

## **101. Definitions**

For the purpose of this regulation, the following definitions shall apply:

A. Abuse. Physical abuse or psychological abuse.

1. Physical Abuse. The act of intentionally inflicting or allowing to be inflicted physical injury on a resident by an act or failure to act. Physical abuse includes, but is not limited to, slapping, hitting, kicking, biting, choking, pinching, burning, actual or attempted sexual battery, use of medication outside the standards of reasonable medical practice for the purpose of controlling behavior, and unreasonable confinement. Physical abuse also includes the use of a restrictive or physically intrusive procedure to control behavior for the purpose of punishment except that a therapeutic procedure prescribed by a physician or other legally authorized healthcare professional or that is part of a written ICP by a physician or other legally authorized healthcare professional is not considered physical abuse. Physical abuse does not include altercations or acts of assault between residents.

2. Psychological Abuse. The deliberate use of any oral, written, or gestured language or depiction that includes disparaging or derogatory terms to a resident or within the resident's hearing distance, regardless of the resident's age, ability to comprehend, or disability, including threats or harassment or other forms of intimidating behavior causing fear, humiliation, degradation, agitation, confusion, or other forms of serious emotional distress.

B. Activities of Daily Living (ADL). Those personal functions performed by an individual in the course of a day that include, but are not limited to, walking; bathing; shaving; brushing teeth; combing hair; dressing; eating; getting in or getting out of bed; toileting; ambulating and other similar activities.

C. Administering Medication. The direct application of a single dose of a medication to the body of a resident by injection, ingestion, or any other means. It includes the acts of preparing and giving medications in accordance with the orders of a physician or other legally authorized healthcare provider as to medication, dosage, route and frequency; observing, recording, and reporting desired effects, adverse reactions, and side effects of medication therapy; intervening when emergency care is required as a result of medication therapy; appropriately instructing the resident regarding his or her medication; recognizing accepted prescribing limits and reporting deviations to the prescriber.

D. Administrator. The individual designated by the licensee who has the authority and responsibility to manage the facility, who is in charge of all functions and activities of the facility, and who is appropriately licensed as a nursing home administrator by the South Carolina State Board of Long-Term Health Care Administrators.

E. Adult. A person eighteen (18) years of age or older.

F. Advance Directive. Any document recognized under state law indicating a resident's choice with regard to a specific service, treatment, medication or medical procedure option that may be implemented in the future, such as power of attorney, healthcare directive, limited or restricted treatment cardio-pulmonary resuscitation (CPR), do not resuscitate (DNR), and organ tissue donation.

G. Airborne Infection Isolation (AII). A room designed to maintain Airborne Infection Isolation, formerly called a negative pressure isolation room. An Airborne Infection Isolation room is a single-occupancy resident-care room used to isolate persons with suspected or confirmed infectious tuberculosis (TB) disease. Environmental factors are controlled in Airborne Infection Isolation rooms to minimize the transmission of infectious agents that are usually spread from person-to-person by droplet nuclei associated with coughing or aerosolization of contaminated fluids. Airborne Infection Isolation rooms may provide negative pressure in the room (so that air flows under the door gap into the room), an air flow rate of six to twelve (6–12) air changes per hour (ACH), and direct exhaust of air from the room to the outside of the building or recirculation of air through a high efficiency particulate air (HEPA) filter.

H. Annual (Annually). A time period that requires an activity to be performed at least every twelve to thirteen (12 to 13) months.

I. Application. A completed application form and any supplemental documentation and information required by this regulation, e.g., fee, emergency evacuation plan.

J. Assessment. A procedure for determining the nature and extent of the problem(s) and needs of a resident and/or a potential resident to ascertain if the facility can adequately address those problems, meet those needs, and to secure information for use in the development of the ICP. Included in the process is an evaluation of the physical, emotional, behavioral, social, spiritual, nutritional, recreational, and, when appropriate, pain management, vocational, educational, legal status/needs of a resident and/or a potential resident. Consideration of each resident's needs, strengths, and weaknesses shall be included in the assessment.

K. Blood Assay for *Mycobacterium tuberculosis* (BAMT). A general term to refer to *in vitro* diagnostic tests that assess for the presence of tuberculosis (TB) infection with *M. tuberculosis*. This term includes, but is not limited to, IFN- $\gamma$  release assays (IGRA).

L. Certified Nurse Aide (CNA). A person whose duties are assigned by a licensed nurse and who has successfully completed a state-approved training program or course with a curriculum prescribed by the South Carolina Department of Health and Human Services, holds a certificate of training from that program or course and is listed on the South Carolina Registry of Certified Nurse Aides.

M. Change in Controlling Interest. The acquisition of a healthcare facility or legal entity owning a healthcare facility directly or indirectly by purchase, lease, gift, donation, inheritance, sale of stock, or comparable arrangement, including arrangements where the licensee does not change.

N. Change of Licensee. Where any of the following occurs:

1. A change in the controlling interest even if, in the case of a corporation or partnership, the legal entity retains its identity and name.
2. A change of the legal entity, *e.g.*, sole proprietorship to or from a corporation, partnership to or from a corporation, even if the controlling interest does not change.
3. In a new or change in management agreement, if the ultimate authority for the operation of the facility is surrendered and transferred from the licensee to a new manager, then a change of licensee has occurred.

O. Consultation. A visit by Department representatives who will provide information to the licensee in order to facilitate compliance with these regulations.

P. Contact Investigation. Procedures that occur when a case of infectious TB is identified, including finding persons (contacts) exposed to the case, testing and evaluation of contacts to identify Latent TB Infection (LTBI) or TB disease, and treatment of these persons, as indicated.

Q. Controlled Substance. A medication or other substance included in Schedule I, II, III, IV, and V of the Federal Controlled Substances Act and the South Carolina Controlled Substances Act.

R. Controlling Interest. In the case of a corporation, controlling interest means more than fifty percent (50%) of the total combined voting power of all classes of stock of the corporation entitled to vote or more than fifty percent (50%) of the capital, profits or beneficial interest in the voting stock of the corporation. In the case of a partnership, association, trust or other entity, controlling interest means more than fifty percent (50%) of the capital, profits or beneficial interest in the partnership, association, trust or other entity.

S. Dentist. A person currently licensed to practice dentistry by the South Carolina Board of Dentistry.

T. Department. The South Carolina Department of Health and Environmental Control (DHEC).

U. Designee. A physician, dentist, osteopath, podiatrist, physician's assistant, or advanced practice registered nurse selected by a prescriber to sign orders for medication or treatment in the prescriber's absence.

V. Dietitian. An individual who is registered by the Commission on Dietetic Registration.

W. Direct Care Staff Member and Direct Care Volunteer. A licensed nurse, or nurse aide; any other licensed professional who provides to residents 'hands on' direct care or services and includes, but is not limited to, a physical, speech, occupational, or respiratory care therapist; a person who is not licensed but provides 'hands on' physical assistance or care to a resident. It does not include a family member, a faculty member or student enrolled in an educational program, including clinical study in a nursing home.

X. Discharge. The termination of resident or outpatient status in a facility by which the facility no longer maintains active responsibility for the care of the resident or outpatient.

Y. Dispensing Medication. The transfer of possession of one (1) or more doses of a medication or device by a licensed pharmacist or individual as permitted by law, to the ultimate consumer or his or her agent pursuant to a lawful order of a practitioner in a suitable container appropriately labeled for subsequent administration to, or use by a resident.

Z. Do Not Resuscitate (DNR) Order. An order entered by the resident's attending physician in the resident's record that states that in the event the resident suffers cardiac or respiratory arrest, cardio-pulmonary resuscitation should not be attempted. The order may contain limiting language to allow only certain types of cardio-pulmonary resuscitation to the exclusion of other types of cardio-pulmonary resuscitation.

AA. Electronic Signature. An electronic sound, symbol, or process attached to or logically associated with a record and executed or adopted by an individual with the legal authority to sign the record.

BB. Existing Facility. A facility that was in operation and/or one that began the construction or renovation of a building (for which the licensee received written approval from the Department's Division of Health Facilities Construction, DHFC), for the purpose of operating the facility, prior to the effective date of this regulation. The licensing standards governing new facilities apply if and when an existing facility is not continuously operated and licensed under this regulation.

CC. Exploitation. 1) Causing or requiring a resident to engage in an activity or labor that is improper, unlawful, or against the reasonable and rational wishes of a resident. Exploitation does not include requiring a resident to participate in an activity or labor that is a part of a written ICP or that is prescribed or authorized by the resident's attending physician; 2) an improper, unlawful, or unauthorized use of the funds, assets, property, power of attorney, guardianship, or conservatorship of a resident by an individual for the profit or advantage of that individual or another individual; 3) or causing a resident to

purchase goods or services for the profit or advantage of the seller or another individual through undue influence, harassment, duress, force, coercion, or swindling by overreaching, cheating, or defrauding the resident through cunning arts or devices that delude the resident and cause him or her to lose money or other property.

DD. Facility. A nursing home licensed by the Department.

1. Proposed Facility. A location for which the Department has received application for licensing as a nursing home.

2. Unlicensed Facility. A location for which the Department has determined that nursing care is being provided to two (2) or more individuals unrelated to the owner/operator who has not received a license to provide such nursing care at that location.

EE. Family Council. A group of individuals, family members or responsible parties of the residents, meeting as a group, having the right to express grievances and to make recommendations and to suggest ways to improve resident care and services.

FF. Feeding Assistant. A person who is paid to feed or provide assistance with feeding residents of a nursing home. The feeding assistant shall not perform other nursing or nursing-related duties, *e.g.*, measuring or recording output, transferring and toileting.

GG. Fire Resistant. The ability of a structure, material, or assemblage to resist the effects of a large-scale severe fire exposure.

HH. Fire-Resistive Rating. The time in hours or fractions thereof that materials and their assemblies will resist fire exposure as determined by fire tests conducted in compliance with recognized standards, *i.e.*, NFPA, ASTM.

II. Health Assessment. An evaluation of the health status of a staff member or volunteer by a physician, other legally authorized healthcare provider, or registered nurse, pursuant to written standing orders and/or protocol approved by a physician's signature.

JJ. Incident. An unusual unexpected adverse event, including harm, injury, or death of staff or residents, accidents, *e.g.*, medication errors, adverse medication reactions, elopement of a resident.

KK. Individual Care Plan (ICP). A documented regimen of appropriate care, treatment, services or written action plan prepared by the facility for each resident, based on assessment data, *e.g.*, social services, which is to be implemented for the benefit of the resident.

LL. Inspection. A visit by a Department representative(s) for the purpose of determining compliance with this regulation.

MM. Institutional Nursing Home. A nursing home (established within the jurisdiction of a larger nonmedical institution) that maintains and operates organized facilities and services to accommodate only students, residents or inmates of the institution.

NN. Interdisciplinary Team. A group designated by the facility to provide or supervise care, treatment, and services provided by the facility. The group normally includes the following persons: a registered nurse, dietary, social services, direct care staff members, nurse aides, and activity professionals.

OO. Investigation. An official inquiry by an authorized individual(s) to a licensed or unlicensed facility for the purpose of determining the validity of allegations received by the Department relating to this regulation.

PP. Isolation. The separation of individuals known or suspected (via signs, symptoms, or laboratory criteria) to be infected with a contagious disease to prevent them from transmitting disease to others.

QQ. Latent TB Infection (LTBI). Infection with *M. tuberculosis*. Persons with Latent TB Infection carry the organism that causes TB but do not have TB disease, are asymptomatic, and are noninfectious. Such persons usually have a positive reaction to the tuberculin skin test.

RR. Legally Authorized Healthcare Provider. An individual authorized by law and currently licensed in South Carolina to provide specific medical treatments, care, or services to staff members and/or residents, *e.g.*, advanced practice registered nurses, physicians' assistants.

SS. Legend Drug.

1. A medication required by federal law to be labeled with any of the following statements prior to being dispensed or delivered:

a. "Caution: Federal law prohibits dispensing without prescription";

b. "Rx only"; or

2. A medication required by federal or state law to be dispensed pursuant to a prescription medication order or restricted to use by practitioners only; or

3. Any medication products designated by the South Carolina Board of Pharmacy to be a public health threat; or

4. Any prescribed compounded prescription within the meaning of the South Carolina Pharmacy Practice Act.

TT. License. A printed certificate issued by the Department to the licensee that authorizes the operation of a nursing home.

UU. Licensed Bed. A bed set up, or capable of being set up, within twenty-four (24) hours in a nursing home for the use of one (1) resident.

VV. Licensed Nurse. A person licensed by the South Carolina Board of Nursing as a registered nurse or licensed practical nurse.

WW. Licensee. The individual, corporation, organization, or public entity that has received a license to provide care, treatment, and services at a facility and with whom rests the ultimate responsibility for compliance with this regulation. The licensee shall be the entity to which the Certificate of Need has been issued or that has been exempted from Certificate of Need review.

1. Proposed Licensee. The individual, corporation, organization, or public entity that has submitted and the Department has received an application to obtain a license to operate a facility.

2. Unlicensed Facility Owner. The individual, corporation, organization, or public entity that has been identified by the Department as the owner/operator at a location where nursing care is being provided to two (2) or more individuals unrelated to the owner/operator, and who has not been issued a license to provide nursing care at that location by the Department.

XX. Medication. A substance that has therapeutic effects, including, but not limited to, legend drugs, nonlegend and herbal products, vitamins, and nutritional supplements, *etc.*

YY. Monitoring. The observation of a resident including psychological variables, such as behavior and observable affective state, and the values of certain physiologic variables, such as pulse, blood pressure, oxygen saturation, and respiration, by using instruments to display and/or record (continuously or intermittently).

ZZ. Monthly. A time period that requires an activity to be completed at least twelve (12) times a year within intervals ranging from twenty-five to thirty-five (25 to 35) days.

AAA. Neglect. The failure or omission of a direct care staff member or direct care volunteer to provide the care, goods, or services necessary to maintain the health or safety of a resident including, but not limited to, food, clothing, medicine, shelter, supervision, and medical services. Neglect may be repeated conduct or a single incident that has produced or could result in physical or psychological harm or

substantial risk of death. Noncompliance with regulatory standards alone does not constitute neglect.

BBB. New Facility. All buildings or portions of buildings, new and existing building(s), that are:

1. Being licensed for the first time;
2. Providing a different service that requires a change in the type of license; or
3. Being licensed after the previous licensee's license has been revoked, suspended, or after the previous licensee has voluntarily surrendered the license and the facility has not continuously operated.

CCC. Nonlegend Medication. A medication that may be sold without a prescription and that is labeled for use by the consumer in accordance with the requirements of the laws of this State and the federal government.

DDD. Nursing Care. A degree of care provided to a resident that reaches a level that such care, due to the degree of complexity required, can only be safely and effectively carried out by a licensed nurse or other legally authorized healthcare provider in accordance with South Carolina law.

EEE. Nursing Home. A facility with an organized nursing staff to maintain and operate organized care and services to accommodate two (2) or more unrelated individuals over a period exceeding twenty-four (24) hours that is operated either in connection with a hospital or as a freestanding facility for the express or implied purpose of providing nursing care for individuals who are not in need of hospital care. Rehabilitative therapies may be provided on an outpatient basis.

FFF. Occupational Therapist. A person currently licensed as such by the South Carolina Board of Occupational Therapy Examiners.

GGG. On Call. The continuous availability in person, by telephone, or by telecommunication to staff who are on duty in the facility and are immediately available to go on duty in the facility upon short notice.

HHH. On Duty. Staff members and volunteers who are in the building of a facility and immediately available.

III. Outpatient. A person who has been admitted for specific care and services only at a nursing home where the person leaves the facility the same day and such daily routine may be repeated until the person is discharged.

JJJ. Personal Care. The provision of one (1) or more of the following services, as required by the ICP or orders by the physician or other legally authorized healthcare provider or as reasonably expected by the resident or responsible party, including:

1. Assisting and/or directing the resident with activities of daily living;

2. Being aware of the resident's location;

3. Monitoring the activities of the resident while on the premises of the residence to assure his or her health and safety.

KKK. Pharmacist. A person currently registered as such by the South Carolina Board of Pharmacy.

LLL. Physical Examination. An examination of a resident that addresses those issues identified in Section 1200 of this regulation.

MMM. Physical Therapist. A person currently licensed as such by the South Carolina Board of Physical Therapy Examiners.

NNN. Physician. A person currently licensed as such by the South Carolina Board of Medical Examiners.

OOO. Physician Order. A physician's written authorization or prescription for the provision of services.

PPP. Physician's Assistant. A person currently licensed as such by the South Carolina Board of Medical Examiners.

QQQ. Quality Improvement Program. The process used by a facility to examine its methods and practices of providing care, treatment, and services, identify the ways to improve its performance, and take actions that result in higher quality of care and services for the facility's residents.

RRR. Quarterly. A time period that requires an activity to be performed at least four (4) times a year within intervals ranging from eighty-one to ninety-nine (81 to 99) days.

SSS. Ramp. An inclined accessible route that facilitates entrance to or egress from or within a facility.

TTT. Repeat Violation. The recurrence of any violation cited under the same section of the regulation within a thirty-six-month (36-month) period. The time period determinant of repeat violation status is not interrupted by licensee changes.

UUU. Resident. Any person, other than a staff member or volunteer, who resides in a facility and occupies a licensed bed.

VVV. Resident Council. A group of residents having the right to meet as a group to address resident issues and to make recommendations and suggest ways to improve resident care and services.

WWW. Resident Room. An area enclosed by four (4) ceiling high walls (or as determined by the Department) that can house one (1) or more residents of the facility.

XXX. Respite Care. Short-term care (a period of six (6) weeks or less) provided to an individual to relieve the family members or other individuals caring for the individual, but for not less than twenty-four (24) hours.

YYY. Responsible Party. A person who is authorized by the resident or by law to make decisions on behalf of a resident, to include, but not be limited to, a court-appointed guardian (or legal guardian as referred to in the Bill of Rights for Residents of Long-Term Care Facilities) or conservator, or individual with a healthcare power of attorney or other durable power of attorney.

ZZZ. Restraint. Any means by which movement of a resident is inhibited, *i.e.*, physical, mechanical, chemical. In addition, devices shall be considered restraints if a resident is unable to easily release from the device. Wrist bands or devices that trigger electronic alarms to warn staff that a resident is leaving a chair, bed, or room that do not restrict freedom of movement are not considered restraints.

AAAA. Revocation of License. An action by the Department to cancel or annul a license by recalling, withdrawing, or rescinding a facility's authority to operate.

BBBB. Risk Assessment. A periodic comprehensive process of gathering, organizing, and analyzing tuberculosis data by a qualified individual or group of individuals, *e.g.*, epidemiologists, infectious disease specialists, pulmonary disease specialists, infection-control practitioners, health-care administrators, occupational health personnel, or local public health personnel, to establish the probability of adverse health impacts and to determine the current risk for transmission of tuberculosis in all areas of the facility.

CCCC. Self-Administration. A procedure in which any medication is taken orally, injected, inserted, or topically or otherwise administered by a resident to himself or herself without prompting. The procedure is performed without staff assistance and includes removing an individual dose from a previously dispensed and labeled container (including a unit dose container), verifying it with the directions on the label, taking it orally, injecting, inserting, or applying topically or otherwise administering the medication.

DDDD. Shifts. Shift one (1) is a work period that occurs primarily during the daytime hours including, but not limited to, seven a.m. to three p.m. (7:00 a.m. to 3:00 p.m.); Shift two (2) is a work period that generally includes both daytime and evening hours including, but not limited to, three p.m. to eleven p.m. (3:00 p.m. to 11:00 p.m.); Shift three (3) is a work period that occurs primarily during the nighttime hours including, but not limited to, eleven p.m. to seven a.m. (11:00 p.m. to 7:00 a.m.) In those facilities utilizing two (2) twelve-hour (12-hour) shifts, shift one (1) is the twelve-hour (12-hour) shift occurring primarily during the day, and the next shift is the twelve-hour (12-hour) shift occurring primarily during the night (See Section 606.C).

EEEE. Signal System. A system that visibly and audibly registers nurse calls electronically from the resident's bed, toilet, or bathing area to the staff work area.

FFFF. Signature. At least the first initial and full surname and title, e.g., R.N., L.P.N., D.D.S., M.D., or D.O., of a person, written with his or her own hand. A controlled electronic representation of the signature or an approved rubber stamp signature may be used as legally appropriate.

GGGG. Staff Member. A person who is a compensated employee of the facility on either a full or part-time basis.

HHHH. Staff Work Area. A designated functional unit of the facility with ancillary, administrative, service facilities, communication and recording tools and equipment essential for providing nursing services to the residents.

IIII. Suspension of License. An action by the Department terminating the licensee's authority to admit new residents or readmit former residents for a period of time until the Department rescinds that restriction. It may also require the transfer or relocation of residents or the discontinuance of the services, treatment or care provided to residents. Suspension of license also includes instances when the Department determines that an immediate threat to the residents exists and residents are appropriately transferred, per S.C. Code Ann. Section 44-7-320(A) (1976, as amended).

JJJJ. Tuberculin Skin Test (TST). A diagnostic aid for detecting *M. tuberculosis* infection. A small dose (0.1 mil) of purified protein derivative (PPD) tuberculin is injected just beneath the surface of the skin (by the Mantoux method), and the area is examined for induration (hard, dense, raised area at the site of TST administration) by palpation forty-eight to seventy-two (48-72) hours after the injection (but positive reactions can still be measurable up to a week after TST administration). The size of the indurated area is measured with a millimeter ruler after identifying the margins transverse (perpendicular) to the long axis of the forearm. The reading is recorded in millimeters, including zero (0) mm to represent no induration. Redness/erythema is insignificant and is not measured or recorded.

KKKK. Two-Step Testing. Procedure used for the baseline skin testing of persons who may periodically receive TST to reduce the likelihood of mistaking a boosted reaction for a new infection. If the initial TST result is interpreted as negative, a second test is repeated one to three (1-3) weeks after the initial test. If the initial TST result is interpreted as positive, then the reaction shall be documented and followed up as positive; this reaction will serve as the baseline and no further skin testing is indicated. If the second test is given and its result is interpreted as positive, then the reaction shall be documented and followed up as positive; this reaction will serve as the baseline reading and no further skin testing is indicated. In general, the result of the second TST of the two-step procedure shall be used as the baseline reading.

LLLL. Unit Dose. The ordered amount of a drug in a prepackaged dosage form ready for administration to a particular individual by the prescribed route at the prescribed time in accordance with all applicable laws and regulations governing these practices.

MMMM. Unrelated (As in kinship). All degrees of kinship that are not included “within the third degree of consanguinity,” *i.e.*, a spouse, son, daughter, sister, brother, parent, aunt, uncle, niece, nephew, grandparent, great-grandparent, grandchild, or great-grandchild.

NNNN. Volunteer. An individual who performs tasks at the facility at the direction of facility staff without compensation.

OOOO. Weekly. A time period that requires an activity to be completed at least fifty-two (52) times a year within intervals ranging from six to eight (6 – 8) days.

PPPP. Written. Any worded or numbered expression, that can be read, reproduced, and later communicated, and includes electronically transmitted and stored information.

## **102. References**

A. The following Departmental standards and/or publications are referenced in these regulations:

1. Regulation 61-4, Controlled Substances;
2. Regulation 61-19, Vital Statistics;
3. Regulation 61-20, Communicable Diseases;
4. Regulation 61-25, Retail Food Establishments;
5. Regulation 61-51, Public Swimming Pools;
6. Regulation 61-58, State Primary Drinking Water Regulations;
7. Regulation 61-67, Standards for Wastewater Facility Construction;
8. Regulation 61-79, Hazardous Waste Management Regulations;
9. Regulation 61-105, Infectious Waste Management;
10. South Carolina Guidelines for Prevention and Control of Antibiotic Resistant Organisms.

B. Non-Departmental standards, publications, or organizations:

1. Alzheimer’s Special Care Disclosure Act;
2. American Association of Blood Banks (AABB) (Blood Products Advisory Committee, March 14, 2002);

3. American Society of Heating, Refrigerating and Air-Conditioning Engineers (ASHRAE);
4. American Society for Testing and Materials (ASTM);
5. Bill of Rights for Residents of Long-Term Care Facilities;
6. Bloodborne Pathogens Standards, Occupational Safety and Health Act of 1970 (OSHA 29 CFR 1910.1030, April 3, 2006);
7. Centers for Disease Control and Prevention (CDC) (CDC Personnel Health Guideline, June, 1998);
8. Centers for Medicare and Medicaid Services (CMS);
9. Civil Rights Act of 1964;
10. Compressed Gas Association (CGA);
11. Food and Nutrition Board of the Institute of Medicine, National Academy of Sciences;
12. Guidelines for Preventing the Transmission of Mycobacterium tuberculosis in Health-Care Settings, 2005;
13. National Fire Protection Association (NFPA) (NFPA 25, 2002; NFPA 30, 2003; NFPA 701, 2004; NFPA 70, 99, 2005; NFPA 101, 2006; NFPA 10, 13, 14, 15, 72, 2007);
14. National Sanitation Foundation (NSF International);
15. Occupational Safety and Health Act of 1970 (OSHA);
16. Omnibus Adult Protection Act;
17. South Carolina State Fire Marshal Regulations.

C. The Department shall, at its discretion, enforce new laws that may amend the above-noted references.