Regulation of the
Office of Early Childhood
Concerning
Youth Camp Licensing Regulations

Regulations adopted after July 1, 2013, become effective upon posting to the website of the Secretary of the State, or at a later date specified within the regulation.

Website posted on
September 25, 2017

Effective Date
September 25, 2017

Approved by the Attorney General on
June 2, 2017

Approved by the Legislative Regulation Review Committee on
July 24, 2017

Received and filed in the Office of the Secretary of the State on
September 1, 2017

Electronic copy with agency head certification statement submitted to the Office of the Secretary of the State on
September 22, 2017

REPOSTED TO WEBSITE ON SEPTEMBER 27, 2017
TO CORRECT SECRETARY OF THE STATE FILE NUMBER FROM 6232 TO 6251
Effective date of this regulation is September 25, 2017
Statutes of Connecticut

REGULATION

of

NAME OF AGENCY

Connecticut Office of Early Childhood

SUBJECT MATTER OF REGULATION

Youth Camp Licensing Regulations

Section 1. NEW- The regulations for Connecticut State Agencies are amended by adding sections 19a-428-1 to 19a-428-7 as follows:

19a-428-1 Definitions as used in Section 19a-428-1 to 19a-428-7, inclusive, of the Regulations of Connecticut State Agencies

(1) "Administration of medication" means the direct application of a medication by inhalation, ingestion or any other means to the body of a person;

(2) "Advanced practice registered nurse" means an individual licensed under chapter 378 of the Connecticut General Statutes;

(3) "Authorized prescriber" means a physician, a dentist, an advanced practice registered nurse, a physician assistant, a podiatrist, or an optometrist;

(4) "Challenge course" means a designated area that is used for educational, team and confidence-building or recreational purposes, which area may include, but need not be limited to, logs, tires, platforms, beams, bridges, poles, ropes, ladders, nets, climbing walls, climbing towers, traverses, cables, swings, natural sites, or zip lines;

(5) "Commissioner" means the Commissioner of Early Childhood or the commissioner’s designee;

(6) "Dentist" means an individual licensed to practice dental medicine in this or another state;

(7) "Licensee" means a person, as defined in section 19a-420 of the Connecticut General Statutes, who is licensed pursuant to section 19a-421 of the Connecticut General Statutes;

(8) "Medication" means any legend drug or nonlegend drug, as those terms are defined in section 20-571 of the Connecticut General Statutes, including any controlled substance, as defined in section 21a-240 of the Connecticut General Statutes;

(9) "Medication error" means the failure to administer (A) medication to a child, (B) medication within one hour of the time designated by the authorized prescriber, (C) the specific medication prescribed for a child, (D) medication by the correct route, (E) medication according to generally accepted medical practices, or (F) the correct dosage of medication;

(10) "Office" means the Office of Early Childhood;

(11) "Optometrist" means an individual licensed to practice optometry under chapter 380 of the Connecticut General Statutes;

(12) "Parent(s)" means the person(s) responsible for the child and may include the legally designated guardian(s) of such child;

(13) "Pharmacist" means an individual licensed to practice pharmacy under the provisions of section 20-590, 20-591, 20-592 or 20-593 of the Connecticut General Statutes;
"Physician" means an individual licensed to practice medicine in this or another state;
"Physician assistant" means an individual licensed under section 20-12b of the Connecticut General Statutes;
“Podiatrist” means an individual licensed under chapter 375 of the Connecticut General Statutes;
“Registered nurse” means an individual licensed under chapter 378 of the Connecticut General Statutes;
"Self-administer medications" means that the child (A) is able to identify and select the appropriate medication by size, color, amount, or other label identification, (B) knows the frequency and time of day for which the medication is ordered, and (C) is able to administer the medication appropriately;
"Significant medication error" means a medication error that is potentially serious or has serious consequences for a child, including, but not limited to, the administration of medication (A) by the wrong route, (B) to a child with a known allergy to the medication, (C) given in a lethal or toxic dosage, or (D) causing serious medical problems resulting from such medication error; and
"Staff" or “staff member” means those persons, including volunteers, responsible for the direct care of campers, but does not include persons contracted exclusively to provide a general service(s) to the youth camp such as facility maintenance, transportation, food service or cleaning services.

Section 19a-428-2 Administration and Staffing

(a) The licensee shall be responsible for compliance with the requirements of this section and sections 19a-428-3 to 19a-428-7, inclusive, of the Regulations of Connecticut State Agencies and chapter 368r of the Connecticut General Statutes. Unless otherwise specified in this section and sections 19a-428-3 to 19a-428-7, inclusive, of the Regulations of Connecticut State Agencies, the licensee or the licensee’s designee shall respond to the Office’s requests for information or documentation related to compliance with this section and sections 19a-428-3 to 19a-428-7, inclusive, of the Regulations of Connecticut State Agencies and chapter 368r of the Connecticut General Statutes within the time period and in the manner specified by the Office. The licensee or the licensee’s designee shall not furnish or make any false or misleading statements to the Office in order to obtain or retain the license.

(b) The licensee shall provide staff, programs and services to meet the needs of all campers. All staff shall have the personal qualities necessary to care for and work with children and relate to adults.

(c) Each youth camp shall have a youth camp director who shall be at least twenty-one years of age. Except for those persons who have already served at least one summer as a youth camp director, any person serving as a youth camp director shall have had at least sixteen weeks administrative or supervisory experience in an organized youth camp or, in lieu thereof, equivalent administrative or supervisory training or experience in an organized youth program as determined by the Office.

(1) The youth camp director shall be responsible for the supervision of the campers at all times while the campers are at the youth camp, indoors or outdoors or on excursions. An assistant director, acting in the youth camp director’s absence, shall meet the qualifications of this subsection and shall comply with all requirements applicable to the youth camp director.

(2) The youth camp director, or the youth camp director’s designee, shall make arrangements to escort the Office’s inspector around the youth camp premises and to supply the Office inspector during an inspection or investigation with any information, documents or materials necessary to comply with the inspection or investigation. The youth camp director or, in the
absence of the youth camp director, the assistant director shall be familiar with all of the
activities offered at the youth camp during the period of the youth camp’s license, and have
immediate access to all records and facilities utilized for all activities offered during the
period of the youth camp’s license.

(3) The youth camp director shall be responsible at all times for the health, comfort and safety of
campers and staff.

(4) The youth camp director shall be responsible for the implementation of the youth camp’s
plans, policies and procedures developed by the licensee. The licensee shall be responsible
for developing all plans, policies and procedures required pursuant to sections 19a-428-3 to
19a-428-7, inclusive, of the Regulations of Connecticut State Agencies.

(d) The youth camp shall have a director of each individual waterfront or swimming area,
including areas devoted to the practice of aquatics, if such areas are used by the youth camp
for swimming activities, who shall be at least twenty years of age and shall possess an
American Red Cross Lifeguard Training current rating or its equivalent, as determined by the
Office.

(e) The youth camp shall have a director of each small craft waterfront area, if such area is used
for small craft activities by the youth camp, who shall possess current certification in
American Red Cross Lifeguard Training or its equivalent, as determined by the Office, and
current certification in the small craft safety program of the American Red Cross or its
equivalent, as determined by the Office, for the type of small craft used at the youth camp.
Each such director shall comply with the provisions of the applicable state statutes and
regulations governing boating laws and scuba diving.

(f) Staff acting in a lifeguard capacity shall meet the requirements of section 19a-113a-1 of the
Regulations of Connecticut State Agencies.

(g) Waterfront areas, swimming areas, and small craft waterfront areas utilized by campers or
staff while on excursions shall have a director who meets the applicable requirements of
subsection (d) or (e) of this section.

(h) The youth camp shall have a director of the firing range, if such range is provided by the
youth camp, who shall be at least twenty-one years of age and shall possess a current National
Rifle Association Instructor’s card or equivalent, as determined by the Office.

(i) The youth camp shall have a director of the archery range, if such range is provided by the
youth camp, who shall be at least eighteen years of age and possess evidence satisfactory to
the Office of appropriate training and experience in archery, as determined by the Office.

(j) The youth camp shall have a director of horseback riding activities, if such activities are
provided by the youth camp, who shall be at least eighteen years of age and possess evidence
satisfactory to the Office of appropriate training and experience, as determined by the Office.

(k) The youth camp shall have a director of the challenge course, if such course is provided by
the youth camp, who shall be at least twenty years of age and possess evidence satisfactory to
the Office of appropriate training from an authoritative source in all of the challenge activities
offered at the youth camp. The authoritative source shall have published standards, guidelines,
or other instructional materials that are in accordance with current published standards and
generally accepted operational practices. The challenge course director shall be an employee
or contracted vendor of the youth camp and on-site at the youth camp during the majority of
time when campers or staff are participating in a challenge course. Any staff member leading
a challenge course shall be at least eighteen years of age and shall have completed training on
the course elements they are leading that is in accordance with current published standards
and generally accepted operational practices and had their skills verified and evaluated by the
challenge course director.
The youth camp director may serve as the director of archery or horseback riding activities, in addition to his or her duties as youth camp director, provided the youth camp director meets the requirements of subsection (i) and (j) of this section.

Staff acting as counselors shall be at least sixteen years of age. Campers acting as counselors-in-training shall be at least fourteen years of age.

In resident youth camps, the ratio of staff to campers shall be at least one staff sixteen years of age or older to six campers under eight years old, and to eight campers eight years of age or older. In day camps, the ratio shall be at least one staff sixteen years of age or older to nine children under six years of age, and to twelve children six years of age or older. The ratio of staff to campers, as specified in this subsection, shall be maintained at all times, including during all youth camp outings and trips.

Whenever campers or staff are participating in the activities described in subsections (d), (e), (h), (i) and (j) of this section, the director of the activity, or, in the absence of the director of the activity, any other staff member who satisfies the age, training, and experience requirements of the director of the activity, as prescribed in said subsections (d), (e), (h), (i) and (j), shall be on-site where the activity is occurring.

Whenever campers or staff participate in the activities specified in subsection (k) of this section, the director of the activity or any other staff member, who is at least eighteen years of age and who meets the training requirements in subsection (k) of this section, shall be on-site where the activity is occurring.

Any staff member that has reasonable cause to suspect or believe that any camper has been abused or neglected, or is in imminent risk of serious harm, shall immediately report such suspicion or belief to the youth camp director or youth camp assistant director.

The licensee shall develop, in consultation with the local emergency management director, a written emergency management plan for matters that include, but are not limited to, fire, a medical incident, a weather related incident, a man-made disaster, natural disasters or acts of terrorism. The plan shall address (1) the evacuation and removal of children to a safe location, (2) lock-down procedures, (3) notification and reunification of parents with their children, and (4) any necessary methods and procedures for the evacuation and relocation of children with special needs, developed in consultation with the parents of such children. All staff shall be trained on the details of the plan and a copy shall be maintained on-site and available to all staff.

Each staff member shall meet the age requirements prescribed in this section on or before the date such staff member commences employment at the youth camp.

Section 19a-428-3 Records
(a) Records of both staff and campers shall be kept on file at the youth camp and shall include the personal data concerning each member of the staff and camper kept in any reasonable form the youth camp director may choose. Such records shall include, but not be limited to, the name, age and address of the staff member or camper, the name, address and telephone numbers including the business telephone number of the parent or an adult next of kin who shall be notified in an emergency, the date of first attendance at the youth camp and the date of leaving the youth camp permanently in the case of residence youth camps, or the last date of attendance at the youth camp in the case of day camps, and a physical examination or health status certification by a physician, an advanced practice registered nurse or a physician assistant dated not more than thirty-six months prior to the date of arrival at the youth camp or a health status certification by a registered nurse dated not more than thirty-six months prior to the date of arrival at the youth camp. The physical examination or the health status certification shall include a statement about the child's general health and the presence of any known medical or emotional illness or disorder that poses a risk to other children or which
affects the child’s functional ability to participate safely in a youth camp. The physical examination and health assessment form, as described in section 10-206 of the Connecticut General Statutes, that is required for school purposes may be used to satisfy the physical examination or health status certification required in this subsection. The record for each camper shall include information regarding disabilities or special health care needs such as, allergies, special dietary needs, dental problems, hearing or visual impairments, chronic illness, developmental variations or history of contagious disease, and an individual plan of care for a camper with special health care needs or disabilities, developed with the child’s parent(s) and health care provider and updated, as necessary. Such plan of care shall include appropriate care of the camper in the event of a medical or other emergency and shall be signed by the parent(s) and staff responsible for the care of the camper. The physical examination or the health status certification may be waived where such procedure is contrary to the religious beliefs of the camper or parent(s). A statement requesting such exemption shall be submitted annually and shall be kept on file at the youth camp. This statement shall be signed by a parent, and shall grant permission to youth camp authorities to authorize physical examination or other appropriate measures when medical emergencies occur. The parent shall certify and accept complete responsibility for the health of the camper and that to the best of the parent’s knowledge the camper is in good health. The physical examination for staff and campers who are school age or younger shall include documentation that they have been adequately immunized according to the schedule adopted by the Commissioner of Public Health pursuant to section 19a-7f of the Connecticut General Statutes. A physical examination and health assessment form, as described in section 10-206 of the Connecticut General Statutes, that is required for school purposes, may be used to satisfy the immunization requirement of this subsection provided it is dated not more than thirty-six months prior to the date the camper arrives at the youth camp. Where the individual, because of medical reasons, does not have such immunizations, these reasons shall be so specified in writing by a physician, physician assistant, or an advanced practice registered nurse indicating that the child has a medical contraindication to immunization. Where the individual or the parent(s) of such child, because of religious reasons, does not have such immunizations, these reasons shall be so specified in a written statement that shall be updated annually, signed by the child’s parent(s), and acknowledged by a judge of a court of record or a family support magistrate, a clerk or deputy clerk of a court having a seal, a town clerk, a notary public, a justice of the peace, or an attorney admitted to the bar of this state. If a child is determined to be a homeless child or youth, as defined in 42 USC 11434a, as amended from time to time, the youth camp shall allow the child to attend the youth camp for up to 90 days without the required physical examination or health status certification and immunization records. Records documenting temporary waiver eligibility determinations shall be maintained on file at the youth camp for a period of two years.

(b) The licensee shall notify the commissioner in writing as soon as possible, but not later than five business days after the date of any change in circumstances, which alters or affects the youth camp services as stated in the license application. The licensee shall report changes in circumstances that include, but are not limited to, change in location of the youth camp, change in operational dates of the youth camp, change in trip dates, and change in youth camp director.

Section 19a-428-4 Physical Plant and Program Practices

(a) The water supply shall be provided from (1) a public water system that is regulated by the Department of Public Health and complies with all applicable sections of the Regulations of Connecticut State Agencies, or (2) a source that is of sufficient quality and quantity to satisfy the requirements of the maximum number of persons served by the youth camp at any time
and that conforms with the requirements of sections 19-13-B51a to 19-13-B51m, inclusive, and section 19-13-B101 of the Regulations of Connecticut State Agencies.

(b) Drinking fountains shall be sanitary and in compliance with section 19-13-B35 of the Regulations of Connecticut State Agencies. No common drinking utensils shall be provided or used. Readily available drinking water shall be accessible to children at all times.

(c) Chemical toilets, fly tight privy pits or water flushed toilets shall be provided and shall be maintained in a clean and sanitary condition. Separate toilets for males and females shall be provided. In a residential youth camp, at least one toilet seat for each fifteen persons or fraction thereof shall be provided. At least one toilet seat for each twenty persons or fraction thereof shall be provided in each day camp. Urinals may be substituted for not more than one-half of the total requirement of toilet seats for male persons. No sleeping quarters within a youth camp shall be at a greater distance than three hundred feet from the toilets. The location of all toilets shall be plainly indicated by signs. Privy pits shall be located at least two hundred feet from a kitchen or food service area.

(d) The method of final sewage or refuse disposal utilized in connection with the operation of a youth camp shall not create a nuisance and shall conform with the requirements of sections 19-13-B103a to 19-13-B104d, inclusive, of the Regulations of Connecticut State Agencies, and plans for such disposal shall be approved by the Department of Public Health.

(e) The plumbing systems in each youth camp shall conform with the requirements of section 19-13-B45 of the Regulations of Connecticut State Agencies.

(f) Adequate hand washing facilities shall be provided with at least one facility for each twenty persons or fraction thereof. Wash basins and water shall be readily accessible to the toilet rooms. In a residential youth camp at least one shower house shall be provided with one shower head for each twenty persons or fraction thereof.

(g) Supervision and equipment sufficient to prevent littering of the grounds with rubbish, garbage or other refuse shall be provided and maintained. Fly tight depositories for such material shall be provided and conspicuously located. Each dwelling unit site within a youth camp shall be not more than a distance of two hundred feet of such depository. Such depositories shall not be permitted to become foul smelling or unsightly or a breeding place for flies.

(h) Youth camps that dispense foods or beverages shall meet the requirements of section 19-13-B42 of the Regulations of Connecticut State Agencies. Day camps shall collect and store potentially hazardous food in accordance with section 19-13-B42 of the Regulations of Connecticut State Agencies.

(i) Swimming pools and bathing facilities, when provided, shall comply with the applicable provisions of section 19-13-B33b of the Regulations of Connecticut State Agencies.

(j) The youth camp site shall be owned by the licensee or the licensee shall have a written lease to use the site as a youth camp and shall comply with the following general sanitation requirements:

1. The location of the youth camp shall be such as to supply adequate drainage of all areas occupied by campers, the food preparation and service area and other activity areas.

2. Buildings shall be maintained in a safe and sanitary condition. When the Office or the local director of health so directs, a certificate of approval shall be obtained from the local or state fire marshal.

3. All hot water and space heaters shall be located and vented to prevent risk of fire or health hazard.

(k) In every youth camp where space for trailer coaches, as defined by section 19-13-B44 of the Regulations of Connecticut State Agencies, is rented or offered for rent or on which free occupancy or camping of trailers is permitted to trailer owners or users, sanitary facilities shall be furnished for the disposal of wastes from trailer sinks and toilets. Trailer coaches
shall meet the sanitation requirements in section 19-13-B44 of the Regulations of Connecticut State Agencies.

(1) Fields intended for athletic activities or use shall be maintained free of hazards.

(m) The waterfront and aquatic activities shall be laid out and conducted in accordance with training relating to water safety and small craft safety offered by the American Red Cross or its equivalent, as determined by the Office.

(n) Any amusement ride or devise shall meet the requirements of sections 29-132 to 29-136, inclusive, of the Connecticut General Statutes.

(o) The firing range shall be laid out and operated in accordance with standards of the National Rifle Association or its equivalent, as determined by the Office.

(p) Each challenge course shall be inspected prior to its initial use and annually thereafter, or more frequently if the course has been subject to any significant environmental impact, by a professional vendor or other qualified personnel not directly affiliated with the youth camp who follow the recommendations of authoritative sources, adhere to peer-accepted practices in construction and inspection of challenge courses and have experience in the construction and evaluation of the types of challenge courses being offered at the youth camp. Documentation of any inspection shall be maintained on-site for a period of two (2) years.

(q) The licensee shall develop written policies and procedures governing each of the following activities, if provided at the youth camp, the challenge course, firing range, archery range and horseback riding activities. The written policies and procedures shall be maintained on-site. The policies and procedures governing the challenge course, firing range, archery range and horseback riding activities shall include, but not be limited to, emergency operating plans, equipment maintenance and inspection, a procedure for communicating concerns to supervisory and managerial staff, supervision of activities, staff to child ratios, protective equipment, eligibility requirements for participation, and restriction of access to activities and equipment by unauthorized and unsupervised persons.

(r) The licensee shall be responsible for ensuring compliance with all applicable motor vehicle laws when transporting staff and campers. The licensee shall maintain official verification of a motor vehicle safety inspection for the current year for each youth camp vehicle used to transport staff and campers, and shall register, if necessary, each such youth camp vehicle for its specific use. For purposes of this subsection, “youth camp vehicle” does not include a school bus, school transportation vehicle, charter bus or motor coach.

(s) Boats and small crafts shall be operated in compliance with all applicable boating laws. Boats and small crafts shall be licensed or registered under the boating laws, if so required, and this information shall be available upon request to the Office. Water safety equipment shall meet applicable United States Coast Guard standards.

(t) Prior to each out-of-camp outing, the parent(s) of each camper shall sign a permission form allowing such camper to participate in such outing. Such permission form, as well as documentation indicating which staff and campers will be participating in such outing and the purpose, exact destination and itinerary of such outing, shall be maintained on-site at the youth camp for one (1) year. Staff with adequate training and experience relative to the trip activities shall be present during all youth camp outings to ensure the health and safety of campers and staff.

(u) Exceptions to the requirements of subsections (a), (c), and (f) of this section may be made by the Office at the Office’s discretion in the case of primitive or pioneer youth camps. Exceptions to the requirements of subsection (a) of section 19a-428-3 may be made by the Office at the Office’s discretion in the case of day camps where the requirements of a physical examination or health status certification for campers would impose a hardship on the administration of such a youth camp. Requests for such exemptions shall be made in writing by the youth camp director or licensee at least thirty days before the opening of youth camp.
Section 19a-428-5 Health Care

(a) A physician or advanced practice registered nurse shall be on call and shall be responsible for all health care including first aid. Annually the physician or advanced practice registered nurse shall sign and date standing orders to be carried out in the physician’s or advanced practice registered nurse’s absence by the youth camp nurse, or first aid instructions to be carried out by a person at least twenty-one years of age who holds current certification in first aid by the American Red Cross, the American Heart Association, the National Safety Council, American Safety and Health Institute or Medic First Aid International, Inc. Additional aides under age twenty-one may be employed to provide first aid if they hold current certification in first aid by the American Red Cross, the American Heart Association, the National Safety Council, American Safety and Health Institute or Medic First Aid International, Inc., but shall not be in charge of or provide health care. Any first aid course approved by the Office prior to January 6, 2016, shall continue to be acceptable for purposes of this subsection. All youth camp health care personnel shall hold current certification in cardiopulmonary resuscitation appropriate to the population served by the youth camp and issued by the American Red Cross, the American Heart Association, the National Safety Council, American Safety and Health Institute or Medic First Aid International, Inc. Acceptable first aid and cardiopulmonary resuscitation certifications shall be based on a hands-on demonstration of the individual’s ability to provide first aid and cardiopulmonary resuscitation. For residential youth camps having two hundred fifty or more campers or staff in residence, a registered nurse shall be in charge of first aid and emergency medical care activities. First aid equipment and supplies shall be specified by the youth camp physician or advanced practice registered nurse in the first aid instructions. Only nonprescription drugs shall be available in stock containers in youth camps. Prescription drugs shall be available only on individual prescription unless locked and in the sole custody of an authorized prescriber. The physician or registered nurse shall maintain proof of use records as required under section 21a-254 of the Connecticut General Statutes.

(b) Communicable disease control shall meet the requirements of sections 19a-36-A3 and 19a-36-A4 of the Regulations of Connecticut State Agencies.

(c) There shall be on file a memorandum of understanding with the on-call or resident physician or advanced practice registered nurse concerning the provision of medical care for emergencies and of routine care to be carried out at the youth camp, including standing orders for the nurse, if there is one, and instructions for the provision of first aid in lieu of a resident physician or nurse, for both day and residential youth camps.

(d) There shall be a working telephone available to the first aid area for the use of the first aid staff, with posting of the telephone numbers of the youth camp physician or advanced practice registered nurse, youth camp director, youth camp nurse, nearest hospital, local director of health in whose jurisdiction the youth camp falls, local fire department in whose jurisdiction the youth camp falls, local police department in whose jurisdiction the youth camp falls, the poison control center, and ambulance services.

(e) An abstract record of all cases treated at the youth camp shall be kept in a manner that prevents alteration of the information contained in the record such as a bound volume. The abstract record shall include the date, time, circumstances that resulted in the case, the condition, treatment provided and persons responsible for the care. At least once a week these cases shall be reviewed by the youth camp physician or advanced practice registered nurse who shall sign and date the abstract record indicating the physician or advanced practice registered nurse’s review of cases.

(f) There shall be available a defined area where ill or injured individuals may rest and receive care until they are either removed from the youth camp or recovered. This area shall be
adequate to provide for the temporary isolation of any suspected communicable diseases and shall have its own toilet facilities not used for other purposes within the youth camp.

(g) Any (1) fatality that occurs at the youth camp or results from camping activities, or (2) injury that occurs at the youth camp or results from camping activities that result in a camper being admitted to a hospital or diagnosed with a fracture, concussion or second or third degree burn, shall be reported in writing to the Office not later than the next business day.

Section 19a-428-6 Administration of Medications

(a) Youth camps are not required by this subsection to administer medications to children. If a youth camp permits the administration of medications of any kind by staff not licensed to administer medication, the youth camp shall comply with all requirements of this section and shall have written policies and procedures at the youth camp governing the administration of medications that shall include, but not be limited to, the types of medication that will be administered, parental responsibilities, staff responsibilities, proper storage of medication and record keeping. Such policies and procedures shall be available for review by the Office during inspections or upon demand and shall reflect current best practice. No staff member under eighteen years of age shall administer any medication at a youth camp.

(1) Administration of Nonprescription Topical Medications Only

(A) For the purposes of this subdivision, nonprescription topical medications shall include:

(i) Diaper changing or other ointments free of antibiotic, antifungal, or steroidal components;

(ii) Medicated powders; and

(iii) Gum or lip medications available without a prescription.

(B) Nonprescription Topical Medications Administration/Parent Permission Records

The written permission of the parent shall be required prior to the administration of the nonprescription topical medication and shall be kept on file at the youth camp for each child administered a nonprescription topical medication. The parent shall be immediately notified of any medication error, written notice of such medication error shall be sent to the parent not more than seventy two hours after the medication error occurred, and such medication error shall be documented in the child’s health record.

(C) Nonprescription Topical Medications, Labeling and Storage

(i) The medication shall be stored in the original container and shall contain the following information on the container or packaging indicating:

(I) The individual child's name;

(II) The name of the medication; and

(III) Directions for the medication's administration.

(ii) The medication shall be stored away from food and inaccessible to children and unauthorized persons. External and internal medications shall be stored separately from each other.

(iii) Any unused portion of the medication shall be returned to the parent. Any expired medication shall be destroyed by the staff member in a safe manner or returned to the parent.

(2) Administration of Medications Other Than Nonprescription Topical Medications

(A) Training Requirements

(i) Prior to the administration of any medication by staff members, the
staff members responsible for administering the medications shall first be trained by a pharmacist, physician, physician assistant, advanced practice registered nurse or registered nurse in the methods of administration of medications and shall receive written approval from the trainer indicating that the trainee has successfully completed a training program as required under this subparagraph. A staff member trained and approved to administer medication shall be present whenever a child who has written orders to receive medication by an authorized prescriber is enrolled and present at the youth camp, and the youth camp permits the administration of medication by staff not licensed to administer medication.

(ii) The training in the administration of medications shall be documented and shall include, but not be limited to, the following:
(I) Statement of objectives;
(II) A description of methods of administration including principles and techniques;
(III) Techniques to encourage children who are reluctant or noncompliant to take their medication and the importance of communicating the noncompliance to the child's parent and to the authorized prescriber;
(IV) Demonstration of techniques by the trainer and return demonstration by participants, assuring that the trainee can accurately understand and interpret orders and carry them out correctly;
(V) Recognition of side effects and appropriate follow up action;
(VI) Avoidance of medication errors and the action to take if a medication error or a significant medication error occurs, or if a dosage is missed or refused;
(VII) Abbreviations commonly used;
(VIII) Required documentation including parent permission, written orders from authorized prescribers, and the record of administration;
(IX) Safe handling, including receiving medication from a parent, safe disposal, and universal precautions; and
(X) Proper storage including controlled substances, in accordance with section 21a-262-10 of the Regulations of Connecticut State Agencies.

(iii) In addition to the training requirements described in clauses (i) and (ii) of this subparagraph, before a staff member may administer oral, topical or inhalant medications, the staff member shall have successfully completed a training program on the administration of oral, topical and inhalant medications. The trainer, who shall be a pharmacist, physician, physician assistant, advanced practice registered nurse or registered nurse, shall assure that the staff member understands the indications, side effects, handling, and methods of administration for oral, topical and inhalant medication. After completing such training, the staff member shall have his or her skills and competency in the administration of oral, topical and inhalant medication reviewed and validated by a pharmacist, physician, physician assistant, advanced practice registered nurse or registered nurse every three years. The
youth camp shall have staff trained in the administration of oral, topical and inhalant medication on-site during all hours when a child with a prescription for an oral, topical or inhalant medication, is on-site.

(iv) In addition to the training requirements described in clauses (i) and (ii) of this subparagraph, before a staff member may administer injectable medications by a premeasured commercially prepared auto-injector, the staff member shall have successfully completed a training program on the administration of injectable medications by a premeasured, commercially prepared auto-injector. The trainer who shall be a pharmacist, physician, physician assistant, advanced practice registered nurse or registered nurse, shall assure that the staff member understands the indications, side effects, handling and methods of administration for injectable medication. After completing such training, the staff members shall annually have his or her skills and competency in the administration of injectable medication reviewed and validated by a pharmacist, physician, physician assistant, advanced practice registered nurse or registered nurse. Injectable medications by a premeasured commercially prepared auto-injector shall only be given in emergency situations. The youth camp shall have staff trained in the use of a premeasured commercially prepared auto-injector used to treat an allergic reaction on-site during all hours when a child with a prescription for a premeasured commercially prepared auto-injector used to treat an allergic reaction is on-site.

(v) In addition to the training requirements described in clauses (i) and (ii) of this subparagraph, before a staff member may administer rectal medications, the staff member shall have successfully completed a training program on the administration of rectal medications. The trainer, who shall be a pharmacist, physician, physician assistant, advanced practice registered nurse or registered nurse, shall assure that the staff member understands the indications, side effects, handling, and the methods of administration for rectal medication. After completing such training, the staff member shall have his or her skills and competency in the administration of rectal medication reviewed and validated by a pharmacist, physician, physician assistant, advanced practice registered nurse or registered nurse every three years. The youth camp shall have staff trained in the administration of rectal medication on-site during all hours when a child with a prescription for rectal medication is on-site.

(vi) In addition to the training requirements described in clauses (i) and (ii) of this subparagraph, before a staff member may administer injectable medications other than by a premeasured commercially prepared auto-injector, the staff member shall have successfully completed a training program on the administration of injectable medications other than by a premeasured commercially prepared auto-injector. The trainer, who shall be a pharmacist, physician, physician assistant, advanced practice registered nurse or registered nurse, shall assure that the staff member understands the indications, side effects, handling, and the methods of administration for injectable medication. After completing such training, the staff member shall have his or her skills and competency in the administration of injectable medication other than by a
preameasured commercially prepared auto-injector reviewed and validated by a pharmacist, physician, physician assistant, advanced practice registered nurse or registered nurse every three years. The youth camp shall have staff trained in the administration of injectable medication other than by a premeasured commercially prepared auto-injector on-site during all hours when a child with a prescription for injectable medication other than by a premeasured commercially prepared auto-injector is on-site.

(vii) A staff member currently certified by the State of Connecticut Department of Developmental Services or the State of Connecticut Department of Children and Families to administer medications shall be considered qualified to administer medications for the modalities in which they have been trained at youth camps.

(B) Training Approval Documents and Training Outline

(i) Upon completion of the required training program or the review and validation of the required training, the pharmacist, physician, physician assistant, advanced practice registered nurse or registered nurse who conducted the training shall issue a written approval to each staff member who has demonstrated successful completion of the required training or the review and validation of the required training. Approval for the administration of oral, topical, inhalant, rectal medications and injectable medications other than by a premeasured commercially prepared auto-injector shall remain valid for three (3) years. Approval for the administration of injectable medications by a premeasured commercially prepared auto-injector shall be valid for one (1) year. A copy of the approval shall be on file at the youth camp for a period of three (3) years and shall be available to the Office upon request.

(ii) The written approval shall include:

(I) The full name, signature, title, license number, address and telephone number of the pharmacist, physician, physician assistant, advanced practice registered nurse or registered nurse who gave the training;

(II) The location and date(s) the training was given;

(III) A statement that the required curriculum areas listed in subparagraph (A) of this subdivision when applicable were successfully mastered, and indicating the route(s) of administration the trainee has been approved to administer;

(IV) The name, date of birth, address and telephone number of the staff member who completed the training successfully; and

(V) The expiration date of the approval.

(iii) The trainer shall provide the trainee with an outline of the curriculum content, which verifies that all mandated requirements have been included in the training program. A copy of said outline shall be on file at the youth camp for a period of three (3) years for Office review. The Office may require at any time that the licensee obtain the full curriculum from the trainer for review by the Office.

(C) Order From An Authorized Prescriber and Parent's Permission

(i) Except for nonprescription topical medications described in subparagraph (A) of subdivision (1) of this subsection, no medication, prescription or nonprescription, shall be administered to a child without
the written order of an authorized prescriber and the written permission of the child's parent which shall be on file at the youth camp. Such medications may include:

(I) Oral medications;
(II) Topical medications, including eye and ear preparations;
(III) Inhalant medications;
(IV) Injectable medications by a premeasured commercially prepared auto-injector, to a child with a medically diagnosed condition who may require emergency treatment;
(V) Rectal medications; or
(VI) Injectable medication other than by a premeasured commercially prepared auto-injector.

(ii) The written order from an authorized prescriber shall contain the following information which may be on the prescription label or on supplemental information provided by the authorized prescriber or pharmacist:

(I) The name, address and date of birth of the child;
(II) The date the medication order was written;
(III) The medication or drug name, dose and method of administration;
(IV) The time of the day the medication is to be administered;
(V) The date(s) the medication is to be started and ended as applicable;
(VI) Relevant side effects and the authorized prescriber's plan for management should they occur;
(VII) Notation if the medication is a controlled drug;
(VIII) A listing of any allergies, reactions to, or negative interactions with foods or drugs;
(IX) Specific instructions from the authorized prescriber who orders the medication regarding how the medication is to be given;
(X) The name, address and telephone number of the parent;
(XI) The name, address and telephone number of the authorized prescriber ordering the drug; and
(XII) The authorized prescriber's signature.

(iii) If the authorized prescriber determines that the training of the staff member is inadequate to safely administer medication to a particular child, or that the means of administration of medication is not permitted under this subsection, that authorized prescriber may order that such administration be performed by licensed medical staff with the statutory authority to administer medications.

(iv) The staff member shall administer medication only in accordance with the written order of the authorized prescriber. The parent shall be notified immediately of a significant medication error or a medication error, and notified in writing not later than seventy-two hours after the medication error occurred, and the error shall be documented in the medication administration record. Significant medication errors shall also be reported immediately to the Office by telephone and in writing not later than the next business day.

(D) Required Medication Administration Records
(i) Except for nonprescription topical medications described in subparagraph (A) of subdivision (1) of this subsection, individual written medication administration records for each child shall be maintained, reviewed prior to administering each dose of medication and kept on file at the youth camp for at least two (2) years after the child is no longer enrolled in the youth camp. The medication administration record shall become part of the child's health record when the course of medication has ended.

(ii) The individual written medication administration record for each child shall include:

(I) The name, address, and date of birth of the child;
(II) The name, address, telephone number, signature and relationship to the child of the parent(s) giving permission for the administration of the medication by the staff member;
(III) The name of the medication;
(IV) The dosage ordered and method of administration;
(V) The date, time, and dosage at each administration;
(VI) The signature in ink of the staff member giving the medication at the time of each administration; and
(VII) Any refusal by the child in accepting the medication, and any follow-up action taken as a result of the refusal.

(iii) Medication errors shall be logged and recorded in the individual written medication administration record of the child. The youth camp physician or advanced practice registered nurse shall review all logs of medication errors on a weekly basis. A written record of the review and any recommendations made shall be kept on file at the youth camp, in accordance with the provisions of this subparagraph.

(E) Storage and Labeling

(i) Medication shall be stored in the original child-resistant safety container. The container or packaging shall have a label which includes the following information:
(I) The child's name;
(II) The name of the medication;
(III) Directions for the medication's administration; and
(IV) The date of the prescription.

(ii) Except for nonprescription topical medications described in subparagraph (A) of subdivision (1) of this subsection, premeasured commercially prepared auto-injectors used to treat an allergic reaction, injectable equipment used to administer glucagon, a rectal medication used to control seizures, an inhalant medication used to treat asthma or over the counter medications prescribed as an emergent first line of defense medication against an allergic reaction or a diabetic reaction, medication shall be stored in a locked area or a locked container, in a refrigerator in keeping with the label or manufacturer's directions, away from food and inaccessible to children and unauthorized personnel. External and internal medications shall be stored separately from each other. Keys or the locking mechanism to the locked area or container shall be accessible only to personnel authorized to administer medication. Controlled drugs shall be stored in accordance with section 21a-262-10 of the Regulations of Connecticut State Agencies.
(iii) Equipment and medications prescribed to treat asthma, administer glucagon, control seizures, or as an emergent first line of defense medication against an allergic response or a diabetic reaction shall be stored in a safe manner, inaccessible to other children, to allow for quick access in an emergency.

(iv) All unused or expired medication, except for controlled drugs, shall be returned to the parent or disposed of by the youth camp director, or the youth camp director's designee, and in the presence of at least one witness, if it is not picked up after seven days after the camper's departure at the end of camp. The licensee shall contact the Department of Consumer Protection for direction on the proper method of disposing of a controlled drug, and shall carry out the direction as required. The licensee shall keep a written record of the contact made and direction received from the Department of Consumer Protection and the medications destroyed for three (3) years which shall be signed by the person disposing of the medication and the witness.

(F) Request For Special Medication Authorization

(i) The licensee may request to administer medication to a child attending the youth camp by a modality that is not specifically permitted under this subsection by submitting a written request to the Office including the following information:

(I) A written order from an authorized prescriber containing the information for the specific child set forth in clause (ii) of subparagraph (C) of this subdivision and a statement that the administration by the requested modality is the only reasonable means of providing medication and that the administration must occur during hours of the child's attendance at the youth camp;

(II) A written training plan including the full name, signature, title, license number, address and telephone number of the physician, advanced practice registered nurse, physician assistant, registered nurse, or pharmacist who will provide the training, a detailed outline of the curriculum areas to be covered in the training, and a written statement by the authorized prescriber that the proposed training is adequate to assure that the medication will be administered safely and appropriately to the particular child;

(III) The name, date of birth, address and telephone number of the person(s) who shall participate in the training;

(IV) Written permission from the child's parent; and

(V) Any other information that the Office deems necessary to evaluate the request.

(ii) After reviewing the submitted information, if the Office determines that the proposed administration of medication for the particular child can be provided in a manner to assure the health, welfare and safety of the child, it may grant the request. The Office may grant the request with any conditions or corrective measures the Office deems necessary to assure the health, safety and welfare of the child. The Office shall specify the curriculum that the training program shall cover and the expiration date of the authorization provided in granting the request. If the Office grants the request, no medication may be administered until
after the proposed training program has been successfully completed and a written approval from the physician, advanced practice registered nurse, physician assistant, registered nurse or pharmacist who provided the training is submitted to the Office. Such written approval shall include:

(I) The full name, signature, title, license number, address and telephone number of the pharmacist, physician, advanced practice registered nurse, physician assistant, registered nurse or pharmacist who provided the training;

(II) The location and date(s) the training was given;

(III) A statement that the curriculum approved by the Office was successfully mastered by the participant. The statement shall also include the modality of administration of medication that the participant has been approved to administer; and

(IV) The name, date of birth, address and telephone number of the person(s) who successfully completed the training.

(iii) Copies of all documentation required under this subsection shall be maintained for a period of two (2) years at the youth camp. The requirements of subparagraphs (D) and (E) of this subdivision shall apply to the administration of medication authorized by request.

(b) Children enrolled at youth camps may self-administer medications with documented permission from the parent(s) and authorized prescriber. Children may request and receive assistance from staff in opening containers or packages or replacing lids. Medication to be self-administered shall be stored in accordance with subparagraph (E) of subdivision (2) of subsection (a) of this section.

(c) Notwithstanding any other provisions of the Regulations of Connecticut State Agencies, during a public health emergency declared by the Governor pursuant to section 19a-131a of the Connecticut General Statutes and if authorized by the Commissioner of Public Health via the emergency alert system or other communication system, a youth camp located within a 10-mile radius of the Millstone Power Station in Waterford, Connecticut shall permit designated staff members to distribute and administer potassium iodide to adults present or to a child in attendance at the youth camp during such emergency, provided that:

(1) Prior written consent has been obtained by the youth camp for such provision. Written consent forms shall be provided by the youth camp to the parent(s) of each minor child upon enrollment and to each new employee upon hire. Documentation demonstrating compliance with this subsection shall be kept at the youth camp;

(2) Each person providing consent has been advised in writing by the youth camp that the ingestion of potassium iodide is voluntary;

(3) Each person providing consent has been advised in writing by the youth camp about the contraindications and the potential side effects of taking potassium iodide, which include:

   (A) Persons who are allergic to iodine should not take potassium iodide;
   (B) Persons with chronic hives, lupus, or other conditions with hypocomplementemic vasculitis should not take potassium iodide;
   (C) Persons with Graves disease or people taking certain heart medications should talk to their physician before there is an emergency to decide whether or not to take potassium iodide; and,
   (D) Side effects may include minor upset stomach or rash;

(4) Youth camps shall have designated staff members to distribute and administer potassium iodide to those individuals and minor children for whom prior written
consent has been obtained. Such designated staff members shall be eighteen years of age or older and shall have been instructed by the youth camp in the administration of potassium iodide. Such instruction shall include, but is not limited to, the following:
(A) The proper use and storage of potassium iodide; and
(B) The recommended dosages of potassium iodide to be administered to children and adults as prescribed by the Food and Drug Administration; and
(5) Potassium iodide shall be stored in a locked storage area or container, inaccessible to children.

Section 19a-428-7 Monitoring of Diabetes
(a) Policy and Procedures
(1) All youth camps at which designated staff members will be administering finger stick blood glucose tests shall have written policies and procedures governing the administration of finger stick blood glucose tests to children diagnosed with diabetes mellitus. The policies and procedures shall include, but not be limited to, the following areas:
(A) Parental responsibilities;
(B) Staff training and responsibilities;
(C) Proper storage, maintenance, and disposal of test materials and supplies;
(D) Record keeping;
(E) Reporting test results, incidents, and emergencies to the child's parent and the child's physician, physician assistant, or advanced practice registered nurse; and
(F) A location where the tests occur that is respectful of the child's privacy and safety needs.
(2) Said policies and procedures shall be available for review by the Office during inspections or upon demand.
(b) Training
(1) Prior to the administration of finger stick blood glucose tests, such designated staff members shall have completed the following training requirements:
(A) A first aid course described in subsection (a) of section 19a-428-5 of the Regulations of Connecticut State Agencies, as verified by a valid first aid certificate on file at the youth camp; and
(B) Additional training given by a pharmacist, physician, physician assistant, advanced practice registered nurse, registered nurse, certified emergency medical technician, or the child's parent according to written guidelines provided by the child's physician, physician assistant, or advanced practice registered nurse. The additional training shall include, but not be limited to:
(i) The proper use, storage and maintenance of the child's individual monitoring equipment;
(ii) Reading and correctly interpreting test results; and
(iii) Appropriate actions to take when test results fail to fall within specified ranges indicated in the written order from the child's physician, physician assistant, or advanced practice registered nurse.
(2) The training shall be updated at least every three years when a child with diabetes mellitus who requires finger stick blood glucose testing is present at the youth camp.
(A) Documentation that such designated staff members have been trained to administer finger stick blood glucose tests shall be in writing and kept at the youth camp for a period of three (3) years for review by the Office. Such documentation shall indicate:
(c) Administration of Finger Stick Blood Glucose Test

(1) Except as provided in subdivision (3) of this subsection, only designated staff members trained in accordance with subsection (b) of this section may administer the finger stick blood glucose test in youth camps. No staff member under eighteen years of age shall administer finger stick blood glucose tests to another person at a youth camp.

(2) Whenever a child diagnosed with diabetes mellitus has orders to receive finger stick blood glucose monitoring is enrolled and present at the youth camp, a designated staff member who has been trained to administer finger stick blood glucose tests shall be present at the youth camp.

(3) Upon the written authorization of the child's physician, physician assistant or advanced practice registered nurse, and the child's parent, a child may self-administer the finger stick blood glucose test under the direct supervision of a designated staff member who has met the training requirements in subsection (b) of this section.

(d) Equipment

(1) The child's parent shall supply the licensee with the necessary equipment and supplies to meet the child's individual needs. Such equipment and supplies shall include, but not be limited to, the following items:

(A) The child's blood glucose meter and strips;
(B) An appropriate retracting lancing device used in accordance with infection control procedures;
(C) Tissues or cotton balls; and
(D) Fast acting carbohydrates to be given to the child as indicated in the written order from the child's physician, physician assistant, or advanced practice registered nurse for hypoglycemia.

(2) Such equipment and supplies shall be labeled with the child's name and shall remain in a locked storage area when not in use.

(3) The licensee shall obtain a signed agreement from the child's parent that the parent agrees to check and maintain the child's equipment in accordance with manufacturer's instructions, restock supplies, and remove material to be discarded from the facility. All materials to be discarded shall be kept locked until it is given to the child's parent for disposal. The youth camp may dispose of medical waste if it has a contract with a medical waste disposal contractor, in accordance with local, state, and federal laws.

(e) Record Keeping

(1) The licensee shall keep the following records at the youth camp as part of the child's medical record, and shall update them annually or when there is any change in the information:

(A) A current, written order signed and dated by the child's physician, physician assistant, or advanced practice registered nurse indicating:
   (i) The child's name;
   (ii) The diagnosis of diabetes mellitus;
   (iii) The type of blood glucose monitoring test required;
   (iv) The test schedule;
   (v) The target ranges for test results;
   (vi) Specific actions to be taken and carbohydrates to be given when test results fall outside specified ranges;
(vii) Diet requirements and restrictions;
(viii) Any requirements for monitoring the child's recreational activities; and
(ix) Conditions requiring immediate notification of the child's parent, emergency contact, the child's physician, physician assistant, or advanced practice registered nurse.

(B) An authorization form signed by the child's parent which includes the following information:
(i) The child's name;
(ii) The parent's name;
(iii) The parent's address;
(iv) The parent's cell phone numbers and telephone numbers at home and at work;
(v) Two adult, emergency contact people including names, addresses and telephone numbers;
(vi) The names of the staff member(s) designated to administer finger stick blood glucose tests and provide care to the child during testing;
(vii) Additional comments relative to the care of the child, as needed;
(viii) The signature of the parent;
(ix) The date the authorization is signed; and
(x) The name, address and telephone number of the child's physician, physician assistant or advanced practice registered nurse.

(C) The youth camp director or the youth camp director's designee shall notify the child's parent in writing of the results of all blood glucose tests and any action taken based on the test results, and shall document the test results and any action taken in the child's medical record.

Section 2.
Section 19-13-B27a of the Regulations of Connecticut State Agencies is repealed.
Statement of Purpose

To amend the regulations governing youth camps to include changes in the regulations as proposed by the Youth Camp Safety Advisory Council, expand the list of acceptable providers of cardiopulmonary resuscitation, establish requirements for challenge courses, establish standards for the storage of emergency medications, eliminate the requirement to petition the Office to administer certain medications, and make technical corrections.
CERTIFICATION

This certification statement must be completed in full, including items 3 and 4, if they are applicable.

1) I hereby certify that the above (check one) ☒ Regulations ☐ Emergency Regulations

2) are (check all that apply) ☒ adopted ☐ amended ☒ repealed by this agency pursuant to the following authority(ies): (complete all that apply)
   a. Connecticut General Statutes section(s) 19a-428.
   b. Public Act Number(s) ______.
      (Provide public act number(s) if the act has not yet been codified in the Connecticut General Statutes.)

3) And I further certify that notice of intent to adopt, amend or repeal said regulations was published in the Connecticut Law Journal on April 10, 2012.
   (Insert date of notice publication if publication was required by CGS Section 4-168.)

4) And that a public hearing regarding the proposed regulations was held on ______;
   (Insert date(s) of public hearing(s) held pursuant to CGS Section 4-168(a)(7), if any, or pursuant to other applicable statute.)

5) And that said regulations are EFFECTIVE (check one, and complete as applicable)
   ☒ When filed with the Secretary of the State
   ☐ on (insert date) ______

DATE SIGNED (Head of Board, Agency or Commission) OFFICIAL TITLE, DULY AUTHORIZED

APPROVED by the Attorney General as to legal sufficiency in accordance with CGS Section 4-169, as amended

DATE SIGNED (Attorney General or AG’s designated representative) OFFICIAL TITLE, DULY AUTHORIZED

Proposed regulations are DEEMED APPROVED by the Attorney General in accordance with CGS Section 4-169, as amended, if the attorney General fails to give notice to the agency of any legal insufficiency within thirty (30) days of the receipt of the proposed regulation.

(For Regulation Review Committee Use ONLY)

☐ Approved ☐ Rejected without prejudice
☐ Approved with technical corrections ☐ Disapproved in part, (Indicate Section Numbers disapproved only)
☐ Deemed approved pursuant to CGS Section 4-170(c)

By the Legislative Regulation Review Committee in accordance with CGS Section 4-170, as amended

DATE SIGNED (Administrator, Legislative Regulation Review Committee)

Two certified copies received and filed and one such copy forwarded to the Commission on Official Legal Publications in accordance with CGS Section 4-172, as amended.

DATE SIGNED (Secretary of the State) BY

(For Secretary of the State Use ONLY)
GENERAL INSTRUCTIONS

1. All regulations proposed for adoption, amendment or repeal, except emergency regulations, must be presented to the Attorney General for his/her determination of legal sufficiency. (See CGS Section 4-169.)

2. After approval by the Attorney General, the original and one electronic copy (in Word format) of all regulations proposed for adoption, amendment or repeal must be presented to the Legislative Regulation Review Committee for its action. (See CGS Sections 4-168 and 4-170 as amended by Public Act 11-150, Sections 18 and 19.)

3. Each proposed regulation section must include the appropriate regulation section number and a section heading. (See CGS Section 4-172.)

4. New language added to an existing regulation must be in underlining or CAPITAL LETTERS, as determined by the Regulation Review Committee. (See CGS 4-170(b).)

5. Existing language to be deleted must be enclosed in brackets [ ]. (See CGS 4-170(b).)

6. A completely new regulation or a new section of an existing regulation must be preceded by the word "(NEW)" in capital letters. (See CGS Section 4-170(b).)

7. The proposed regulation must have a statement of its purpose following the final section of the regulation. (See CGS Section 4-170(b).)

8. The Certification Statement portion of the form must be completed, including all applicable information regarding Connecticut Law Journal notice publication date(s) and public hearing(s). (See more specific instructions below.)

9. Additional information regarding rules and procedures of the Legislative Regulation Review Committee can be found on the Committee’s web site: http://www.cga.ct.gov/rr/.


CERTIFICATION STATEMENT INSTRUCTIONS
(Numbers below correspond to the numbered sections of the statement)

1. Indicate whether the regulation is a regular or an emergency regulation adopted under the provisions of CGS Section 4-168(l).

2. a) Indicate whether the regulation contains newly adopted sections, amendments to existing sections, and/or repeals existing sections. Check all cases that apply.

   b) Indicate the specific legal authority that authorizes or requires adoption, amendment or repeal of the regulation. If the relevant public act has been codified in the most current biennial edition of the Connecticut General Statutes, indicate the relevant statute number(s) instead of the public act number. If the public act has not yet been codified, indicate the relevant public act number.

3. Except for emergency regulations adopted under CGS 4-168(f), and technical amendments to an existing regulation adopted under CGS 4-168(g), an agency must publish notice of its intent to adopt a regulation in the Connecticut Law Journal. Enter the date of notice publication.

4. CGS Section 4-168(a)(7) prescribes requirements for the holding of an agency public hearing regarding proposed regulations. Enter the date(s) of the hearing(s) held under that section, if any; also enter the date(s) of any hearing(s) the agency was required to hold under the provisions of any other law.

5. As applicable, enter the effective date of the regulation here, or indicate that it is effective upon filing with the Secretary of the State. Please note the information below.

   Regulations are effective upon filing with the Secretary of the State or at a later specified date. See CGS Section 4-172(b) which provides that each regulation is effective upon filing, or, if a later date is required by statute or specified in the regulation, the later date is the effective date. An effective date may not precede the effective date of the public act requiring or permitting the regulation. Emergency regulations are effective immediately upon filing with the Secretary of the State, or at a stated date less than twenty days thereafter.
CERTIFICATION

This certification statement must be completed in full, including items 3 and 4, if they are applicable.

1) I hereby certify that the above (check one) ☒ Regulations ☐ Emergency Regulations

2) are (check all that apply) ☒ adopted ☐ amended ☒ repealed by this agency pursuant to the following authority(ies): (complete all that apply)

   a. Connecticut General Statutes section(s) 19a-428.

   b. Public Act Number(s) ______.

      (Provide public act number(s) if the act has not yet been codified in the Connecticut General Statutes.)

3) And I further certify that notice of intent to adopt, amend or repeal said regulations was published in the Connecticut Law Journal on April 10, 2012;

      (Insert date of notice publication if publication was required by CGS Section 4-168.)

4) And that a public hearing regarding the proposed regulations was held on ______;

      (Insert date(s) of public hearing(s) held pursuant to CGS Section 4-168(a)(7), if any, or pursuant to other applicable statute.)

5) And that said regulations are EFFECTIVE (check one, and complete as applicable)

   ☒ When filed with the Secretary of the State

   OR ☐ on (insert date) ______

DATE 5/16/17
SIGNER Acting Commissioner
OFFICIAL TITLE, D ULY AUTHORI ZED

APPROVED by the Attorney General as to legal sufficiency in accordance with CGS Section 4-169, as amended

DATE 6/2/17
SIGNER Assoc. A.G.
OFFICIAL TITLE, D ULY AUTHORI ZED

Proposed regulations are DEEMED APPROVED by the Attorney General in accordance with CGS Section 4-169, as amended, if the attorney General fails to give notice to the agency of any legal insufficiency within thirty (30) days of the receipt of the proposed regulation.

(For Regulation Review Committee Use ONLY)

☐ Approved ☐ Rejected without prejudice

☒ Approved with technical corrections ☐ Disapproved in part, (Indicate Section Numbers disapproved only)

☐ Deemed approved pursuant to CGS Section 4-170(c)

By the Legislative Regulation Review Committee in accordance with CGS Section 4-170, as amended

DATE 7-24-17
SIGNER Administrator, Legislative Regulation Review Committee

Two certified copies received and filed and one such copy forwarded to the Commission on Official Legal Publications in accordance with CGS Section 4-172, as amended.

DATE 9-1-2017
SIGNER Secretary of the State
BY

(For Secretary of the State Use ONLY)