Introduction

The Office of Licensing, Certification, and Regulation (OLCR) conducts thousands of life-safety inspections each year for settings located throughout Arizona. While most of these inspections are for foster homes, OLCR also inspects group homes and shelters licensed as child welfare programs and Home & Community Based Services (HCBS) contracted by the Division of Developmental Disabilities (DDD).

As part of the licensing and certification process, OLCR will schedule an inspection for your setting. The inspector will need to access each room and will need to look in storage areas to verify compliance with the life-safety rules. The inspector will also look at the surrounding property, including barns, sheds, and workshops. The inspection conducted by OLCR typically takes 30 to 45 minutes to complete.

If a rule violation is cited, the inspector will work with you to identify the necessary correction. You may make corrections while the inspector is present. If the correction will require time or resources not available at the time of the inspection, verification may be delegated to the agency you’re working with to obtain your license or certification, although, some corrections may need to be verified by a return trip conducted by OLCR.

This booklet is intended to make the rules easier to understand so that you can prepare for a life-safety inspection. If you have additional questions about the inspection requirements, please contact our office at (602) 542-9000 or toll-free at (888) 229-1814, or via e-mail sent to: olcrinspect@azdes.gov

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A.A.C. Title 6, Chapter 18, Article 1

Definitions

A **care provider** is a person licensed or certified to provide care or supervision in a home or program that is regulated by OLCR.

A **firearm** is a handgun, pistol, revolver, rifle, shotgun, or other weapon that is designed to expel a projectile by the action of an explosive.

A **hazard** is a condition or situation that may cause or result in physical injury or illness to a child or vulnerable adult.

The **individual receiving care** means a child or adult who receives services or is eligible for the services listed at the beginning of Article 7 (R6-18-701).

A **Life-Safety Inspection** is an inspection of the premises by OLCR to verify compliance with standards intended to safeguard children and vulnerable adults from fire hazards and from other hazardous conditions.

A **lock** is a device operated by a key, combination, magnet, or keycard to safeguard medications, swimming pools, and highly toxic substances.

**Medication** refers to both prescription and over-the-counter remedies approved as drugs by the U.S. Food and Drug Administration (FDA).

A **mobile home** is a trailer that is mounted on wheels or a platform with utility connections exposed under the trailer.

**OLCR** is the Office of Licensing, Certification, and Regulation, which is based in the Arizona Department of Economic Security. OLCR is responsible for licensing and certifying many DES programs, including foster care, child welfare group homes, and services for individuals with developmental disabilities.

**Pool** means any natural or man-made body of water that:

- Could be used for swimming, recreational, or decorative purposes;
- Is greater than 18 inches in depth; and
- Includes swimming pools, spas, hot tubs, fountains, and fish-ponds.

**Safeguard** means to take reasonable measures to eliminate the risk of harm to an individual receiving care. Where a specific method is not otherwise prescribed in this Article, safeguarding may include:

- Locking up a particular substance or item;
- Putting a substance or item out of reach;
- Erecting a barrier that prevents an individual receiving care from reaching a particular place, item or substance; or
- Providing supervision.
Setting means:

- The home or building used to provide care or supervision; and
- The surrounding property and buildings that are owned, leased, or controlled by the care-provider.

Skirting is the barrier around the base of a mobile home that is intended to protect utility connections from damage or unauthorized contact.

A Slip-resistant surface means the flooring provides friction to help prevent falls when the surface is wet. A slip resistant surface may be achieved by rippling or corrugating the surface, applying textured strips, installing a secured carpet, using rubber mats, and other similar measures.

Trigger locked means a firearm has been rendered temporarily or permanently inoperable by blocking the firing or discharge mechanism for the firearm with a locked device.

UL Approved means an electrical device bears the safety certification mark of a recognized testing laboratory, such as UL (Underwriters Laboratories) or ETL (Electro-Technical Laboratory).

A.A.C. Title 6, Chapter 18, Article 7 Life-Safety Inspection

R6-18-701. Applicability

Intent of this rule:

To specify the types of settings OLCR is authorized to inspect for the purpose of licensure or certification.

You must have a life-safety inspection and ensure continuous compliance with these standards if you are licensed or certified as:

- A foster home;
- An adult developmental home;
- A child developmental foster home;
- A setting providing home & community based services (HCBS) for individuals with developmental disabilities; or
- A child welfare agency operating a residential group care facility or shelter care facility.

This set of Life-Safety standards does not apply to outdoor experience programs or to group homes for individuals with developmental disabilities.
R6-18-702. General Condition and Cleanliness of the Setting

Intent of this rule:

The condition of the setting must not pose a hazard to children or vulnerable adults. The life-safety inspection is not a “white glove test” – our focus is on safety.

Requirements:

You must ensure the interior and exterior of the setting are maintained in good repair and do not constitute a hazard.

Damage that constitutes a hazard includes:

- Broken glass;
- Surfaces that are rusted, have sharp or jagged edges, or have nails protruding;
- Holes in walls, ceilings, or floors; or
- Broken furniture, fixtures, appliances, or equipment.

The setting must be clean to the degree that it does not constitute a hazard. Hazards include rotting food, stale or accumulated urine or feces, or mold.

- Garbage must be removed from the setting at least once each week.
- The setting and outside play areas must be free of excessive accumulations of refuse or debris, including stacks of old newspapers, broken furnishings, rusting car parts, etc.
- Play areas and therapy equipment must be in good repair.

The life-safety rules don’t contain a list of allowed/prohibited equipment, however, the equipment you have must be in safe condition. We recommend that you check with the Consumer Product Safety Commission (C.P.S.C.) for their recommendations on safe usage and to confirm that your equipment has not been recalled.

Go to www.cpsc.gov for information on trampolines, diving boards, swings, bicycles, and other recreational equipment.

- Water in a pool on the premises must be clear enough to see through the water to the bottom surface of the pool. Stagnant water is a breeding ground for mosquitoes. The inspector will report “green” pools (stagnant water in which algae is growing) to the County Health Department.
- The setting and outside play areas must be free of insect and rodent infestation, or the setting must have an ongoing system to eliminate insects or rodents.
R6-18-703. Safeguarding* Against Hazards

Intent of this rule:

There are potential hazards in every setting. The intent of the rule is to have systems and safeguards in place that will minimize the risks posed by common hazards.

Requirements:

You must ensure:

- General household **cleaning supplies** are **safeguarded** to prevent unsafe or improper use. Household cleaning supplies are not intended for ingestion, but generally will not cause serious bodily harm or death if improperly used. Examples of household cleaning supplies include diluted spray cleaners, laundry detergent, furniture polish, and dishwasher detergent. We generally recommend that the system for safeguarding include storing these supplies up high so they are out of reach of young children. If stored on ground level cabinet, an actual **lock*** must be used as the form of safeguarding. The use of plastic levers on ground level cabinets will not be accepted as sufficient for safeguarding.

- **Highly toxic substances** are maintained in **locked** storage. Highly toxic substances include bleach, ammonia, drain cleaner, pesticides, weed killer, gasoline, lighter fluid, radiator fluid, spray paint, turpentine, pool chemicals and other substances that can cause serious bodily harm or death if improperly used. A lock requires the use of a magnet, key or combination to unfasten it.

- Access to **personal grooming supplies** is not restricted unless the case plan or service plan for an individual receiving care specifically restricts such access. Personal grooming supplies include toothpaste, hand-soap, shampoo, and deodorant.

Latches and other devices that can be opened by hand (i.e. squeezing, pushing, twisting) are not considered locks.

*A lock requires the use of a magnet, key or combination to unfasten it.
• **Weapons**, including crossbows, stun guns, air guns, BB guns, paint ball guns, swords, and hunting knives are safeguarded to prevent unsafe or improper use.

• Firearms are:
  - Unloaded,
  - Trigger locked, and
  - Kept in a locked storage container that is made of unbreakable material (wood or metal cabinets are OK but glass cabinets are not acceptable).

• **Ammunition** is maintained in locked storage that is separate from firearms.

According to the Children’s Defense Fund, firearm deaths of children and teens increased more than 10% in Arizona in 2004. Since 1979 more than 100,000 children and teens in the United States have died of gunshot wounds.

• All **dogs** older than 6 months have current rabies vaccination. Vaccination records must be maintained in the setting.

• **Animals** in the setting or on the property do not pose a hazard due to behavior or disease.

  **Dogs:** The life-safety rules do not include a list of prohibited breeds, but the inspector will observe the behavior or dogs on your property and will cite examples of aggression as rule violations.

  **Reptiles** carry the salmonella bacteria in their intestinal tract and may shed the bacteria in their feces. Young children and vulnerable adults may experience life-threatening symptoms if infected by the salmonella bacteria. The Centers for Disease Control and Prevention recommend that children under five avoid contact with reptiles; and that households with children under the age of one not own reptiles [http://www.cdc.gov/HEALTHYPETS/spotlight_an_turtles.htm](http://www.cdc.gov/HEALTHYPETS/spotlight_an_turtles.htm).

• Ramps, bathtubs, and showers have **slip-resistant surfaces**.

• If the setting has **handrails** or **grab-bars**, they are securely attached and stable.

• If the setting is a **mobile home**, skirting is intact around the base of the setting. Pictured below are two examples of mobile homes. The one on the left does not have the required skirting; the one on the right meets the standard for skirting.
R6-18-704. Storage of Medication

Intent of this rule:

Medications can pose a serious, even deadly, hazard to children and vulnerable adults. The intent of this rule is to minimize the risk by restricting access to medications.

Requirements:

You must ensure:

- All medications (prescription and over-the-counter) are maintained in locked storage, with the exception of the following:
  1. Medication that may be accessed by an individual receiving care, as specified in that individual’s case plan or service plan; and
  2. Medication that must be readily and immediately accessible, such as an asthma inhaler or Epi-pen.
  3. Medication that may be unlocked due to the above exceptions still must be safeguarded to prevent improper use.

Do vitamins and herbal remedies need to be locked? Vitamins and herbal remedies aren’t medications, but they can pose a serious hazard if used improperly. According to the U.S. Food and Drug Administration, iron supplements are the #1 cause of poisoning deaths for young children! At a minimum, vitamins and vitamins must be safeguarded (stored out of reach of young children), but it’s recommended that they be stored with medications: under lock & key.

- Medication that has to be refrigerated is also kept in locked storage. This should be done without preventing access to refrigerated food. Consider keeping a small locked container on hand to be used for storing medication in the refrigerator. If you maintain a large supply of refrigerated medication, consider using a locked dorm-sized refrigerator solely for medication storage.

- Programs licensed as child welfare group homes or shelters must safeguard medications using a double-lock system. Examples of a double-lock system include a locked box stored inside a locked cabinet or a cabinet with two separate locking devices. A locked room will not be accepted as one of the two required locks unless the room is used exclusively for the storage of medication.
R6-18-705. Safe Appliances

Intent of this rule:

*Appliances in the setting must be in safe working condition and create a safe environment for children and vulnerable adults.*

Requirements:

You must ensure:

- Safe and functioning appliances are available for food **refrigeration**, if food is stored for individuals receiving care. Refrigerators must maintain food below a temperature of 45° F to minimize spoilage. While you are not required to have a thermometer in your refrigerator, it’s a great way for you to monitor the temperature. Freezers must keep food frozen solid (not mushy).
- Safe and functioning **cooking** appliances are available, if food is cooked or prepared for individuals receiving care.
- Electrical **lighting** is available in bedrooms, living areas, and rooms used to provide services. Lighting must be sufficient to perform normal activities. Light sockets must be equipped with light bulbs or safely covered to prevent electrical shock.
- Adequate **heating, cooling, and ventilation** are available in bedrooms, living areas, and rooms used to provide services. Temperatures outside the range of 65° - 85°F are indicators of inadequate heating or cooling.
- At least one operable **telephone** is available in the setting whenever individuals receiving care are present in the setting. “Telephone” includes cell phones as well as phones with traditional land lines.
- If the setting has a clothes **dryer**, the dryer is safely vented with a **non-flammable vent hose**. A non-flammable vent hose is usually made of aluminum or other metal. A vent hose made of plastic or fabric (usually white or cream in color) is flammable and will not be accepted.

According to the Consumer Product Safety Commission, each year there are more than 15,000 home fires associated with clothes dryers. Most occur when lint builds up in the vent hose. Prevent fires by cleaning the lint screen with each load and periodically cleaning the vent hose and exhaust duct.

- A **carbon monoxide** (CO) detector-alarm is functioning on each level of the setting that has an appliance or heating device using combustible fuel such as gas, oil, kerosene or wood. Examples of such fuel burning appliances include fireplaces, pot-bellied stoves, gas dryers, gas hot water heaters, and gas stoves. Manufacturers usually recommend that CO detectors be installed more than 12 feet away from fuel burning appliances and near the bedrooms in a home environment.
Carbon monoxide (CO) is a colorless, odorless, and poisonous gas. Any fuel-burning appliance can be a potential source of fatal or hazardous CO levels. Charcoal grills and gasoline powered generators should never be used within a setting.

- If a **portable heater** is in the setting, it has a protective covering to keep hands and objects away from the heating element and, it is:
  1. Electric & U.L. Approved;
  2. Equipped with a tip-over shut-off switch;
  3. Placed at least 3 ft from curtains, paper, furniture, and any flammable object when in use;
  4. Not used as the primary source for heat in the setting; and
  5. Not used in bedrooms.

**R6-18-706. Electrical Safety**

**Intent of this Rule:**

*To reduce the risk of electrical shock or fire resulting from the unsafe use of electricity.*

**Requirements:**

You must ensure:

- Electrical outlets are not overloaded.
- **Major appliances** are plugged directly into **grounded outlets**. Major appliances include refrigerators, freezers, dishwashers, stoves, ovens, washers, and dryers. Major appliances must not be plugged into extension cords.
- Mid-sized appliances, which include computers, televisions, and stereo equipment, are plugged directly into grounded outlets or into power strips that are plugged into grounded outlets.
- Electrical cords are in good condition; no broken or frayed cords are in use.
- Electrical panels and outlets are in good condition; no wiring is exposed and outlet covers are in place.
- Extension cords are not used on a permanent basis. An extension cord used greater than 90 days is viewed as permanent.

The Consumer Product Safety Commission (CPSC) estimates that 4,000 injuries are treated each year in emergency rooms due to extension cords. About half the injuries are the result of people tripping over extension cords. More than 500 of the injuries involve children under the age of five and electrical burns to the mouth account for half of these injuries. CPSC also estimates that about 3,300 residential fires each year originate from extension cords).
R6-18-707. Plumbing Requirements

Intent of this Rule:

To ensure safe and sufficient plumbing is available within the setting.

Requirements:

You must ensure:

- A continuous source of **safe drinking water** is available to individuals receiving care.
- If you have a non-municipal source of water, your water must be tested to determine whether it is safe for consumption. The water sample must be tested by a state-certified laboratory for the presence of **total coliform**. If the water sample is not within acceptable levels for safe drinking water, then you must provide OLCR with a signed, written statement that:
  1. Certifies that individuals receiving care will be provided with safe drinking water, and
  2. Describes your plan for obtaining safe drinking water.
- A list of state-certified laboratories may be obtained from: https://app.azdhs.gov/bfs/labs/elbis/drinkingwatertestinglabsvs2/drinkingwaterresearchcontentpage.aspx
- The **sewage disposal** for the setting must be functioning. If the setting has a septic tank, it must be in good working order, with no visible signs of leakage on the ground.
- At least one working toilet, wash basin, and shower or tub must be available for every ten persons living or receiving care in the setting at the same time. Only settings that provide overnight care are required to have a shower and a tub.
- The **hot water temperature** in areas for bathing must not exceed 120°F.

Each year, approximately 3,800 injuries and 34 deaths occur due to scalding from excessively hot tap water. The majority of these accidents involve the elderly and children under the age of five. Most adults will suffer third-degree burns if exposed to 150 degree water for two seconds. Burns will also occur with a six-second exposure to 140 degree water or with a thirty second exposure to 130 degree water.

How do you test the water temperature?

Run hot water at the closest faucet to the water heater for at least three minutes. Then fill a glass and immediately immerse a candy or cooking thermometer in the water.

**How do you adjust the temperature on a hot water heater?**

If the temperature is greater than 120°, you can adjust the temperature dial on your hot water heater. It may take up to 24 hours for temperature of the water in the tank to lower, so you should test the temperature again in 24 hours and continue to adjust the dial until you get a 120° reading.
R6-18-708. Fire Safety

Intent of this Rule:

To reduce the risk of fire and to ensure safe evacuation in the event of a fire.

Requirements:

You must ensure:

- The address for the setting is posted and visible from the street, or the local emergency response team, such as the local fire department, is notified of the location of the setting in writing, with a copy of this notification maintained in the setting.
- The exit routes for the setting are clear of obstructions that could prevent safe and rapid evacuation.
- Each bedroom used by individuals receiving care in the setting must have at least two routes for evacuation; at least one of these exits routes must lead to the outside.
- The locks on exterior doors and windows, including the front door, screen doors, and bars on windows, are equipped with a quick release mechanism. A quick release mechanism is a lock that can be opened from inside the setting without special knowledge (such as a combination) or equipment (such as a key). The Department may grant an exception to this requirement for a double-key deadbolt on a door if all three of the following conditions exist:
  1. There is breakable glass within 40 inches of the interior locking mechanism; and
  2. There is another door leading directly to the outside that is equipped with a quick release mechanism and located on the same level of the setting; and
  3. The key for the deadbolt is permanently maintained in a location that is:
     a. Within 6 feet of the locking mechanism,
     b. Accessible to all household members,
     c. Reviewed with persons residing in or receiving care in the setting, and
     d. Identified on the emergency evacuation plan.
- Settings authorized to provide care or services to 6 or more individuals must practice and document the completion of an evacuation drill at least once every 3 months.
- Flammables and combustibles are stored more than 3 feet from water heaters, furnaces, portable heaters, and fireplaces, and wood-burning stoves. It is recommended that the danger-zone be marked off around water heaters and furnaces as a reminder to not store flammables within 3-feet of the appliance.
- If the setting has a working fireplace or wood-burning stove, it is protected by a fire screen or tempered glass door.
• A working smoke detector is installed high on a wall or on the ceiling in each of the following areas.
  1. In the main living or program area of the setting;
  2. In each bedroom, if overnight care is provided; and
  3. On each level of a multiple-level setting.

• Don't install smoke detectors within six inches of where walls and ceilings meet or near heating and cooling ducts. Detectors located in these areas may not receive the flow of smoke required to activate the alarm. Smoke detectors are not recommended for kitchens, bathrooms, or garages where cooking fumes, steam, or exhaust could set off false alarms or for attics and unheated spaces, where humidity and temperature changes might affect a detector's operation.

• A functioning fire extinguisher with a rating of "2A 10BC" or greater is available near the kitchen area. If the setting has multiple levels at least one functioning fire extinguisher with a rating of "2A 10BC" or greater is available on each level (the rating may be higher, such as 3A 20BC, but it may not be lower, such as 1A 5BC). The higher the rating number on a fire extinguisher, the more fire it can put out, but keep in mind that high-rated units are often heavier. Make sure you can hold and operate the extinguisher you are buying.

What does the ABC rating mean?

Type A label is generally noted as a triangle. This extinguisher is used for ordinary combustibles such as cloth, wood, rubber and many plastics.

Type B label is generally noted as a square. This extinguisher is used for flammable liquid fires such as oil, gasoline, paints, lacquers, grease, and solvents.

Type C label is generally noted as a circle. This extinguisher is used for electrical fires such as in wiring, fuse boxes, and other electrical sources.

• A written emergency evacuation plan is developed to provide guidance on the safe and rapid evacuation of the setting. You may use the form on the following page to develop your emergency evacuation plan.

An emergency evacuation plan must:

1. Identify two routes of evacuation from each bedroom used by individuals residing in or receiving care in the setting. At least one of the exit routes for these bedrooms leads directly to the outside of the setting.

2. Identify the location of fire extinguishers and fire evacuation equipment, including rope or chain ladders and emergency lighting, as applicable;

3. Designate a safe meeting place outside the setting; and

4. Be maintained in the setting to review with individuals residing in or receiving care in the setting.
Emergency Evacuation Plan

In the event of a fire, call 911 or...

Address: ______________________________________________________________________

Use the space below to create your emergency evacuation plan:

- Draw a floor plan showing all doors and windows.
- Use arrows to mark two routes of evacuation from each bedroom. One route must lead directly to the outside.
- Identify the location of fire extinguisher(s).
- If you have special evacuation equipment, such as a rope ladder, the location of the special equipment must be specified on the floor plan.
- Identify a safe meeting place outside where everyone can be accounted for.
R6-18-709. Pool* Requirements

Intent of this Rule:

To reduce the risk of drowning by restricting unsupervised access to pools/spas by young children and vulnerable adults and by ensuring adequate safety equipment is readily available for other settings with pools.

Drowning claims the lives of nearly 3,000 people every year. 20% of children hospitalized for near drowning suffer severe, permanent neurological disabilities.

Requirements:

Pool enclosure and safety equipment requirements are not applied to settings with a semi-public pool; these pools are regulated by the County. R6-18-709 is applicable to pools located on private property.

- For settings with a pool that is deeper than 4 feet, the care provider must ensure the following safety equipment is available within the pool enclosure:

  - A ring buoy attached to a sturdy rope that measures half the distance across the pool plus 10 feet.
  - A shepherd’s crook attached to a pole

If you have a pool and you provide care or services to a child age 5 and under or to an individual with developmental disabilities:

- You must ensure the pool is fenced with an enclosure that meets the following requirements (Also see diagram on page 14):
  1. The exterior side of the fence is at least 5 feet high;
  2. If the fence is chain link, the mesh measures less than 1 ¾ inches horizontally;
  3. Openings between vertical bars and panels and between the ground and the fence must measure less than 4 inches.
  4. The exterior side of the fence is free of hand holds or foot holds or other means that could be used to climb over the fence;
  5. Gates for the fence are self-closing, self-latching, and open out or away from the pool.
  6. The gate latch is at least 54” above the ground and is equipped with a key or combination lock.
  7. The gate to the enclosure is locked, except when there is an adult within the enclosure to supervise the pool and spa area.

- You must ensure the following, if the enclosure attaches to the house or building:
  1. The enclosure does not interfere with safe egress from the setting.
  2. A door from the setting does not open within the pool enclosure.
  3. A window from the setting and located in a room that is designated as a bedroom for an individual receiving care is not positioned within the pool enclosure.
  4. Other windows from the setting and within the pool enclosure are permanently secured to open no more than 4 inches.

*See the definition of ‘pool’ on page 1
- Whether the enclosure is constructed of mesh, chain link, wood, or wrought iron, it must require special tools to dismantle any portion of the fence.
- The pool gate must not be propped open and the pool enclosure must not be dismantled, in part or in whole, during the term of your license or certification.

**Meets minimum standards**

- The distance between the ground and the top horizontal bar must be at least 60 inches.
- The distance between lower and upper horizontal bars must be at least 48 inches.
- Openings in the fence must be small enough so that a spherical object of four inches in diameter cannot pass through.

**Does not meet minimum standards**

- 48 inches measured from the ground to the top horizontal bar. This does NOT meet the minimum height standard for a pool fence.
- 28 inches – this would NOT pass the inspection because it is less than 48 inches.
- A 4" ball easily passes between the ground and the lower horizontal bar.
**LIFE-SAFETY INSPECTION REPORT**

**Name:**

**Date:**

**Time:**

- **Address:**
- **City:**
- **Telephone:**
- **Zip:**
- **Licensing/Certification Agency:**

**Setting:**
- FHL Licensed
- CWL Licensed
- Group home or Shelter
- HCBS Certified
- Respite, Day Program or Therapy

### General Conditions & Cleanliness (R6-18-702):
1. Interior & exterior in good repair and free of damage that poses a hazard.  
2. Play areas and therapy equipment are in good repair.  
3. Setting is clean to the degree that the condition does not constitute a hazard.  
4. Garbage is removed from the setting & premises at least once each week.  
5. The setting and outside play areas are free of insect and rodent infestation.  

### Safeguarding Hazards (R6-18-703):
1. Setting has a system to lock highly toxic substances.  
2. Setting has a system to safeguard cleaning supplies.  
3. Weapons are safeguarded.  
4. Firearms are locked in an unbreakable container.  
5. Firearms are trigger-locked or rendered inoperable.  
6. Ammunition is locked separate from firearms.  
7. Bathtubs/showers and ramps have slip resistant surfaces.  
8. Handrails and grab-bars are securely attached and stationary.  
9. Skirting is intact around the base of the setting, if a mobile home.  
10. Animals do not pose a hazard due to behavior, disease, etc.  
11. Evidence is available in the setting for each dog's current rabies vaccinations.  

### Storage of Medication (R6-18-704):
1. Prescription and over-the-counter medications in the setting are locked.  
2. Medications that must be readily available or may be accessed per an individual's case plan are safeguarded.  
3. Medications that must be refrigerated are locked, without preventing access to refrigerated food.  
4. Medications are double-locked in programs licensed by CWL.  

### Safe Appliances (R6-18-705):
1. Appliances for refrigerating & cooking food are functioning and safe.  

#### Refrigerator temperature: _°F_

2. Setting has sufficient lighting to perform normal activities in bedrooms and living/program areas.  

#### Interior temperature: _°F_

3. Setting has adequate heating, cooling, & ventilation in bedrooms and living/program areas.  

4. Setting has an operable telephone.  
5. The clothes dryer is safely vented with a non-flammable vent hose.  
6. Each portable heater meets the following standards.  

### Electrical Safety (R6-18-706):
1. Electricity/wiring appears safe.  
2. Light sockets have light bulbs/are safely covered to prevent electrical shock.  
3. Electrical cords are in good condition; no broken or frayed cords are in use.  
4. Electrical panels and outlets are covered and have no exposed wiring.  
5. Extension cords are not used on a permanent basis.  
6. Electrical outlets are not overloaded.  
7. Major appliances are plugged directly into grounded outlets.  
8. Mid-sized appliances are plugged into grounded outlets/power strips.  

### Inspector's Comments:

### Date Corrected:

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**Distribution:** ORIGINAL – OLCR Inspector; COPY – Licensing/Certification Agency; COPY – Care Provider

See reverse of LCR-1023BFORCC – Page 2 for EOE/ADA/LEP/GlNA disclosure
### Plumbing (R6-18-707):
1. The setting has a continuous source of safe drinking water.
   - YES [ ] NO [ ]
2. Hot water temperature in areas for bathing does not exceed 120°F.
   - Hot water temperature: [ ]
3. Sewage disposal is functioning with no visible signs of leakage.
   - YES [ ] NO [ ]
4. Setting has at least 1 working toilet, sink, and tub/shower per 10 residents.
   - Number of working toilets: [ ] shower/tubs: [ ] sinks: [ ]

### Fire Safety (R6-18-708):
1. Flammables/combustibles are stored more than 3 feet from heat sources.
   - YES [ ] NO [ ]
2. Working fireplaces/wood stoves are protected by fire screens.
   - N/A [ ]
3. Setting has at least one functioning fire extinguisher with a minimum rating of 2A: 10BC on each level.
   - YES [ ] NO [ ]
4. Setting has at least one working smoke detector on each level.
   - YES [ ] NO [ ]
5. Setting has at least one working smoke detector in each bedroom.
   - YES [ ] NO [ ]
6. Setting has an emergency evac. plan which meets the following standards.
   - YES [ ] NO [ ]
   - Identifies two routes to evacuate from bedrooms used for care.
   - YES [ ] NO [ ]
   - Identifies the location of fire extinguishers & fire evacuation equipment.
   - YES [ ] NO [ ]
   - Designates a safe meeting place outside the setting.
   - YES [ ] NO [ ]
   - Is maintained in the setting.
   - YES [ ] NO [ ]
7. Exits from the setting are unobstructed.
   - YES [ ] NO [ ]
8. Bedrooms used for care must have an exit route that leads directly outside.
   - YES [ ] NO [ ]
9. Locks/bars on windows in bedrooms used for care and on doors leading to the outside have a quick release mechanism.
   - YES [ ] NO [ ]
10. Settings providing care to 6 or more individuals practice and document an evacuation drill at least once every 3 months.
    - N/A [ ]
11. The address for the setting is posted and visible from the street.
    - N/A [ ]

### Pools and Spas (R6-18-709):
1. Pools are maintained, not stagnant, & are clear enough to see through the water to the bottom surface of the pool.
   - YES [ ] NO [ ]
2. If water is deeper than 4 ft., a shepherds crook & ring buoy with attached rope are available in the pool area.
   - N/A [ ]
3. The enclosure/fence meets the following standards.
   - N/A [ ]
   - YES [ ] NO [ ]
   - The exterior side of the fence is at least 5 ft. high with no footholds or handholds
   - YES [ ] NO [ ]
   - If chain link, the mesh measures less than 1 3/4” horizontally.
   - N/A [ ]
   - Openings measure less than 4 inches.
   - YES [ ] NO [ ]
   - Gates are self-closing, self-latching and open away from the pool.
   - YES [ ] NO [ ]
   - The gate latch is at least 54” above the ground.
   - YES [ ] NO [ ]
   - The gate to the enclosure is locked.
   - YES [ ] NO [ ]

### If the setting constitutes part of the enclosure:
1. The enclosure does not interfere with safe egress from the setting.
   - YES [ ] NO [ ]
2. A door from the setting does not open within the pool enclosure.
   - YES [ ] NO [ ]
3. A window in a bedroom designated for an individual receiving care is not positioned within the pool enclosure.
   - YES [ ] NO [ ]
4. Other windows are permanently secured to open no more than 4 inches.
   - YES [ ] NO [ ]

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This inspection represents the condition of the setting only on the date and time of the inspection.

- [ ] The setting was in full compliance with all safety measures evaluated by the OLCR Life-Safety Inspector.
- [ ] The setting was not in full compliance with all safety measures.
- Licensing agency must verify corrections [ ] OLCR must verify corrections [ ] Date full compliance verified by OLCR [ ]

Inspector’s comments:

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Inspector’s Name (print): [ ]
Inspector’s signature: [ ]

I acknowledge that the findings of this inspection have been reviewed with me and I have been provided with a copy.

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Provider’s Name (print): [ ]
Provider’s signature: [ ]

Distribution: ORIGINAL – OLCR Inspector; COPY – Licensing/Certification agency; COPY – Care Provider
See reverse for ADA/EOE/LEP/GINA statements
The Life-Safety Standards can be found in the Arizona Administrative Code, Title 6, Chapter 18, Article 7 and are posted on-line by the Secretary of State’s Office at:
http://www.azsos.gov/public_services/Title_06/6-18.htm

For additional information on the Life-Safety Standards or on the inspection process:

Visit our website at: www.azdes.gov/olcrinspect

Call OLCR at (602) 542-9000 or toll-free (888) 229-1814

Send an e-mail to OLCRinspect@azdes.gov