Facility Floor Plan – A readable and clear copy of the floor plan is required and **must** identify resident/patient **room numbers**; as well as other service areas such as dining room, activity area, shower/tub room, toilet rooms, utility rooms, dietary services, etc. Please ensure the name of the facility is identified on the plan.

- Ancillary Attestation Form - Please make copies as needed and for each ancillary location identified in the Building Location section and attach separately with the application submission.
- Owner – This is not the owner of the physical structure. This entity will be the governing authority and have legal control of the facility. This entity usually has ownership interest in the facility’s share of profits and losses or similar items and the right to receive distributions.
- Officers – Dependent on the ownership type, this is either the name of the sole proprietor, names of the partners, names of board members, or names of individuals that are officers of the corporation, etc. This is not the CEO, CFO, Administrator, etc. as they are usually appointed, elected, or hired by the owners.
- Operator – This entity will be responsible for the care provided and operation of the facility for the owner. Usually under some form of contract or management agreement with the owner. This entity will act on behalf of the owner in the overall management, responsibility, and day-to-day operations of the facility.
- Please see the Admission & Occupancy calculations below and healthcare facility licensure requirements at W.S. 35-2-901 and 902 et seq as referenced on the license application.

For further questions regarding the application process, the best method to contact HLS is by sending a detailed Email (include facility name and facility type) to: wdh-ohls@wyo.gov or tammy.schmitt@wyo.gov

If at any time during the licensure period there is a change in Administrator/Director, Director of Nursing/Nursing Supervisor or the main contact Email, please complete a Facility Change Form and submit it to our office. This form is located at: [HTTPS://HEALTH.WYO.GOV/AGING/HLS/FORMS-AND-POLICIES/](https://health.wyo.gov/aging/hls/forms-and-policies/)

ADMISSION AND OCCUPANCY CALCUATIONS

OCCUPANCY RATE % EXAMPLE (April 1 – March 31)							
x = Determine Actual Total Resident Days of Care	Add up the total daily census for the year. Apr 1 = 10; Apr 2 = 15; Apr 3 = 15, etc. TOTAL = x						
y = Determine Available Total Residents Days of Care	Take the number of licensed beds X number of days in calendar year 105 lic beds x 365 days = y						
z = Determine Occupancy Rate Percentage	Actual Total Resident Days of Care ÷ Available Total Residents Days of Care $x \div y = z$						
EXAMPLE:	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">x = 34,659 days</td> <td>(10+15+15+etc.)</td> </tr> <tr> <td>y = 38,325 days</td> <td>(105 x 365)</td> </tr> <tr> <td>z = 90%</td> <td>(34,659 ÷ 38,325)</td> </tr> </table>	x = 34,659 days	(10+15+15+etc.)	y = 38,325 days	(105 x 365)	z = 90%	(34,659 ÷ 38,325)
x = 34,659 days	(10+15+15+etc.)						
y = 38,325 days	(105 x 365)						
z = 90%	(34,659 ÷ 38,325)						

HEALTHCARE FACILITY LICENSURE REQUIREMENTS

WYOMING STATE STATUTE

TITLE 35 / PUBLIC HEALTH AND SAFETY CHAPTER 2 / HOSPITALS, HEALTH CARE FACILITIES AND HEALTH SERVICES ARTICLE 9 / LICENSING AND OPERATIONS

35-2-901. Definitions; applicability of provisions.

- (a) As used in this act:
- (i) "Acute care" means short term care provided in a hospital;
 - (ii) "Ambulatory surgical center" means a facility which provides surgical treatment to patients not requiring hospitalization and is not part of a hospital or offices of private physicians, dentists or podiatrists;
 - (iii) "Birthing center" means a facility which operates for the primary purpose of performing deliveries and is not part of a hospital;
 - (iv) "Boarding home" means a dwelling or rooming house operated by any person, firm or corporation engaged in the business of operating a home for the purpose of letting rooms for rent and providing meals and personal daily living care, but not habilitative or nursing care, for persons not related to the owner. Boarding home does not include a lodging facility or an apartment in which only room and board is provided;
 - (v) "Construction area" means thirty (30) highway miles, from any existing nursing care facility or hospital with swing beds to the site of the proposed nursing care facility, as determined by utilizing the state map prepared by the Wyoming department of transportation;
 - (vi) "Department" means the department of health;
 - (vii) "Division" means the designated division within the department of health;
 - (viii) "Freestanding diagnostic testing center" means a mobile or permanent facility which provides diagnostic testing but not treatment and is not part of the private offices of health care professionals operating within the scope of their licenses;
 - (ix) Repealed By Laws 1999, ch. 119, § 2.
 - (x) "Health care facility" means any ambulatory surgical center, assisted living facility, adult day care facility, adult foster care home, alternative eldercare home, birthing center, boarding home, freestanding diagnostic testing center, home health agency, hospice, hospital, freestanding emergency center, intermediate care facility for people with intellectual disability, medical assistance facility, nursing care facility, rehabilitation facility and renal dialysis center;
 - (xi) "Home health agency" means an agency primarily engaged in arranging and directly providing nursing or other health care services to persons at their residence;
 - (xii) "Hospice" means a program of care for the terminally ill and their families given in a home or health facility which provides medical, palliative, psychological, spiritual and supportive care and treatment. Hospice care may include short-term respite care for non-hospice patients, if the primary activity of the hospice is the provision of hospice services to terminally ill individuals and provided that the respite care is paid by the patient or by a private third party payor and not through any governmental third party payment program;
 - (xiii) "Hospital" means an institution or a unit in an institution providing one (1) or more of the following to patients by or under the supervision of an organized medical staff:
 - (A) Diagnostic and therapeutic services for medical diagnosis, treatment and care of injured, disabled or sick persons;
 - (B) Rehabilitation services for the rehabilitation of injured, disabled or sick persons;
 - (C) Acute care;
 - (D) Psychiatric care;
 - (E) Swing beds.
 - (xiv) "Intermediate care facility for people with intellectual disability" means a facility which provides on a regular basis health related care and training to persons with intellectual disabilities or persons with related conditions, who do not require the degree of care and treatment of a hospital or nursing facility and services above the need of a boarding home. The term also means "intermediate care facility for the mentally retarded" or "ICFMR" or "ICFs/MR" as those terms are used in federal law and in other laws, rules and regulations;
 - (xv) "Medical assistance facility" means a facility which provides inpatient care to ill or injured persons prior to their transportation to a hospital or provides inpatient care to persons needing that care for a period of no longer than sixty (60) hours and is located more than thirty (30) miles from the nearest Wyoming hospital;
 - (xvi) "Nursing care facility" means a facility providing assisted living care, nursing care, rehabilitative and other related services;
 - (xvii) "Physician" means a doctor of medicine or osteopathy licensed to practice medicine or surgery under state law;
 - (xviii) "Psychiatric care" means the in-patient care and treatment of persons with a mental diagnosis;
 - (xix) "Rehabilitation facility" means an outpatient or residential facility which is operated for the primary purpose of assisting the rehabilitation of disabled persons including persons with acquired brain injury by providing comprehensive medical evaluations and services, psychological and social services, or vocational evaluations and training or any combination of these services and in which the major portion of the services is furnished within the facility;
 - (xx) "Renal dialysis center" means a freestanding facility for treatment of kidney diseases;
 - (xxi) "Swing bed" means a special designation for a hospital which has a program to provide specialized in-patient long term care. Any medical-surgical bed in a hospital can be designated as a swing bed;
 - (xxii) "Assisted living facility" means a dwelling operated by any person, firm or corporation engaged in providing limited nursing care, personal care and boarding home care, but not habilitative care, for persons not related to the owner of the facility. This definition may include facilities with secured units and facilities dedicated to the special care and services for people with Alzheimer's disease or other dementia conditions;
 - (xxiii) "Adult day care facility" means any facility not otherwise certified by the department of health, engaged in the business of providing activities of daily living support and supervision services programming based on a social model, to four (4) or more persons eighteen (18) years of age or older with physical or mental disabilities;
 - (xxiv) "Adult foster care home" means a home where care is provided for up to five (5) adults who are not related to the provider by blood, marriage or adoption, except in special circumstances, in need of long term care in a home like atmosphere. "Adult foster care home" does not include any residential facility otherwise licensed or funded by the state of Wyoming. The homes shall be regulated in accordance with this act and with the Wyoming Long Term Care Choices Act, which shall govern in case of conflict with this act;
 - (xxv) "Alternative eldercare home" means a facility as defined in W.S. 42-6-102(a)(iii). The homes shall be regulated in accordance with this act and with the Wyoming Long Term Care Choices Act which shall govern in case of conflict with this act;
 - (xxvi) "Freestanding emergency center" means a facility that provides services twenty-four (24) hours a day, seven (7) days a week for life threatening emergency medical conditions and is at a location separate from a hospital;
 - (xxvii) "This act" means W.S. 35-2-901 through 35-2-913.
- (b) This act does not apply to hospitals or any other facility or agency operated by the federal government which would otherwise be required to be licensed under this act or to any person providing health care services within the scope of his license in a private office.

35-2-902. License required.

No person shall establish any health care facility in this state without a valid license issued pursuant to this act.

Wyoming Administrative Rules

Health, Department of

Healthcare Licensing and Surveys

Chapter 3: Construction Rules and Regulation for Healthcare Facilities

Effective Date: 04/03/2008 to Current

Rule Type: Current Rules & Regulations

Reference Number: 048.0061.3.04032008

Effective: 04/03/2008

CHAPTER 3
CONSTRUCTION RULES AND REGULATIONS FOR HEALTHCARE FACILITIES

Section 1. Authority. These rules are promulgated by the Department of Health pursuant to W.S. 35-2-901, et seq., W.S. 35-9-121.1, and the Wyoming Administrative Procedure Act at W.S. 16-3-101, et seq.

Section 2. Applicability.

(a) These rules shall apply to and govern the construction, remodel, or expansion of healthcare facilities, on and after the effective date of these rules.

(b) The Office of Healthcare Licensing and Surveys may issue manuals, bulletins, or both, to interpret the provisions of these rules and regulations. Such manuals and bulletins shall be consistent with and reflect the policies contained in these rules and regulations. The provisions contained in manuals or bulletins shall be subordinate to the provisions of these rules and regulations.

(c) The incorporation by reference of any external standard intended to be the incorporation of that standards as it is in effect on the effective date of these rules and regulations.

Section 3. Definitions. The following definitions shall apply in the interpretation and enforcement of these rules. Where the context in which words are used in these rules indicates that such is the intent, words in the singular number shall include the plural and vice versa. Throughout these rules, gender pronouns are used interchangeably, except where the context dictates otherwise. The drafters have attempted to utilize each gender pronoun in equal numbers, in random distribution. Words in each gender shall include individuals of the other gender.

(a) "Department" means the State of Wyoming Department of Health, which is the authority having jurisdiction over all aspects of construction and remodeling, except electrical installation, of any state-licensed healthcare facility as defined in W.S. 35-2-901.

(b) "Council" means the council on fire prevention and electrical safety in buildings per W.S. 35-9-102 (a) (iv).

(c) "Healthcare facility" means any adult day care facility, ambulatory surgical center, assisted living facility, birthing center, boarding home, freestanding diagnostic testing center, home health agency, hospice, hospital, intermediate care facility for the mentally retarded, medical assistance facility, nursing care facility, rehabilitation facility and renal dialysis center, or as defined by W.S. 35-2-901, et seq.

(d) "NFPA" means the National Fire Protection Association.

(e) "Preliminary plans" means schematic design documents consisting of drawings and other documents illustrating the scale and relationship of project components that have been approved by the owner.

Effective: 04/03/2008

Section 4. Department of Health Jurisdiction.

(a) W.S. 35-9-121.1. Healthcare facilities; jurisdiction; delegation; rules.

(i) The Department has jurisdiction over all aspects of construction and remodeling, except electrical installation, of any state-licensed healthcare facility, as defined in W.S. 35-2-901.

(ii) The fire safety code requirements for the construction and remodeling of any state-licensed healthcare facility shall meet the minimum requirements established in the National Fire Protection Association 101 Life Safety Code or any other code required to meet federal fire and life safety certification. If any code requirements for federal certification conflict with the code of any other state or local governmental entity, the code required for federal certification shall prevail.

(iii) Upon written request from any county or municipality, the Department shall delegate plan review and inspection responsibilities to the county or municipality that has personnel who are certified pursuant to the applicable code. The Department shall transfer jurisdiction and authority by letter. The Department shall notify the governing body of the municipality or county of the minimum standards and requirements under this section, W.S. 16-6-501, and W.S. 16-6-502. The following shall apply:

(A) Any municipality or county may issue a certificate of occupancy for a healthcare facility. The certificate shall reference any code applied to the construction or remodeling of the facility;

(B) A municipality or county which has enforcement authority under this subsection may create its own appeals board to determine the suitability of alternate materials and types of construction. If a municipality or county has not created an appeals board, the Department shall establish an appeals board which includes representation from the Department and the Council.

(iv) After construction or remodeling of any healthcare facility, the Department shall have jurisdiction over the fire and life safety inspections required for federal certification.

Section 5. Construction Design Requirements for Healthcare Facilities.

(a) Wyoming Fire and Life Safety Minimum Standards for Healthcare Facilities.

(i) The 2006 Edition of "NFPA 101: Life Safety Code," and all codes and standards referenced therein, are adopted by reference.

(ii) The 2005 Edition of "NFPA 99: Standard for Health Care Facilities," and all codes and standards referenced therein, are adopted by reference.

(iii) NFPA 13, NFPA 70, NFPA 99, NFPA 101, and NFPA 110, referenced in these rules, are publications of the:

Effective: 04/03/2008

National Fire Protection Association
1 Batterymarch Park
P.O. Box 9101
Quincy, MA 02169-7471
Telephone: (617) 770-3000
URL: www.nfpa.org

(iv) Exceptions.

(A) Healthcare facilities that are excepted from “NFPA 101: Life Safety Code” are home health agencies and hospice facilities that do not provide inpatient care.

(B) Healthcare facilities that are excepted from “NFPA 99: Standard for Health Care Facilities” are adult day care facilities, home health agencies, and hospice facilities that do not provide inpatient care.

(C) Any healthcare facility for which the license has lapsed for not more than ten (10) years from the last date of operation and has continuously maintained the building to the 2000 Edition of the “NFPA 101: Life Safety Code” is exempt. Any construction, remodel, or expansion during the period of licensure lapse shall meet the requirements of these rules for new construction.

(b) Wyoming Design and Construction Minimum Standards for Healthcare Facilities.

(i) The "Guidelines for Design and Construction of Health Care Facilities – 2006_Edition," and all codes and standards referenced therein, are adopted by reference.

(ii) This is a publication of:

The American Institute of Architects
1735 New York Ave., NW
Washington, DC 20006-5292
Telephone: 1-800-242-3837
URL: www.aia.org
AIA Store
Telephone: 1-800-242-3837, option 4
Facsimile: (202) 626-7519
E-Mail address: bookstore@aia.org

(iii) Exceptions.

(A) Healthcare facilities that are excepted from the "Guidelines for Design and Construction of Health Care Facilities – 2006 Edition” are adult day care facilities, assisted living facilities, boarding homes, hospice facilities that do not provide inpatient care, home health agencies, and intermediate care facilities for the mentally retarded.

Effective: 04/03/2008

(B) Any healthcare facility for which the license has lapsed for not more than ten (10) years from the last date of operation and has continuously maintained the physical environment to the licensure standards in effect on the date of last licensure is exempt. Any construction, remodel, or expansion during the period of licensure lapse shall meet the requirements of these rules for new construction.

(iv) Requirements in addition to the "Guidelines for Design and Construction of Health Care Facilities – 2006 Edition" are as follows:

(A) In hospitals and nursing care facilities, the laundry shall have a soiled linen holding room equipped with handwashing facilities and a sink for soaking soiled items.

(B) In ambulatory surgical centers, birthing centers, hospices providing inpatient care, hospitals, and nursing care facilities, continuous mechanical exhaust ventilation shall be provided in all bathing rooms, toilet rooms, and soiled and wet areas.

(C) In hospitals and nursing care facilities, nurse call systems and equipment shall be tested against the provisions of IHS UL Standard 1069.

(D) In ambulatory surgical centers, birthing centers, hospices providing inpatient care, hospitals, and nursing care facilities, the air ducts that penetrate floors shall be provided with fire-rated dampers which are activated by smoke and heat.

(E) In ambulatory surgical centers, birthing centers, freestanding diagnostic testing centers, hospices providing inpatient care, hospitals, medical assistance facilities, nursing care facilities, rehabilitation facilities, and renal dialysis centers, all sinks shall be provided with spray heads or equivalent. Aerators shall not be used.

(F) In ambulatory surgical centers, birthing centers, freestanding diagnostic testing centers, hospices providing inpatient care, hospitals, medical assistance facilities, nursing care facilities, rehabilitation facilities, and renal dialysis centers, all handwash sinks shall have faucets which discharge at least five (5) inches above the spill level of the sink. Soap dispensers and hand drying apparatus shall be provided at each handwash sink.

(G) In nursing care facilities, bathing facilities shall include one (1) circulating type fixture for each nurses' station.

(H) In nursing care facilities, each resident shall have within his or her bedroom, minimum storage space to include a wardrobe, locker or closet, separated from other resident-shared spaces by a solid divider with a minimum dimension of 2' 4" x 1' 8", with a shelf and rod to permit hanging of full-length garments. In addition, a built-in or freestanding drawer unit which contains at least three (3) drawers, with a minimum inside drawer width of 24", shall be provided for each resident. Nightstand furniture is not considered storage space.

(I) Engineering Services and Equipment.

Effective: 04/03/2008

(I) In ambulatory surgical centers, birthing centers, freestanding diagnostic testing centers, hospices providing inpatient care, hospitals, medical assistance facilities, nursing care facilities, rehabilitation facilities, and renal dialysis centers, the boiler room or other rooms containing storage of combustible material shall not contain ventilation equipment, the main electrical switch board, or emergency electrical equipment.

(II) In ambulatory surgical centers, birthing centers, freestanding diagnostic testing centers, hospices providing inpatient care, hospitals, medical assistance facilities, nursing care facilities, rehabilitation facilities, and renal dialysis centers, building water system designs shall be in accordance with "Guideline 12-2000 - Minimizing the Risk of Legionellosis Associated with Building Water Systems," published by the American Society of Heating, Refrigerating and Air-Conditioning Engineers (ASHRAE).

(III) In ambulatory surgical centers, birthing centers, freestanding diagnostic testing centers, hospices providing inpatient care, hospitals, medical assistance facilities, nursing care facilities, rehabilitation facilities, and renal dialysis centers, all electrical receptacles located adjacent to sinks or other potentially wet areas shall be provided with ground fault circuit interrupter protection.

(IV) In ambulatory surgical centers, birthing centers, hospitals, medical assistance facilities, and nursing care facilities, a standby electrical generator shall be installed in all facilities to provide emergency lighting and power per the 2008 Edition of "NFPA 70: National Electrical Code," the 2005 Edition of "NFPA 99: Standard for Health Care Facilities," and the 2005 Edition of "NFPA 110: Standard for Emergency and Standby Power Systems."

(V) In ambulatory surgical centers, birthing centers, freestanding diagnostic testing centers, hospices providing inpatient care, hospitals, medical assistance facilities, nursing care facilities, rehabilitation facilities, and renal dialysis centers, exposed light bulb fixtures and heat lamps shall not be allowed. Globes, guards, lenses, and speciality coated bulbs shall be provided.

(VI) In ambulatory surgical centers, birthing centers, hospitals, medical assistance facilities, and nursing care facilities, supply and return air systems for patient and resident care areas shall be within a duct. Common returns using corridor, ceiling cavities, and attic spaces as return plenums are prohibited.

(1.) Exception: Remodeling of existing buildings where the remodeling causes no change of space use that previously existed and where the ventilation of the existing building complies with Section 7 (b) of these Rules.

(VII) In assisted living facilities where there are sleeping accommodations for more than sixteen (16) residents, the automatic sprinkler system shall be installed in accordance with "NFPA 13: Standard for the Installation of Sprinkler Systems."

(c) Wyoming Building Construction Minimum Standards for Healthcare Facilities.

Effective: 04/03/2008

(i) The 2006 Edition of the “International Building Code,” and all codes and standards referenced therein, are adopted by reference.

(A) Modifications to the 2006 Edition of the “International Building Code” applicable to these rules and regulations are as follows:

(I) Sections 103, 104, 105, 108, 110, 111, 112, 113, 114, and 115 are not applicable.

(II) Subsection 101.4.1, Electrical, is modified by deleting “ICC Electrical Code” and replacing with “National Electrical Code.”

(III) The Department is the building official where the phrase “building official” is used in the applicable Sections of the code.

(IV) Subsection 1805.2.1, “Frost protection,” is amended in all areas of the state outside the local government jurisdictions, the minimum depth from finished grade to the bottom of footings shall be three (3) feet for single-story wood or metal frame buildings, and four (4) feet for multistory or masonry buildings.

(ii) The 2006 Edition of the “International Fuel Gas Code,” and all codes and standards referenced therein, are adopted by reference.

(A) Modifications to the 2006 “International Fuel Gas Code” applicable to these rules and regulations are as follows:

(I) Sections 103, 104, 106 (other than 106.3.1), 108, and 109 are not applicable.

(II) Subsection 2702.1, “Installation”; Subsection 309.2, “Electrical”; Subsection 1003.2.11.2, “Illumination emergency power”; and Subsection 1003.2.10.5 “Power source”; are modified by deleting “ICC Electrical Code” and replacing with “National Electrical Code.”

(III) The Department is the code official where the phrase “code official” is used in the applicable Sections of the code.

(iii) The 2006 Edition of the “International Mechanical Code,” and all codes and standards referenced therein, are adopted by reference.

(A) Modifications to the 2006 “International Mechanical Code” applicable to these rules and regulations are as follows:

(I) Sections 103, 104, 106 (other than 106.3.1), 108, and 109 are not applicable.

Effective: 04/03/2008

(II) Subsection 301.7, "Electrical," is modified by deleting "ICC Electrical Code" and replacing with "National Electrical Code."

(III) The Department is the code official where the phrase "code official" is used in the applicable Sections of the code.

(iv) The 2006 edition of the "International Plumbing Code," and all codes and standards referenced therein, are adopted by reference.

(A) Modifications to the 2006 "International Plumbing Code" applicable to these rules and regulations are as follows:

(I) Sections 103, 104, 106 (other than 106.3.1), 108, and 109 are not applicable.

(II) The Department is the code official where the phrase "code official" is used in the applicable Sections of the code.

(v) The 2006 edition of the "International Fire Code," and all codes and standards referenced therein, are adopted by reference.

(A) Modifications to the 2006 "International Fire Code" applicable to these rules and regulations are as follows:

(I) Sections 103, 104, 105 (other than 105.4), 108, 109, 110, and 111 are not applicable.

(II) Subsection 604.1, "Installation," and Section 605, "Electrical Equipment, Wiring and Hazards," are modified by deleting "ICC Electrical Code" and replacing with "National Electrical Code."

(III) The Department is the code official where the phrase "code official" is used in the applicable Sections of the code.

(vi) The codes referenced above are publications of:

The International Code Council
500 New Jersey Avenue, NW, 6th Floor
Washington, DC 20001
Telephone: 1-888-422-7233
Facsimile: (202) 783-2348
URL: <http://www.iccsafe.org>

Section 6. Approvals, Inspections, Technical Assistance, Interpretations, and Plan Review.

(a) Plan Review.

Effective: 04/03/2008

(i) Submission of Plans and Specifications.

(A) Plans and specifications for new construction must be submitted to the Department for evaluation and approval. No construction shall begin prior to approval of the plans by the Department.

(B) Plans and specifications shall be submitted whenever:

(I) New construction of a healthcare facility is planned;

(II) An existing structure is being converted for use as a healthcare facility;

(III) There are changes to the functional operation and space usage of an existing healthcare facility;

(IV) Remodeling of an existing healthcare facility is planned.

(C) Based on a preliminary plan review, the final plan review may be waived at the discretion of the Department, based on the scope and nature of the project.

(D) Routine maintenance does not require the submission of plans and specifications. For the purpose of this subsection, "routine maintenance" means repair or replacement of existing equipment, room finishes and furnishings, and similar activities. Such repairs shall not include the cutting away of any wall, partition or portion thereof; the removal or cutting of any structural beam or load-bearing support; or the removal or change of any required means of egress, or rearrangement of parts of the structure affecting the egress requirements; nor shall ordinary repairs include addition to, alteration of, replacement or relocation of any standpipe, water supply, sewer, drainage, drain leader, gas, soil, waste, vent or similar piping, electrical wiring or mechanical or other work affecting health or general safety.

(E) Where equipment replacement and construction are to be performed in an emergency situation, the Department shall be notified within the next working business day. The approval for any work requiring plan approval shall be obtained for the work done for the emergency situation.

(ii) Preliminary Plans.

(A) One (1) set of preliminary plans, the functional program, and the Infection Control Risk Assessment, as required by the "Guidelines for Design and Construction of Healthcare Facilities – 2006 Edition," approved by the owner, shall be submitted to the Department for review and approval by the Department or by the Department's authorized representative prior to submitting final plans.

Effective: 04/03/2008

(B) After preliminary plans are approved, the final plans shall be submitted to the Department, or the owner may choose to retain an outside plan reviewer, at the expense of the facility, who has been qualified and approved by the department.

(C) The requirement for preliminary plans may be waived at the sole discretion of the Department, based on the nature of the project.

(D) Approval of preliminary plans expires twelve (12) months after the date of the Department's approval letter if the final drawings have not been submitted and approved. Preliminary plans shall be resubmitted to obtain a new letter of approval.

(iii) Final Plans.

(A) Prior to beginning work, the owner or owner's representative shall submit two (2) complete sets of plans and specifications to the Department for evaluation and approval. Alternately, the facility owner may choose to retain an outside plan reviewer, at the expense of the facility, who has been qualified and approved by the department. Sufficient stamps or metered postage to provide for the return of one (1) set of plans and specifications shall be included at the time of plan submission and attached to a label bearing the return address of the owner or owner's representative.

(B) When plans and specifications are submitted for review, they shall be-drawn to scale on substantial paper and shall be of sufficient clarity to indicate the nature and extent of the work proposed, and shall show in sufficient detail to indicate they conform to the provision of the statutes and the rules and regulations of the Department.

(C) If the plans and specifications are prepared by an architect or engineer, that professional must be licensed in the State of Wyoming.

(D) When the Department issues its final acceptance, the plans and specifications shall be stamped "REVIEWED AND ACCEPTED." The accepted plans and specifications shall not be changed, modified, or altered without authorization of the Department, and all work shall be done in accordance with the accepted plans. A set of the plans and specifications shall be returned to the owner or owner's representative, stamped "REVIEWED AND ACCEPTED," and shall be kept at the site of work, and shall be open to inspection.

(E) Any construction on a project prior to the Department's approval of the final plans shall only be permitted by written authorization from the Department. This type of approval shall be limited to foundation construction only.

(F) Stamped plans and specifications marked "REVIEWED AND ACCEPTED" do not authorize, allow, or approve the violation of any applicable code, law, or rules and regulations.

(G) All plan approvals issued for a project shall become invalid unless the construction commences within 180 days from the date on the approval letter issued by the Department. In addition, plan approvals shall become invalid if construction on a project is

Effective: 04/03/2008

suspended or abandoned for a period of 180 consecutive days. The Department may authorize, in response to a written request by the owner, one or more extensions of time for periods not to exceed 180 days each.

(H) The Department may suspend or revoke the approval/acceptance issued under the provisions of these rules and regulations if the Department believes the approval/acceptance was issued on the basis of incomplete or inaccurate information.

(I) Construction documents shall be submitted in accordance with Section 106 of the "International Building Code," Section 106.3.1 of the "International Fuel Gas Code," Section 106.3.1 of the "International Mechanical Code," Section 106.3.1 of the "International Plumbing Code," and Section 105.4 of the "International Fire Code." Separate drawings shall be prepared for each of the following branches of work: architectural, structural, mechanical, and electrical. The working drawings and specifications, in addition and as appropriate to the project, shall include or contain the following:

(I) Architectural Drawings.

(1.) Site plan showing all new topography: newly established levels and grades, existing structures on the site (if any), new buildings and structures, roadways, walks, and the extent of areas to be landscaped. All structures and improvements that are to be removed under the construction contract shall be shown.

(2.) Plan of each floor and roof.

(3.) Elevations of each facade.

(4.) Sections through the building.

(5.) Elevators and dumbwaiters. Drawings delineating shaft details and dimensions; sizes of cab platform and doors; travel distances, including elevation of landings; pit sizes; and machine rooms.

(6.) Kitchen, laundry, laboratories, special care areas, and similar areas shall be detailed at a scale to show the location, type, size, and connection of all fixed and movable equipment.

(7.) Scale details as necessary; scale details to one and one-half inches (1-1/2") to the foot may be necessary to properly indicate portions of the work.

(8.) Schedule of finishes.

(9.) List of applicable building codes.

(10.) A separate plan for each floor, including smoke compartmentation, exit signage, fire extinguishers, fire alarm devices, pull stations, sprinklered areas, fire barriers, and corridor protection reflecting "NFPA 101: Life Safety Code."

Effective: 04/03/2008

(II) Structural Drawings.

(1.) Plan of foundation, floors, roofs, and intermediate levels shall show a complete design with sizes, section, and the relative location of the various members, schedule of beams, girders, and columns.

(2.) Floor levels, column centers, and offsets shall be dimensioned.

(3.) Special openings and pipe sleeves shall be dimensioned or otherwise noted for easy reference.

(4.) Details of all special connection, assemblies, and expansion joints shall be given.

(5.) Notes on design data shall include the name of the governing building code, values of allowable unit stresses, assumed live loads, wind loads, earthquake load, and soil-bearing pressures.

(6.) For special structures, a stress sheet shall be incorporated in the drawings showing:

- a. Outline of structure;
- b. All load assumptions used;
- c. Stresses and bending moments separately for each kind of loading;
- d. Maximum stress and/or bending moment for which each member is designed, when not readily apparent from the mechanical drawings; and
- e. Horizontal and vertical reaction at column bases.

(III) Mechanical Drawings.

(1.) Heating, cooling, and ventilation plans, including:

a. Radiators, coils, and steam-heated equipment, such as sterilizers, warmers, and steam tables;

b. Heating and steam mains and branches with pipe sizes;

c. Diagram of heating and steam riser with pipe sizes;

Effective: 04/03/2008

furnaces with stokers and oil burners, if any;

- d. Sizes, types, and heating surface of boiler
- e. Pumps, tanks, boiler breeching and piping,
- f. Air conditioning systems with required equipment, water and refrigerant piping, and ducts;
- g. Supply and exhaust ventilating systems with connection and piping; and
- h. Air quantities for all room supply and exhaust ventilating duct openings.

(2.) Plumbing, drainage, and stand pipe systems plans including:

- a. Size and elevation of street sewer, house sewer, house drains, street water main, and water service into the building;
- b. Location and size of soil, waste, and vent stacks with connection to house drain, clean outs, fixtures, and equipment;
- c. Size and location of hot, cold, and circulating mains, branches, and risers for the service entrance and fixture connections;
- d. Gas, oxygen, and similar piped system;
- e. Standpipe and sprinkler system; and
- f. All fixtures and equipment that require water and drain connections.

(IV) Electrical Drawings.

(1.) Electrical service entrance with switches and feeders to the public service feeders, characteristics for the light and power current, transformers and their connection if located in the building.

(2.) Location of main switchboard, power panels, light panels, and equipment. Feeder and conduit sizes shall be shown with schedule of feeder breaker or switches.

(3.) Light outlets, receptacles, switches, power outlets, and circuits.

Effective: 04/03/2008

(4.) Telephone layout showing service entrance, telephone switchboard, strip boxes, telephone outlets, branch conduits, and public telephones.

(5.) Nurse call systems with outlets for beds, duty stations, corridor signal lights, annunciators, and wiring diagrams.

(6.) Fire alarm system with stations, signal devices, control board, and wiring diagrams.

(7.) Emergency electrical system with outlets, transfer switch, source of supply, feeders, and circuits.

(8.) All other electrically operated systems and equipment.

(iv) Special submittals.

(A) Automatic sprinkler systems. At least two (2) sets of the sprinkler system shop drawings, specifications, and calculations prepared by the installer shall be submitted for review and approval prior to the installation.

(B) Radiation Protection. Any project that includes radiology or special imaging equipment used in medical diagnosis, treatment, and therapy of patients, shall include plans, specifications, and shielding criteria, prepared by a qualified medical physicist. The plans shall be submitted and approved prior to the installation of the equipment.

(v) Plans and specifications shall be reviewed by personnel who are certified pursuant to the applicable code. Personnel who perform plan reviews shall, as a minimum, be certified as follows:

(A) Building Plans Examiner - certified by the International Code Council.

(B) Mechanical Plans Examiner - certified by the International Code Council.

(C) Plumbing Plans Examiner - certified by the International Code Council.

(D) Fire Plans Examiner - certified by the National Fire Protection Association.

(b) Inspections.

(i) The construction specifications shall require the contractor to perform tests to ensure all systems conform to the approved plans and specifications.

Effective: 04/03/2008

(A) It shall be the owner's responsibility to ensure qualified inspectors are retained to perform all required construction inspections throughout the course of the construction project. The owner may request inspection(s) by Department inspectors or may choose to retain outside inspectors, at the expense of the facility, who have been qualified and approved by the Department. Inspections shall be conducted in accordance with the following codes and shall be completed by personnel certified pursuant to the applicable code:

(I) Section 109 of the 2006 Edition of the "International Building Code."

(II) Section 107 of the 2006 Edition of the "International Fuel Gas Code."

(III) Section 107 of the 2006 Edition of the "International Mechanical Code."

(IV) Section 107 of the 2006 Edition of the "International Plumbing Code."

(V) Section 106 of the 2006 Edition of the "International Fire Code."

(B) Records of inspections shall be retained by the owner and shall be available for inspection by the Department. An inspection sign-off card shall be provided by the Department to be maintained at the construction site. A representative of the Department may periodically visit the site and conduct random inspections of construction elements to ensure conformance with approved plans and specifications.

(ii) Licensure Construction Survey.

(A) Requests for final inspection for licensure on a mutually agreed upon date between the owner and the Department shall be made in writing by the owner to the Department.

(B) Building System Certifications and Tests.

(I) The owner, as requested, shall submit to the Department test reports and certifications as determined by the Department, based on the scope and nature of the project.

(C) If deficiencies are found as a result of the licensure construction survey, the healthcare facility, as requested, shall submit a plan of correction for review and acceptance by the Department.

(D) Healthcare facilities shall not provide patient services in the construction, remodel, or expanded areas until written authorization to provide such services is provided by the Department.

Effective: 04/03/2008

(c) Technical Assistance. The owner or owner's representative may request technical assistance from the Department concerning the application of the codes, standards, and regulations in these Rules.

(i) Design and Professional Services. Project design and professional architect services requirements, including consultants, are provided in the Rules and Regulations of the Wyoming State Board of Architects and Landscape Architects.

(d) Interpretations. Requests for interpretations of Section 5. Construction Design Requirements for Healthcare Facilities, may be submitted to the Department. The following resources will be used by the Department to provide a formal interpretation: Centers for Medicare & Medicaid Services, National Fire Protection Association, International Code Council, and The American Institute of Architects Academy of Architecture for Health.

Section 7. Existing Building Licensure.

(a) Existing buildings, currently licensed, shall conform to Department construction rules in effect at the time of original facility licensure.

(i) Existing buildings which were previously licensed in the same licensure category, but for which the license has lapsed, shall be brought into compliance with the Department's construction rules in effect at the time of application for new license.

(b) Ventilation for Existing Buildings.

(i) Existing buildings licensed as a nursing care facility or a hospital before May 29, 1991, shall be designed, constructed, equipped, maintained, and operated in compliance with the ventilation requirements that were in effect at the time the facility was licensed.

(ii) An existing building, not previously licensed as a nursing care facility or hospital, shall comply with the ventilation requirements for new construction.

(iii) Additions, remodels, or changes of space use and service, shall comply with the ventilation requirements for new construction.

(A) If changes of space use and service or the remodeling of a wing or building exceeds fifty percent (50%) of the total square foot area of the nursing care facility or hospital, the entire nursing care facility or hospital shall be brought into compliance with the adopted codes and rules governing new construction in effect on the date the plans were approved by the Department. This provision is not intended to apply to minor or cosmetic renovations, such as paint, wall covering, or floor covering.

Section 8. Electrical Safety.

Effective: 04/03/2008

(a) Electrical installations shall be in accordance with W.S. 35-9-119, including plan reviews and inspections.

Contact:
Wyoming Department of Fire Prevention and Electrical Safety
Herschler Building, 1W, 122 West 25th Street
Cheyenne, WY 82002
Telephone: (307) 777-7288

Section 9. Variances.

(a) A healthcare facility may submit a request to the Department to obtain a variance from the above rules and regulations at any time.

(i) An applicant requesting a variance shall file a Request for Agency Action/Variance Application with the Department on the form furnished by the Department.

(ii) The Department may require additional information from the facility before acting on the request.

(iii) The Department shall act upon each request for a variance in writing within sixty (60) days of receipt of a completed request.

(b) If the Department grants a variance, it shall amend the license in writing to indicate that the facility has been granted a variance. The variance may be renewable or non-renewable. The healthcare facility shall maintain a copy of the approved variance on file in the facility and make the copy available to all interested parties upon request.

(i) The Department shall file the request and variance with the license application.

(ii) The terms of a requested variance may be modified upon agreement between the Department and the facility.

(iii) The Department may impose conditions on the granting of a variance as it determines necessary to protect the health and safety of the facility residents or patients.

(iv) The Department may limit the duration of any variance.

(c) The Department shall issue a written notice of agency decision denying a variance upon a determination that the variance is not justified. This decision shall be final and may not be appealed.

(d) The Department may revoke a variance if:

(i) The variance adversely affects the health, safety, or welfare of the facility residents or patients.

Effective: 04/03/2008

- (ii) The facility fails to comply with the conditions of the variance, as granted.
- (iii) The licensee notifies the Department in writing that it wishes to relinquish the variance and be subject to the rule previously varied.
- (iv) There is a change in the statute, regulations, or rules.

Section 10. Severability. If any portion of these rules is found to be invalid or unenforceable, the remainder shall continue in effect.

BIRTHING CENTER
Checklist for State Licensure

FACILITY NAME: _____

CITY: _____

CONTACT PERSON: _____

PHONE: _____ EMAIL: _____

Please mail or E-mail the following items to Healthcare Licensing and Surveys:

CHECK OFF	ITEM
	1. A completed license application form and required fee.
	2. Copy of governing body bylaws.
	3. Copy of policies and procedures for anesthetic agents.
	4. Copy of admission policies.
	5. Copy of policy on staffing requirements during delivery and after delivery.
	6. Copy of operational policies for informed consent, orientation and education of patients/family/support person regarding childbirth and newborn care, transfer and transport to hospital, discharge, follow-up care and postpartum evaluation after discharge, and registration of birth and reporting of complications.
	7. Copy of emergency preparedness plan.
	8. Copy of patient rights policy.
	9. Copy of written plan, and policies and procedures for quality management.

	10. Copy of medical records policy.
	11. Copy of policy for hiring employees. Please include verification of BLS certification, a DFS Central Registry Screen and a fingerprint-based national criminal background check for all current direct care staff.

FOR HEALTHCARE LICENSING AND SURVEYS USE ONLY

Date:	Surveyor Assigned to Review:
Surveyor Review Summary and Comments:	
Healthcare Surveillance Branch Chief Comments:	

Additional Information Needed: **Approved:** **Denied:**

Date: _____ **Signature:** _____

(08/06/2020-JV)



Town of Wheatland Board of Adjustments

Regular Meeting August 17, 2021

Call to Order – Roll Call

The special meeting of the Town of Wheatland Board of Adjustments was called to order at 7:00 p.m. on Tuesday, August 17, 2021, by Chairman Zimmerschied in the Town Hall Council Chambers.

Board Members Present: Chairman Zimmerschied, Member Seidel, Member Bullock (by phone), Member Tiltrum

Board Members Absent: None

Staff Present: Planner Clark

Declaration of conflicts of interest

Chairman Zimmerschied asked if there were any conflicts of interest in the matters to come before the board. None were noted.

New Business

Application for a Variance located at 1554 Gilchrist Street, Wheatland, Platte County, Wyoming; Original Town of Wheatland, Block 132, East half of Lot 10; to operate a commercial business in a residential district

Planner Clark reviewed the staff report 1554 Gilchrist Street, Wheatland, Wyoming has long been utilized and zoned as residential. The zoning map was included in the staff report. Previously there was a single-family dwelling on the lot that had been constructed in approximately 1916. After the dwelling was demolished and the lot cleared it was listed for sale by the Rite Agency. Alvaro Cespedes Amaya purchased 1554 Gilchrist Street, Wheatland, Wyoming in November of 2020. At the time of purchase the lot was vacant land and zoned residential. Mr. Amaya placed sheds for sale on the lot in mid-May and was then informed in June by Planning and Zoning Chairman Pile that he needed to contact the planning office to come into compliance with the code. Mr. Amaya met with Planner Clark in mid-June and was given the recommendation to rezone to General Business in conjunction with a Special Use Permit to come into compliance. Planner Clark also suggested asking some of the neighbors to rezone at the same time to reduce costs and to prevent a spot zone. Planner Clark noted that a Special Use Permit could not be applied for within the Residential District for this use, because it is not listed as an option under the Special Use Permit portions of the Residential District code. Mr. Amaya inquired about a variance in lieu of a rezone and Planner Clark noted that it was an option, but the rezone with special use permit would be a better option. Planner Clark supplied Mr. Amaya with both the Planning and Zoning and Board of Adjustments meeting and submittal deadline schedules. Mr. Amaya submitted a completed variance application on July 9, 2021. Agency comments received included Town Electrical Superintendent Pinneo: no issues; Police Chief Willadsen: The only concern I had was

traffic influx to the area. This question was answered in the information provided. I see no issue with this request; Building Inspector Nuchraks: With regards to Al Amaya's application for variance, it is my opinion the requirements for Fire Separation Distance as well as front setbacks be maintained regardless of current or future zoning. Fire Separation Distance - 10' Residential Zoning Front Setback - 25' General Business Zoning Front Setback - 10'; Town Clerk Wright: Mr. Amaya made no attempt to contact the Town of Wheatland until after his sheds were placed on the property. The request for a Variance for a Special Use Permit should be denied. Commercial business is not an allowed use in a residential district. Mr. Amaya should request a zoning change.

Planner Clark added:

1554 Gilchrist Street, Wheatland, Wyoming is located within the Residential District zone, which has the following setbacks: front 25 feet and rear and side yard 6 feet. 1554 Gilchrist Street is mostly surrounded by residential single-family dwellings and does have a bank (now closed), care facilities, hardware store, and equipment sales, parts, and service within proximity. The west half of Lot 10 of Block 132 (Jan's Cut n Yak) and Lots 6 and 7 of Block 133 (previously Banner Capital) have long been utilized for businesses and have operated within the district with the issuance of Special Use Permits and the allowed use of Home Occupation. Mr. Amaya placed sheds for sale on the vacant lot in May 2021, the sheds are within the front setback and separation to meet fire code may also need addressed. Part of Mr. Amaya's due diligence as a buyer should have been to review the zoning of the lot and the allowed uses before and after purchase. By obtaining this information prior to purchase Mr. Amaya's may have changed his mind during the purchase process or prevented him from asking for retroactive permission. If Mr. Amaya's request is denied, the Planning Office in conjunction with the Building Inspector will start the violation processes, which will give Mr. Amaya ample time to remove or relocate the structures. Wheatland is growing and new businesses are an asset to the Town; however, affordable starter homes are needed to support our younger residents and the land that the business is located on should be utilized in accordance with the Town Municipal Code. In this instance to avoid spot zoning, the best option would be for the property owners to collaborate and rezone all of Lot 10 Block 132 and Lots 6 and 7 of Block 133 to General Business or for a small starter home to be constructed on the lot. Gilchrist Street is a wide main access street to Wheatland's Downtown Historic District and is a great location for area businesses and young families. General Business District zoning would increase property value and allows for more business opportunities without the need for permitting as listed in the municipal code and meeting packet. It is the opinion of the Planning Office that Mr. Amaya's request for a variance to operate a commercial business to sell sheds within a Residential District be denied with the recommendation to rezone or relocate.

Mr. Graves spoke in opposition of Mr. Amaya's request stating that most of his concerns were addressed in the planning report but was disappointed in Mr. Amaya going forward with the usage and then asking for forgiveness later. Mr. Graves stated he is not against the business or the location but is of the opinion that it should be done above board from the beginning rather than retroactively.

Mr. Amaya spoke in favor of his request stated that he would rezone if that was necessary.

Member Seidel asked for clarification on the business to the west. Planner Clark noted that it was an allowed use under home occupation. Member Tiltrum and Chairmain Zimmerschied added additional history for use and occupancy of the parcel to the west.

Member Seidel asked if a temporary approval for usage while rezoning was an option. Planner Clark noted that an expiration date could be placed on a variance. Member Seidel asked about rezone timeframe. Planner Clark noted that the rezone application, meeting, and ordinance process could be completed within 5 months, but Mr. Amaya would need to have, at the very least, his neighbor to the west included in the rezone request or the request would have to be denied for being an illegal spot zone.

Mr. Amaya asked if including CH Brown in the rezone would be an option. Planner Clark noted that the CH Brown property is not contiguous to Mr. Amaya's property and the property to the east would still need to be included in the rezone, but CH Brown would need to keep their zoning as Highway Business to continue the same usage as they have currently.

Member Seidel asked if additional properties to the north could be included in the rezone. Planner Clark noted that they could be included in the rezone and additional properties to the south as well, but the properties currently utilized as residential would not benefit from a rezone at this time.

Planner Clark asked Mr. Amaya if he had plans to put up a sign. Mr. Amaya stated that he planned on putting up a sign. Planner Clark noted that he will need to coordinate with the planning office to obtain a sign permit and the building inspector for a building permit. Mr. Amaya asked if he could place a banner instead. Planner Clark noted that banners are considered temporary sign and have a time limit applied to them. Mr. Amaya asked if he could put up the banner than take it down for a month and then place it back up. Planner Clark noted that temporary is not defined in the code, but that practice is frowned upon, and a sign permit could still be required. Mr. Amaya stated that he planned to put up an eight-foot by four-foot sign. Planner Clark recommended meeting to review the sign requirements to review sign size limitations.

Motion by Member Seidel with a second by Member Tiltrum to approve a temporary variance located at 1554 Gilchrist Street, Wheatland, Platte County, Wyoming; Original Town of Wheatland, Block 132, East half of Lot 10; to operate a commercial business in a residential district until the end of May 2022 with the recommendation to rezone no later than May 2022.

Upon roll call the vote on the MOTION was:

YES: Member Seidel, Member Tiltrum

NO: Member Bullock

MOTION DECLARED CARRIED

Citizen Comments

None

Approval of Minutes

Approval of Minutes – December 15, 2020

Planner Clark noted adding the motion line after the variance vote and updating the footer to the correct date.

Motion by Member Seidel with a second by Member Bullock to approve the minutes of the previous December 15, 2020 as amended.

Upon roll call the vote on the MOTION was:

YES: Chairman Zimmerschied, Member Seidel, Member Bullock, Member Tiltrum

NO: None

ABSENT: None

MOTION DECLARED CARRIED

Board Discussion

Planner Clark supplied the board with the workshop packet for the August 18, 2021 joint planning and zoning, board of adjustment workshop.

Adjournment

Chairman Zimmerschied asked if there were any other topics for discussion. Hearing none Chairman Zimmerschied adjourned the meeting at 7:35 p.m.

Planner Clark

Town of Wheatland

Chairman Zimmerschied

Board of Adjustments