

# NORTH CAROLINA REGISTER

VOLUME 38 • ISSUE 21 • Pages 1336 – 1441

May 1, 2024

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### PUBLISHED BY

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## **Contact List for Rulemaking Questions or Concerns**

For questions or concerns regarding the Administrative Procedure Act or any of its components, consult with the agencies below. The bolded headings are typical issues which the given agency can address but are not inclusive.

### **Rule Notices, Filings, Register, Deadlines, Copies of Proposed Rules, etc.**

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116 West Jones Street

Raleigh, North Carolina 27603-8005

Contact: Julie Ventaloro, Economic Analyst

osbmruleanalysis@osbm.nc.gov

984-236-0694

NC Association of County Commissioners

919-715-2893

215 North Dawson Street

Raleigh, North Carolina 27603

contact: Amy Bason

amy.bason@ncacc.org

NC League of Municipalities

919-715-2925

424 Fayetteville Street, Suite 1900

Raleigh, North Carolina 27601

contact: Monica Jackson

mjackson@nclm.org

### **Legislative Process Concerning Rulemaking**

545 Legislative Office Building

300 North Salisbury Street

919-733-2578

Raleigh, North Carolina 27611

919-715-5460 FAX

Jason Moran-Bates, Staff Attorney

Chris Saunders, Staff Attorney

Aaron McGlothlin, Staff Attorney

**NORTH CAROLINA REGISTER**  
Publication Schedule for January 2024 – December 2024

FILING DEADLINES			NOTICE OF TEXT		PERMANENT RULE			TEMPORARY RULES
Volume & issue number	Issue date	Last day for filing	Earliest date for public hearing	End of required comment Period	Deadline to submit to RRC for review at next meeting	RRC Meeting Date	Earliest Eff. Date of Permanent Rule	270 <sup>th</sup> day from publication in the Register
38:13	01/02/24	12/06/23	01/17/24	03/04/24	03/20/24	04/30/2024	05/01/24	09/28/24
38:14	01/16/24	12/19/23	01/31/24	03/18/24	03/20/24	04/30/2024	05/01/24	10/12/24
38:15	02/01/24	01/10/24	02/16/24	04/01/24	04/20/24	05/29/2024	06/01/24	10/28/24
38:16	02/15/24	01/25/24	03/01/24	04/15/24	04/20/24	05/29/2024	06/01/24	11/11/24
38:17	03/01/24	02/09/24	03/16/24	04/30/24	05/20/24	06/26/2024	07/01/24	11/26/24
38:18	03/15/24	02/23/24	03/30/24	05/14/24	05/20/24	06/26/2024	07/01/24	12/10/24
38:19	04/01/24	03/08/24	04/16/24	05/31/24	06/20/24	07/31/2024	08/01/24	12/27/24
38:20	04/15/24	03/22/24	04/30/24	06/14/24	06/20/24	07/31/2024	08/01/24	01/10/25
38:21	05/01/24	04/10/24	05/16/24	07/01/24	07/20/24	08/28/2024	09/01/24	01/26/25
38:22	05/15/24	04/24/24	05/30/24	07/15/24	07/20/24	08/28/2024	09/01/24	02/09/25
38:23	06/03/24	05/10/24	06/18/24	08/02/24	08/20/24	09/25/2024	10/01/24	02/28/25
38:24	06/17/24	05/24/24	07/02/24	08/16/24	08/20/24	09/25/2024	10/01/24	03/14/25
39:01	07/01/24	06/10/24	07/16/24	08/30/24	09/20/24	10/30/2024	11/01/24	03/28/25
39:02	07/15/24	06/21/24	07/30/24	09/13/24	09/20/24	10/30/2024	11/01/24	04/11/25
39:03	08/01/24	07/11/24	08/16/24	09/30/24	10/20/24	11/26/2024	12/01/24	04/28/25
39:04	08/15/24	07/25/24	08/30/24	10/14/24	10/20/24	11/26/2024	12/01/24	05/12/25
39:05	09/03/24	08/12/24	09/18/24	11/04/24	11/20/24	12/19/2024	01/01/25	05/31/25
39:06	09/16/24	08/23/24	10/01/24	11/15/24	11/20/24	12/19/2024	01/01/25	06/13/25
39:07	10/01/24	09/10/24	10/16/24	12/02/24	12/20/24	*01/29/2025	02/01/25	06/28/25
39:08	10/15/24	09/24/24	10/30/24	12/16/24	12/20/24	*01/29/2025	02/01/25	07/12/25
39:09	11/01/24	10/11/24	11/16/24	12/31/24	01/20/25	*02/26/2025	03/01/25	07/29/25
39:10	11/15/24	10/24/24	11/30/24	01/14/25	01/20/25	*02/26/2025	03/01/25	08/12/25
39:11	12/02/24	11/06/24	12/17/24	01/31/25	02/20/25	*03/26/2025	04/01/25	08/29/25
39:12	12/16/24	11/21/24	12/31/24	02/14/25	02/20/25	*03/26/2025	04/01/25	09/12/25

\*Dates not approved by the RRC

This document is prepared by the Office of Administrative Hearings as a public service and is not to be deemed binding or controlling.

## EXPLANATION OF THE PUBLICATION SCHEDULE

This Publication Schedule is prepared by the Office of Administrative Hearings as a public service and the computation of time periods are not to be deemed binding or controlling. Time is computed according to 26 NCAC 2C .0302 and the Rules of Civil Procedure, Rule 6.

### GENERAL

The North Carolina Register shall be published twice a month and contains the following information submitted for publication by a state agency:

- (1) temporary rules;
- (2) text of proposed rules;
- (3) text of permanent rules approved by the Rules Review Commission;
- (4) emergency rules
- (5) Executive Orders of the Governor;
- (6) final decision letters from the U.S. Attorney General concerning changes in laws affecting voting in a jurisdiction subject of Section 5 of the Voting Rights Act of 1965, as required by G.S. 120-30.9H; and
- (7) other information the Codifier of Rules determines to be helpful to the public.

**COMPUTING TIME:** In computing time in the schedule, the day of publication of the North Carolina Register is not included. The last day of the period so computed is included, unless it is a Saturday, Sunday, or State holiday, in which event the period runs until the preceding day which is not a Saturday, Sunday, or State holiday.

### FILING DEADLINES

**ISSUE DATE:** The Register is published on the first and fifteen of each month if the first or fifteenth of the month is not a Saturday, Sunday, or State holiday for employees mandated by the State Personnel Commission. If the first or fifteenth of any month is a Saturday, Sunday, or a holiday for State employees, the North Carolina Register issue for that day will be published on the day of that month after the first or fifteenth that is not a Saturday, Sunday, or holiday for State employees.

**LAST DAY FOR FILING:** The last day for filing for any issue is 15 days before the issue date excluding Saturdays, Sundays, and holidays for State employees.

### NOTICE OF TEXT

**EARLIEST DATE FOR PUBLIC HEARING:** The hearing date shall be at least 15 days but not later than 60 days after the date a notice of the hearing is published.

**END OF REQUIRED COMMENT PERIOD**  
An agency shall accept comments on the text of a proposed rule for at least 60 days after the text is published.

**DEADLINE TO SUBMIT TO THE RULES REVIEW COMMISSION:** The Commission shall review a rule submitted to it on or before the twentieth of a month by the last day of the next month.

**PUBLIC NOTICE**

Notice is hereby given pursuant to North Carolina General Statute 58-36-120 that, on April 8, 2024, the North Carolina Rate Bureau made filings for increases in insurance rates for two Mobile Home insurance policy programs (MH(C) and MH(F)) under its jurisdiction. Public notice of the filings is being published in two newspapers with statewide distribution and in the North Carolina Register. The Commissioner of Insurance may or may not schedule and conduct a hearing with respect to the filings. This information is being posted on the websites of the North Carolina Rate Bureau and the North Carolina Department of Insurance. The filings only relate to Mobile Home insurance policies under the jurisdiction of the North Carolina Rate Bureau and do not affect Dwelling Fire and Extended Coverage or Homeowners insurance policies or rates not part of the Mobile Home policy programs.

Notice of Application for a new Innovative Approval of a Wastewater System for On-site Subsurface Use

Pursuant to NCGS 130A-343(g), the North Carolina Department of Health and Human Services (DHHS) shall publish a Notice in the NC Register that a manufacturer has submitted a request for approval of a modification of a wastewater system, component, or device for on-site subsurface use. The following application has been submitted to DHHS:

Application by: Todd Harrell  
Prinsco  
1717 16<sup>th</sup> Street NE  
Wilmar, MN 56201

For: Modifications to the Innovative Approval for the Prinsco Chamber System

DHHS Contact: Wilson Mize  
919-270-9665  
Fax: 919-845-3973  
[wilson.mize@dhhs.nc.gov](mailto:wilson.mize@dhhs.nc.gov)

These applications may be reviewed by contacting the applicant or Wilson Mize, Branch Head, at 5605 Six Forks Rd, Raleigh, NC, On-Site Water Protection Branch, Environmental Health Section, Division of Public Health. Draft proposed innovative approvals and proposed final action on the application by DHHS can be viewed on the On-Site Water Protection Branch web site: <http://ehs.ncpublichealth.com/oswp/>.

Written public comments may be submitted to DHHS within 30 days of the date of the Notice publication in the North Carolina Register. All written comments should be submitted to Wilson Mize, Branch Head, On-site Water Protection Branch, 1642 Mail Service Center, Raleigh, NC 27699-1642, [wilson.mize@dhhs.nc.gov](mailto:wilson.mize@dhhs.nc.gov), or fax 919-845-3973. Written comments received by DHHS in accordance with this Notice will be taken into consideration before a final agency decision is made on the innovative subsurface wastewater system application.

North Carolina License and Theft Bureau

PUBLIC NOTICE

This serves as a notice pursuant to G.S. § 20-288 of a license application submission by a manufacturer, factory branch, factory representative, distributor, distributor branch, or distributor representative that has not been previously issued a license by the Division.

Applicant's Name: LDJ Manufacturing Inc

Applicant's Address: 1833 Highway 163, Pella IA 50219

Application Date: 03/21/2024

Names and titles of any individual listed on the application as an owner, partner, member or officer of the applicant:

Ben Cox- President

Loren Van Wyk- CEO

Chad Van Wyk - VP

**Note from the Codifier:** The notices published in this Section of the NC Register include the text of proposed rules. The agency must accept comments on the proposed rule(s) for at least 60 days from the publication date, or until the public hearing, or a later date if specified in the notice by the agency. If the agency adopts a rule that differs substantially from a prior published notice, the agency must publish the text of the proposed different rule and accept comment on the proposed different rule for 60 days. Statutory reference: G.S. 150B-21.2.

**TITLE 10A – DEPARTMENT OF HEALTH AND HUMAN SERVICES**

Notice is hereby given in accordance with G.S. 150B-21.2 that the HHS - Division of Health Service Regulation intends to adopt the rules cited as 10A NCAC 14E .0101, .0106, .0107, .0109 and .0111.

Link to agency website pursuant to G.S. 150B-19.1(c): <https://info.ncdhhs.gov/dhsr/index.html>

Proposed Effective Date: September 1, 2024

**Public Hearing:**

Date: June 27, 2024

Time: 10:00 a.m.

Location: Edgerton Building, 809 Ruggles Drive, Dorothea Dix Campus, Raleigh, North Carolina 27603

**Reason for Proposed Action:** The rules in Subchapter 14E of Title 10A of the Administrative Code (“14E rules”) were first promulgated by the North Carolina Department of Health and Human Services (“Department”) on February 1, 1976 to regulate the construction and operation of abortion clinics under its authorizing statute, G.S. 14.-45.1(a). The rules promulgated in 1976 included 10A NCAC 14E .0101, .0106, .0107, .0109, and .0111 (“five rules”) listed above. On May 16, 2023, Senate Bill 20 became law as SL 2023-14 (“New Law”). This New Law entitled “An Act to Make Various Changes to Health Care Laws and to Appropriate Funds for Health Care Programs” revised various state laws governing abortions in North Carolina. The New Law repealed the authority in G.S. 14.-45.1(a) for the 14 E rules effective July 1, 2023, and replaced it with authority in Part 4A of Chapter 131E of the General Statutes. Part 4A gave the Medical Care Commission authority to adopt the rules necessary to implement Part 4A and gave the Department authority to adopt rules necessary for licensure requirements and to administer Part 4A. The five rules listed above are the 14E rules that the Rules Review Commission has deemed to remain under the authority of the Department.

Pursuant to the authority in New Law, and prior to repeal of G.S. 14.-45.1(a), the Department adopted emergency rules on June 19, 2023 and the five rules were entered into the Administrative Code on June 3, 2023. On September 18, 2023, the Department adopted temporary rules for the five rules. The Rules Review Commission approved the five temporary rules at its October 19, 2023 meeting and the rules were entered into the Administrative Code on October 27, 2024 (rules .0101 and .0111) and December 22, 2023 (.0106, .0107, .0109.) The five rules up for permanent adoption are essentially the rules that have been in place for years with the addition of amendments to the language to align with the requirements in the New Law

and technical changes recommended by the Rules Review Commission. By providing consistency and clarity, the proposed rules will help ensure continuity of care for patients and will support the ongoing protection of the health and safety of women in obtaining lawful abortions in clinics regulated by the Department.

Comments may be submitted to: Taylor Corpening, 809 Ruggles Drive, Edgerton Building; 2701 Mail Service Center, Raleigh, NC 27699-2701; phone (919) 855-4619; email [taylor.corpening@dhhs.nc.gov](mailto:taylor.corpening@dhhs.nc.gov)

Comment period ends: July 1, 2024

**Procedure for Subjecting a Proposed Rule to Legislative Review:**

If an objection is not resolved prior to the adoption of the rule, a person may also submit a written objection to the Rules Review Commission. If the Rules Review Commission receives written and signed objections after the adoption of the Rule in accordance with G.S. 150B-21.3(b2) from 10 or more persons clearly requesting review by the legislature and the Rules Review Commission approves the rule, the rule will become effective as provided in G.S. 150B-21.3(b1). The Commission will receive written objections until 5:00 p.m. on the day following the day the Commission approves the rule. The Commission will receive letters via U.S. Mail, private courier service, or hand delivery to 1711 New Hope Church Road, Raleigh, North Carolina, or via email to [oah.rules@oah.nc.gov](mailto:oah.rules@oah.nc.gov). If you have any further questions concerning the submission of objections to the Commission, please review 26 NCAC 05 .0110 or call a Commission staff attorney at 984-236-1850.

**Fiscal impact. Does any rule or combination of rules in this notice create an economic impact? Check all that apply.**

- State funds affected
- Local funds affected
- Substantial economic impact (>= \$1,000,000)
- Approved by OSBM
- No fiscal note required

**CHAPTER 14 - DIRECTOR, DIVISION OF HEALTH SERVICE REGULATION**

**SUBCHAPTER 14E - LICENSURE OF SUITABLE FACILITIES FOR THE PERFORMANCE OF SURGICAL ABORTIONS**

**SECTION .0100 – LICENSURE PROCEDURE**

**10A NCAC 14E .0101 DEFINITIONS**

The following definitions will apply throughout this Subchapter:

- (1) "Abortion" means the termination of a pregnancy as defined in G.S 90-21.81(1c).

- (2) "Clinic" means a freestanding facility neither physically attached nor operated by a licensed hospital for the performance of abortions completed during the first 12 weeks of pregnancy.
- (3) "Division" means the Division of Health Service Regulation of the North Carolina Department of Health and Human Services.
- (4) "Gestational age" means the length of pregnancy as indicated by the date of the first day of the last normal monthly menstrual period, if known, or as determined by ultrasound.
- (5) "Governing authority" means the individual, agency, group, or corporation appointed, elected or otherwise designated, in which the ultimate responsibility and authority for the conduct of the abortion clinic is vested pursuant to Rule .0318 of this Subchapter.
- (6) "Health Screening" means an evaluation of an employee or contractual employee, including tuberculosis testing, to identify any underlying conditions that may affect the person's ability to work in the clinic.
- (7) "New clinic" means one that is not certified as an abortion clinic by the Division as of July 1, 2023, and has not been certified or licensed within the previous six months of the application for licensure.
- (8) "Registered Nurse" means a person who holds a valid license issued by the North Carolina Board of Nursing to practice professional nursing in accordance with the Nursing Practice Act, G.S. 90, Article 9A.

- (7) If the facility is operated under a management contract, the name and address of the building's management company;
- (8) A description of the arrangements that have been made for the disposal of pathological waste, products of conception, and sharps, and the name and address of the provider of such services if not performed by the facility;
- (9) The name, specialty, board certifications, and medical license number of the Medical Director;
- (10) The name, specialty, board certifications, and medical license number of each member of the medical staff;
- (11) The name, nursing certificate number, and renewal number of the Director of Nursing;
- (12) The name, nursing certificate number, and renewal number of each nursing staff member; and
- (13) The name of the consulting pathologist, the name of the consulting pathologist's laboratory, and the address of the laboratory.

(d) After construction requirements in 10A NCAC 13S .0200 have been met and the application for licensure has been received and approved, the Division shall conduct an on-site, licensure survey.

*Authority G.S. 131E-153; 131E-153.2; S.L. 2023-14, s. 2.4.*

**10A NCAC 14E .0107 ISSUANCE OF LICENSE**

- (a) The Division shall issue a license if it finds the facility can comply with all requirements described in this Subchapter and 10A NCAC 13S.
- (b) Each license shall be issued only for the premises and persons or organizations named in the application and shall not be transferable.
- (c) The governing authority shall notify the Division in writing, within 10 working days, of any change in the name of the facility or change in the name of the administrator.
- (d) The facility shall report to the Division all incidents, within 10 working days, of vandalism to the facility such as fires, explosions, or other action that prevent a service from providing abortion services.

*Authority G.S. 131E-153; 131E-153.2; S.L. 2023-14, s. 2.4.*

**10A NCAC 14E .0109 RENEWAL**

- (a) Each license, renewed at the beginning of each calendar year.
- (b) The renewal application form shall set forth:
  - (1) Legal identity of the applicant;
  - (2) The name or names under which the facility or services are advertised or presented to the public;
  - (3) The facility's mailing address;
  - (4) The facility's physical address;
  - (5) The ownership of the facility, including a description of the legal character of the operating ownership;

*Authority G.S. 131E-153; 131E-153.5; 143B-165.*

**10A NCAC 14E .0106 APPLICATION**

- (a) Prior to the admission of patients, applicant for a new clinic shall submit an application for licensure and receive approval from the Division.
- (b) Application forms may be obtained by contacting the Division at 2712 Mail Service Center Raleigh, NC 27699-2712.
- (c) The application form shall set forth:
  - (1) Legal identity of the applicant;
  - (2) The name or names under which the facility or services are advertised or presented to the public;
  - (3) The facility's mailing address;
  - (4) The facility's physical address;
  - (5) The ownership of the facility, including a description of the legal character of the operating ownership;
  - (6) The owner of the premises from which services are offered including the name and address of the owner of the premises if different from the owner of the facility;

- (6) The owner of the premises from which services are offered including the name and address of the owner of the premises if different from the owner of the facility;
- (7) If the facility is operated under a management contract, the name and address of the building's management company;
- (8) A description of the arrangements that have been made for the disposal of pathological waste, products of conception, and sharps, and the name and address of the provider of such services if not performed by the facility;
- (9) The name, specialty, board certifications, and medical license number of the Medical Director;
- (10) The name, specialty, board certifications, and medical license number of each member of the medical staff;
- (11) The name, nursing certificate number, and renewal number of the Director of Nursing;
- (12) The name, nursing certificate number, and renewal number of each nursing staff member;
- (13) The name of the consulting pathologist, the name of the consulting pathologist's laboratory, and the address of the laboratory.
- (14) The number of abortion procedures performed since initial licensure or the most recent licensure renewal, whichever is later; and
- (15) The number of patients that were transferred to a hospital since initial licensure or the most recent licensure renewal, whichever is later.

(c) Upon the filing of a renewal application, the clinic must pay a non-refundable renewal fee as defined in G.S. 131E-153.2.

(d) An application for renewal of licensure must be filed with the Division at least 30 days prior to the date of expiration. Renewal application forms shall be furnished by the Division.

(e) Failure to file a renewal application shall result in expiration of the license to operate.

Authority G.S. 131E-153; 131E-153.2; 143B-10; S.L. 2023-14, s. 2.4.

**10A NCAC 14E .0111 INSPECTIONS**

(a) Any clinic licensed by the Division to perform abortions shall be inspected by representatives of the Division annually and as it may deem necessary as a condition of holding such license. An inspection may be conducted whenever the Division receives a complaint alleging the clinic is not in compliance with the rules of the Subchapter.

(b) Representatives of the Division shall make their identities known to the clinic staff prior to inspection of the clinic.

(c) Representatives of the Division may review any records in any medium necessary to determine compliance with the rules of this Subchapter. The Department shall maintain the confidentiality of the complainant and the patient, unless otherwise required by law.

(d) The clinic shall allow the Division to have immediate access to its premises and the records necessary to conduct an inspection and determine compliance with the rules of this Subchapter.

(e) A clinic shall file a written plan of correction for cited deficiencies within 10 business days of receipt of the report of the survey. The Division shall review and respond to a written plan of correction within 10 business days of receipt of the corrective action plan.

Authority G.S. 131E-153; 131E-153.6; S.L. 2023-14, s. 2.4.

**TITLE 21 - OCCUPATIONAL LICENSING BOARDS AND COMMISSIONS**

**CHAPTER 42 – BOARD OF EXAMINERS IN OPTOMETRY**

*Notice is hereby given in accordance with G.S. 150B-21.2 that the Board of Examiners in Optometry intends to repeal the rule cited as 21 NCAC 42J .0101.*

**Link to agency website pursuant to G.S. 150B-19.1(c):** <https://www.ncoptometry.org/proposed-rules>

**Proposed Effective Date:** September 1, 2024

**Instructions on How to Demand a Public Hearing:** *(must be requested in writing within 15 days of notice): Contact the Board at (910) 285-3160 or send email to janice@ncoptometry.org*

**Reason for Proposed Action:** *To avoid continued redundancy with N.C.G.S. 90-123.*

**Comments may be submitted to:** *Janice Peterson, 521 Yopp Rd., Suite 214 #444, Jacksonville, NC 28540; phone (910) 285-3160; fax (910) 285-4546; email janice@ncoptometry.org*

**Comment period ends:** July 1, 2024

**Procedure for Subjecting a Proposed Rule to Legislative Review:** If an objection is not resolved prior to the adoption of the rule, a person may also submit a written objection to the Rules Review Commission. If the Rules Review Commission receives written and signed objections after the adoption of the Rule in accordance with G.S. 150B-21.3(b2) from 10 or more persons clearly requesting review by the legislature and the Rules Review Commission approves the rule, the rule will become effective as provided in G.S. 150B-21.3(b1). The Commission will receive written objections until 5:00 p.m. on the day following the day the Commission approves the rule. The Commission will receive letters via U.S. Mail, private courier service, or hand delivery to 1711 New Hope Church Road, Raleigh, North Carolina, or via email to oah.rules@oah.nc.gov. If you have any further questions concerning the submission of objections to the Commission, please review 26 NCAC 05 .0110 or call a Commission staff attorney at 984-236-1850.

**Fiscal impact. Does any rule or combination of rules in this notice create an economic impact? Check all that apply.**

- State funds affected
- Local funds affected

- Substantial economic impact (>= \$1,000,000)
- Approved by OSBM
- No fiscal note required

SUBCHAPTER 42J - FEE SCHEDULE

21 NCAC 42J .0101 FEES

The Board charges the following fees:

- (1) Each application for general optometry examinations \$800.00
- (2) Each general optometry license renewal \$300.00
- (3) Each certificate of license to a resident optometrist desiring to change to another state or territory \$300.00
- (4) Each license issued to a practitioner of another state or territory to practice in this State \$350.00
- (5) Each license to resume practice issued to an optometrist who has retired from the practice of

- ~~optometry or who has moved from and returned to this State \$350.00~~
- ~~(6) Each application for registration as an optometric assistant or renewal thereof \$100.00~~
- ~~(7) Each application for registration as an optometric technician or renewal thereof \$100.00~~
- ~~(8) Each duplicate license \$100.00~~
- ~~(9) Each renewal license for each branch office \$100.00~~
- ~~(10) Each certificate of registration for a professional corporation or limited liability company \$50.00~~
- ~~(11) Each renewal certificate of registration for a professional corporation or limited liability company \$25.00~~

Authority G.S. 55B-10; 55B-11; 57D-2-02; 90-117.5; 90-123.

**Note from the Codifier:** The rules published in this Section of the NC Register are temporary rules reviewed and approved by the Rules Review Commission (RRC) and have been delivered to the Codifier of Rules for entry into the North Carolina Administrative Code. A temporary rule expires on the 270<sup>th</sup> day from publication in the Register unless the agency submits the permanent rule to the Rules Review Commission by the 270<sup>th</sup> day.

This section of the Register may also include, from time to time, a listing of temporary rules that have expired. See G.S. 150B-21.1 and 26 NCAC 02C .0500 for adoption and filing requirements.

**TITLE 16 – DEPARTMENT OF PUBLIC INSTRUCTION**

**Rule-making Agency:** State Board of Education

**Rule Citation:** 16 NCAC 06C .0372 - .0376, .0601, .0603 - .0608

**Effective Date:** April 5, 2024

**Date Approved by the Rules Review Commission:** March 27, 2024

**Reason for Action:** S.L. 2023-128, effective December 1, 2023. Expands the applicability of the criminal statute related to indecent liberties with a student and increases penalties on school personnel who fail to report certain misconduct by educators. The legislation also gives the State Board of Education ("SBE") authority to adopt temporary rules to implement the requirements of the legislation, to address disciplinary action against professional educator licenses, and to modify the Standards of Professional Conduct.

The SBE has used the temporary authority in S.L. 2023-128 to amend 16 NCAC 06C .0601 adopt new rules, 16 NCAC 06C .0603 - 06C .0608, to govern the process for denying an application for a professional educator license or taking disciplinary action against an existing license. These will replace its existing rules on this topic, currently codified as 16 NCAC 06C .0372 – 06C .0376.

**SUBCHAPTER 06C – PERSONNEL**

**SECTION .0300 - CERTIFICATION**

**16 NCAC 06C .0372 DENYING A LICENSE APPLICATION OR SUSPENSION OR REVOCATION OF A LICENSE ISSUED BY THE NORTH CAROLINA DEPARTMENT OF PUBLIC INSTRUCTION**

**16 NCAC 06C .0373 REPORTING REQUIREMENTS FOR SUSPECTED CHILD ABUSE BY A LOCAL EDUCATION AGENCY ADMINISTRATOR TO THE SUPERINTENDENT OF PUBLIC INSTRUCTION**

**16 NCAC 06C .0374 INVESTIGATION REQUIREMENTS TO DETERMINE REASONABLE CAUSE TO SUSPEND OR REVOKE AN EDUCATOR LICENSE**

**16 NCAC 06C .0375 VOLUNTARY SURRENDER OF AN EDUCATOR LICENSE**

**16 NCAC 06C .0376 REINSTATEMENT OR ISSUANCE OF A SUSPENDED, REVOKED, OR DENIED LICENSE**

*History Note:* Authority G.S. 115C-12; 115C-268.1; 116C-268.5; 115C-270.5; 115C-270.20; 115C-270.35; 115C-325; 115C-325.9; 115C-400;

*Eff. October 1, 2020- 2020;  
Temporary Repeal Eff. April 5, 2024.*

**SECTION .0600 – ~~CODE OF PROFESSIONAL PRACTICE AND STANDARDS OF PROFESSIONAL CONDUCT FOR NORTH CAROLINA EDUCATORS~~**

**16 NCAC 06C .0601 PURPOSE AND APPLICABILITY DEFINITIONS**

~~The purpose of these (a) These Rules is to establish and uphold uniform standards of professional conduct establish uniform Standards of Professional Conduct ("Standards") for licensed professional educators throughout the State, and apply to all persons employed in a North Carolina public school or who hold a professional educator license issued pursuant this Subchapter and Chapter 115C, Article 17E of the General Statutes. These Rules shall be binding on every person licensed by the SBE, hereinafter referred to as "educator" or "professional educator," and the possible consequences of any willful breach shall include license suspension or revocation. The prohibition of certain conduct in these Rules shall not be interpreted as approval of conduct not specifically cited.~~

~~(b) Violation of these Standards shall be grounds for disciplinary sanctions against a professional educator's license as provided in this Section.~~

~~(c) As used in this Section, the following definitions apply:~~

- ~~(1) "Public school unit" or "PSU" is defined in G.S. 115C-5(7a).~~
- ~~(1) "Child" means a person under the age of 16.~~
- ~~(2) "License" means a professional educator license issued by the Department of Public Instruction ("DPI") in accordance with this Subchapter and Chapter 115C, Article 17E of the General Statutes.~~
- ~~(3) "Local superintendent" means the superintendent of a local school administrative unit, as provided in Chapter 115C, Article 18 of the General Statutes, or the staff member with the highest decision-making authority for a PSU, if there is no superintendent.~~
- ~~(4) "Public school unit" or "PSU" is defined in G.S. 115C-5(7a).~~
- ~~(5) "Professional educator" or "educator" is defined in G.S. 115C-270.1(2).~~
- ~~(4)(6) "Respondent" means a person who currently holds a license or who has applied for a license.~~
- ~~(5)(7) "Student" is defined in G.S. 14-202.4(d)(4). means a person enrolled in pre-kindergarten, kindergarten, or in Grade 1 through Grade 12 in any public school unit, or who has been enrolled in a public school unit within 6 months of an alleged violation of these Standards.~~

*History Note:* Authority ~~G.S. 115C-295.3; 115C-12(9); 115C-270.1; 115C-270.5; 115C-307;~~  
 Eff. April 1, 1998;  
 Temporary Amendment Eff. April 5, 2024.

**16 NCAC 06C .0603 INVESTIGATION OF ALLEGED MISCONDUCT BY A LICENSED PROFESSIONAL EDUCATOR OR LICENSE APPLICANT**

(a) Upon receipt of allegations and substantiating information regarding a respondent that ~~may~~ would provide cause for imposing disciplinary sanctions on a ~~licensee~~ licensee or denying an application for a license under Rule .0604 of this Section, the Superintendent of Public Instruction ("Superintendent") shall investigate the allegations to determine if such action is warranted. The Superintendent shall investigate allegations or information from any source in a position to provide such information, including a PSU, State agency, court or other tribunal, or other credible person or institution. The Superintendent shall also consider information disclosed by a license applicant in the application.

(b) The Superintendent is authorized to utilize the power conferred upon the State Board of Education ("SBE") under G.S. 115C-270.35(e), including the power to subpoena documents, secure witness testimony, or hire investigators, for the purpose of conducting investigations under this Rule.

(c) If the Superintendent finds cause to impose disciplinary sanctions on a ~~licensee~~ licensee or deny a license application for any of the reasons described in Rule .0604 of this Section, the Superintendent shall ~~prepare, on behalf of the SBE,~~ prepare a proposed order containing findings of fact, conclusions of law, and the proposed sanction(s) or denial.

(d) The Superintendent shall provide the respondent with a copy of the proposed order and notify the respondent that the proposed sanctions or denial described in the order shall become final unless the respondent commences an administrative proceeding under Chapter 150B, Article 3 of the General Statutes within 60 days of the notice. The Superintendent shall send the notice via electronic mail and certified mail to the latest addresses provided to the SBE, and the 60-day time limitation shall commence on the date of electronic delivery or placement of the notice in an official depository of the United States Postal Service, whichever is earlier, in accordance with G.S. 150B-23(f).

(e) If the respondent commences administrative proceedings, the SBE shall stay the proposed order until receipt of a final decision or order under G.S. 150B-34. If the respondent does not commence proceedings within the 60-day time limitation, the proposed order shall become final, and the Superintendent shall take all necessary actions to enforce the order.

*History Note:* Authority ~~G.S. 115C-12(9); 115C-270.5; 115C-270.30; 115C-270.35; 150B-22; 150B-23;~~  
 Temporary Adoption Eff. April 5, 2024.

**16 NCAC 06C .0604 DENYING A LICENSE OR SANCTIONING A LICENSEE**

(a) The State Board of Education ("~~SBE~~", or its ~~authorized designee~~, ("~~SBE~~") may, following an investigation in accordance with Rule .0603 of this Section, impose disciplinary sanctions on a person who holds a license issued by the Department of Public

Instruction or deny an application for any such license if the SBE ~~or designee~~ finds, by a preponderance of the evidence, that the respondent has done any of the following:

- (1) Engaged in fraud, material misrepresentation, or concealment in an application for the license.
- (2) Become ineligible for the license due to changes or corrections in the license documentation.
- (3) Been convicted of a crime in any state, federal, or territorial court of the United States, including military tribunals.
- (4) Been dismissed by a local board of education, pursuant to G.S. 115C-325(e)(1) or 115C-325.4, or by the governing body of any other PSU.
- (5) Resigned from employment with a PSU without thirty calendar days' notice, except with the prior consent of the superintendent.
- (6) Had a professional educator license or other occupational license revoked or suspended in North Carolina or another state due to a finding of misconduct by the relevant occupational licensing board or agency.
- (7) Failed to report suspected child abuse in accordance with G.S. 115C-400 or other suspicion of professional misconduct by a licensed employee in accordance with Rule .0608 of this Section.
- (8) Violated the Testing Code of Ethics, codified at 16 NCAC 06D .0311.
- (9) Engaged in any other illegal, unethical, or lascivious conduct, or otherwise violated the Standards of Professional Conduct as described in Rule .0602 of this Section.

(b) When deciding whether to impose disciplinary sanctions or deny an application for a license, the SBE ~~or designee~~ shall consider the following factors:

- (1) The existence of a reasonable and adverse relationship between the underlying misconduct and the ability of the respondent to perform the respondent's professional duties as an educator.
- (2) The severity of the misconduct.
- (3) The impact of the misconduct on students, other educators, and the school community.
- (4) The respondent's degree of culpability in the misconduct.
- (5) The degree of remorse exhibited by the respondent for the misconduct.
- (6) Any evidence of reformed behavior on the part of the respondent.
- (7) Subsequent incidents of misconduct by the respondent or the probability of future misconduct.

(c) If the SBE ~~or designee~~ determines that sanctions against a current ~~licensee~~ licensee are warranted, it shall impose sanctions in accordance with Rule .0605 of this Section.

*History Note:* Authority G.S. 115C-12(9); 115C-174.11; 115C-174.12; 115C-270.5; 115C-270.30; 115C-270.35; 150B-22; 150B-23;

*Temporary Adoption Eff. April 5, 2024.*

**16 NCAC 06C .0605 DISCIPLINARY SANCTIONS**

(a) Upon finding of a basis for imposing disciplinary sanctions against a ~~respondent's license~~ respondent under Rule .0604 following an investigation under Rule .0603 of this Section, the State Board of Education ("SBE") may impose any of the following sanctions:

- (1) Written ~~Warning~~ Warning;
- (2) Written ~~Reprimand~~ Reprimand;
- (3) Suspension for a Defined ~~Term~~ Term; or
- (4) ~~Revocation~~ Revocation.

(b) In addition to one of the sanctions listed in Paragraph (a), the SBE may impose additional conditions upon a respondent—including requirements that the respondent complete additional CEUs, continuing education credits beyond those required by G.S. 115C-270.30, community service hours, or other activities— if the purpose of the condition is remedial, relevant to the misconduct giving rise to the sanction, and designed to reduce the possibility of recidivism.

(c) Notwithstanding Rule .0603 of this Section or Paragraph (a) of this Rule, the SBE shall summarily suspend the license of a respondent if the SBE finds that the public health, safety, or welfare requires emergency action and incorporates those findings in the order prepared in accordance with Rule .0603 of this Section. A finding that a respondent has been charged in the General Court of Justice with any ~~crime~~ crime, the conviction for which would result in automatic revocation of the respondent's license under G.S. ~~115C-270.35(b)~~ 115C-270.35(b), shall be considered prima facie evidence in satisfaction of this Paragraph. Following the summary suspension, the SBE shall promptly commence a disciplinary investigation and proceedings in accordance with Rules .0603 and .0604 of this Section.

(d) The ~~SBE~~ Department of Public Instruction ("DPI") shall, upon expiration of the 60-day time limitation described in Rule .0603(e) of this Section, publish the sanction and a brief description of the basis for the sanction on ~~the Department of Public Instruction ("DPI")~~ its website and report it to the National Association of State Directors of Teacher Education and Certification, except that this requirement shall not apply to a Written Warning. The SBE DPI shall not disclose any information related to the sanction that is considered confidential under Chapter 115C, Article 21A of the General Statutes or is otherwise protected from disclosure under State or federal law.

*History Note:* Authority G.S. 115C-12(9); 115C-270.5; 115C-270.30; 115C-270.35; 150B-3; 150B-22; 150B-23;

*Temporary Adoption Eff. April 5, 2024.*

**16 NCAC 06C .0606 VOLUNTARY SURRENDER OF A LICENSE**

(a) An individual licensed under Chapter 115C, Article 17E of the General Statutes may notify the State Board of Education ("~~SBE~~") ("SBE"), or its authorized designee, in writing of the individual's intention to voluntarily surrender the individual's license to the SBE.

(b) The SBE or designee may accept the voluntary surrender of a license in lieu of pursuing revocation of the license if, following an investigation in accordance with Rule .0603 of this Section, the SBE or designee determines that the surrender of the license will not compromise public safety. The Superintendent of Public Instruction shall ~~prepare, on behalf of the SBE,~~ prepare a proposed order containing findings of fact and conclusions of law demonstrating that circumstances exist that would justify pursuing revocation of the respondent's license. The Superintendent shall provide the respondent with a copy of the proposed order and notify the respondent that the respondent's license will be revoked ~~unless the respondent challenges any of the factual findings contained in the order~~ within 10 days of the notice. The Superintendent shall send the notice via electronic mail and certified mail to the latest addresses provided to the ~~SBE,~~ SBE.

(c) The ~~SBE~~ Department of Public Instruction ("DPI") shall, upon expiration of the 10-day time limitation described in Paragraph (b), publish the revocation and a brief description of the basis for the revocation on ~~the Department of Public Instruction ("DPI")~~ its website and report it to the National Association of State Directors of Teacher Education and Certification. DPI shall not disclose any information related to the revocation that is considered confidential under Chapter 115C, Article 21A of the General Statutes or is otherwise protected from disclosure under State or federal law.

*History Note:* Authority G.S. 115C-12(9); 115C-270.5; 115C-270.30; 115C-270.35; 150B-22; 150B-23;

*Temporary Adoption Eff. April 5, 2024.*

**16 NCAC 06C .0607 REINSTATEMENT OF OR RECONSIDERATION FOR A LICENSE**

(a) A respondent whose license has been revoked or whose application for a license has been denied under this Section may seek reinstatement of the revoked license or reconsideration of the license application no sooner than 12 months after the effective date of the revocation or denial.

(b) The respondent shall submit a request to the State Board of Education ("SBE") in writing that includes a statement describing why the circumstances that led to the revocation or denial do not or no longer justify prohibiting the respondent from holding a license.

(c) The SBE may deny the request, grant the request, or grant the request on a probationary basis. If the SBE grants the request on a probationary basis, the respondent's license status shall be subject to review by the SBE one year from the date that the license is granted, and the respondent shall comply with any conditions the SBE may impose.

*History Note:* Authority G.S. 115C-12(9); 115C-270.5; 115C-270.30; 115C-270.35; 150B-22; 150B-23;

*Temporary Adoption Eff. April 5, 2024.*

**16 NCAC 06C .0608 REPORTING REQUIREMENTS FOR PSU ADMINISTRATORS**

(a) For purposes of this Rule, the following definitions apply:

- (1) "Misconduct" means either:

- (A) Conduct that justifies automatic revocation of a license under G.S. 115C-270.35(b);
- (B) Conduct that has resulted in a criminal charge or indictment for any of the crimes listed in G.S. 115C-270.35(b);  
or
- (C) Conduct involving the physical or sexual abuse of a child or a student. "Physical abuse" means the infliction of physical injury other than by accident or in self-defense. "Sexual abuse" means any sexual contact with a child or student, regardless of the presence or absence of consent.

(2) "PSU administrator" means a superintendent, associate superintendent, assistant superintendent, personnel administrator, principal, school director, or head of school employed by a PSU.

~~(a)(b)~~ In addition to any duty to report suspected child abuse under ~~G.S. 115C-400, G.S. 115C-400 or other provision of law,~~ any PSU administrator who knows, has reason to believe, or has actual notice of a complaint that a professional educator licensed under Chapter 115C, Article 17E of the General Statutes has engaged in ~~conduct that would justify the automatic revocation of the license under G.S. 115C-270.35(b), or which involves the physical abuse of a child as defined in G.S. 14-318.2 or G.S. 14-318.4, misconduct, as defined in Subparagraph (a)(1), that results in the dismissal, disciplinary action against, dismissal, suspension with pay, suspension without pay, or resignation of the educator shall report the misconduct in writing to the State Board of Education ("SBE") within five calendar days of the dismissal, determination of disciplinary action, dismissal, suspension, or acceptance of resignation. the educator's resignation by the local superintendent. If an educator resigns within 30 days of a complaint for misconduct or during an ongoing investigation of a complaint, the alleged misconduct is presumed to have resulted in the resignation.~~

~~(e) If an employee resigns within 30 days of a complaint for misconduct or during an ongoing investigation of a complaint, the misconduct is presumed to have resulted in the resignation.~~

~~(e) Any PSU administrator who knows, has reason to believe, or has actual notice of a complaint that an employee licensed under Chapter 115C, Article 17E of the General Statutes has engaged in conduct that would otherwise justify disciplinary sanctions against the employee's license under Rule .0604 of this Subchapter shall report the conduct in writing to the SBE within 30 days of dismissal, determination of disciplinary action, or acceptance of resignation.~~

(c) If a PSU demotes, dismisses, or accepts the resignation of a professional educator licensed under Chapter 115C, Article 17E of the General Statutes as a result of conduct that is not covered by Paragraph (b) of this Rule but that may otherwise justify disciplinary sanctions against the employee under Rule .0604 of this Section, a PSU administrator for that PSU shall report the conduct in writing to the SBE within 30 calendar days of the demotion, dismissal, or resignation of the employee.

~~(d) For purposes of this Rule, "PSU administrator" shall include any superintendent, associate superintendent, assistant superintendent, personnel administrator, principal, or head of school employed by a PSU.~~

(d) If one PSU administrator submits a single report on behalf of the PSU pursuant to the requirements of this Rule, that report shall satisfy the reporting obligations of all individuals who may have reporting obligations under this Rule or under G.S. 115C-326.20.

*History Note: Authority G.S. 115C-12(9); 115C-270.5; 115C-270.30; 115C-270.35; 115C-326.20; 150B-22; 150B-23; Temporary Adoption Eff. April 5, 2024.*

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**TITLE 16 – DEPARTMENT OF PUBLIC INSTRUCTION**

**Rule-making Agency:** *State Board of Education*

**Rule Citation:** *16 NCAC 06E .0201, .0204 - .0210, .0215*

**Effective Date:** *July 1, 2024*

**Date Approved by the Rules Review Commission:** *March 27, 2024*

**Reason for Action:** *On September 22, 2023, the General Assembly enacted S.L. 2023-133, which made significant changes to state laws governing interscholastic athletic activities in public school units. The legislation directed the State Board of Education to adopt new temporary rules to implement the requirements of the legislation in time for the 2024-2025 school year. The SBE has adopted these temporary rules to satisfy this legislative requirement and address such topics as the administration of interscholastic athletics, student health and safety, student participation requirements, amateur rules, penalties, and the appeals process.*

*In accordance with S.L. 2023-133, Section 19.(a), the SBE submitted a request for consultation to the Joint Legislative Commission on Governmental Operations on January 5, 2024, and received feedback from Senior Majority Counsel Andrew Hatch on February 16, 2024. Much of the feedback from the consultation has been incorporated into the final rules adopted by the SBE.*

*The rules include amendments to two existing rules and the adoption of seven new rules.*

**CHAPTER 06 - ELEMENTARY AND SECONDARY EDUCATION**

**SUBCHAPTER 06E - STUDENTS**

**SECTION .0200 – INTERSCHOLASTIC ATHLETICS**

**16 NCAC 06E .0201 DEFINITIONS**

As used in this Section, the following definitions apply:

- (1) "Administering organization" is defined in G.S. 115C-407.50(1).

- (2) "Aggrieved party" means a student, coach, participating school, PSU, or other party that is directly and adversely affected by a final decision of an administering organization that applies or enforces the rules established by this Section, including a determination of ineligibility under Rule ~~.0207~~ 0207 of this Section, a penalty imposed under Rule ~~.0209~~ .0209, or a finding of undue influence or a recruiting violation under Rule ~~.0210~~ .0210 of this Section. If a student is affected, the student's parent shall be allowed to appeal the final decision pursuant to Rule ~~.0210~~ .0215 of this Section.
- (3) "Bona fide purpose" means for a purpose not primarily related to participation in interscholastic athletics.
- (4) "High school" means a public school offering education in Grades 9 through 12 or 10 through 12.
- ~~(3)~~(5) "Initial entry" means:
- (A) a student's first day of attendance at a participating school in which the student is enrolled as recorded by that school; or
- (B) the first day on which a student practices or otherwise participates as a member of an interscholastic athletics team at a participating school.
- ~~(4)~~(6) "Interscholastic athletics" or "interscholastic athletic activity" means any extracurricular athletic activity that:
- (A) involves students in any grade between 6 and 12; Grades 6 through 12;
- (B) is sponsored by an individual school, PSU, or administering organization; and
- (C) includes students from more than one school or PSU.
- (7) "Junior high school" means a public school offering education in Grades 7 through 9.
- ~~(5)~~(8) "Local superintendent" means the superintendent of a local school administrative unit, as provided in Chapter 115C, Article 18 of the General Statutes, or the staff member with the highest decision-making authority for a PSU, if there is no superintendent.
- (9) "Middle school" means a public school offering education in Grades 6 through 8.
- ~~(6)~~(10) "Parent" is defined in G.S. ~~115C-407.50(6)~~ 115C-407.50(6).
- ~~(7)~~(11) "Participating school" ~~is defined in G.S. 115C-407.50(7)~~; means a middle school, junior high school, or high school that elects to participate in interscholastic athletic activities.
- ~~(8)~~(12) "Principal" means a school administrator employed as the principal of a school, as provided in Chapter 115C, Article 19 of the

General Statutes, or the staff member with the highest decision-making authority at a school, if there is no principal.

- ~~(9)~~(13) "Public school unit" or "PSU" is defined in G.S. 115C-5(7a).
- (14) "Student" means a person enrolled in Grade 6 through 12 in any public school.

*History Note: Authority G.S. 115C-12(12);115C-12(23); 115C-47(4); 115C-407.50; 115C-407.55; 115C-407.60; 115C-407.65; 116-235(b); Eff. July 1, 1986; Exp. Eff. June 1, 2022 Pursuant to G.S. 150B-21.3A; Temporary Adoption Eff. July 1, 2024.*

**16 NCAC 06E .0204 ADMINISTRATION OF INTERSCHOLASTIC ATHLETICS AND ADMINISTERING ORGANIZATIONS FOR HIGH SCHOOL ATHLETICS**

(a) Definitions:

- (1) "Administering organization" is defined in G.S. 115C-407.50(1).
- (2) "Participating school" is defined in G.S. 115C-407.50(7).
- (3) "Public school unit" (PSU) is defined in G.S. 115C-5(7a).

~~(b) PSUs are authorized to determine whether and to what extent students in grades 6-12 through 12 may participate in interscholastic athletics, provided students in grade 6 are not eligible to participate in tackle football. This Rule shall not apply to charter school athletic programs in kindergarten through grade 8.~~

~~(c) To participate in public school interscholastic athletics, a student shall meet the following requirements:~~

- (1) ~~A student who attends a school supervised by a local board of education shall only participate in the school to which the student is assigned under G.S. 115C-366. A student enrolled in a charter, regional, statewide public school, or school operated by the University of North Carolina, shall meet all the enrollment criteria for that school and attend that school. If a student is over the age requirements, for the school the student attends, the student may participate at the school to which the student would be assigned or attend at the next higher grade level.~~
- (2) ~~A student shall meet the age requirements at each grade level to participate. PSUs shall determine the age of participating students based on a preponderance of the evidence known to them. A student ineligible to participate at one grade level due to age shall be eligible to participate at the next higher grade level only, provided no student shall be eligible to participate at the middle school level for a period lasting longer than six consecutive semesters, beginning with the student's entry into grade 6, and no student shall be eligible to~~

~~participate at the high school level for more than eight consecutive semesters, beginning with the student's first entry into grade 9 or participation on a high school team, whichever occurs first.~~

~~(A) A student shall not participate on a grade 6, 7, or 8 team if the student becomes 15 years of age on or before August 31 of that school year.~~

~~(B) A student shall not participate on a grade 9 through 12 team if the student becomes 19 years of age on or before August 31 of that school year.~~

~~(d) To be eligible to participate during any semester in grades 6, 7, or 8, the student shall have passed at least one less course than the number of required core courses the prior semester and meet promotion standards established by the PSU, provided a student who is promoted from grade 5 to grade 6 shall be deemed to have satisfied the requirement set forth in this Paragraph to participate in the first semester of grade 6. To be eligible to compete during any semester in grades 9 through 12, the student shall have passed at least five courses (or the equivalent for non-traditional school schedules) the prior semester and meet promotion standards established by the PSU, provided a student who is promoted from grade 8 to grade 9 shall be deemed to have satisfied the requirement set forth in this Paragraph to participate in the first semester of grade 9.~~

~~(e) To be eligible to participate, a student shall receive a medical examination every 395 days by a licensed physician, nurse practitioner, or physician assistant, subject to the provisions of G.S. 90-9.1, G.S. 90-9.2, G.S. 90-9.3, G.S. 90-18.1, and G.S. 90-18.2.~~

~~(f) A student shall not participate in interscholastic athletics after any of the following:~~

- ~~(1) graduation, except that the student may continue to participate in playoff and state championship contests in spring sports after graduation;~~
- ~~(2) signing a professional athletic contract, except that the student may continue to participate in any sport for which the student has not signed a professional contract;~~
- ~~(3) receiving remuneration as a participant in an athletic contest, except that the student may accept a gift, merchandise, trophy, or other thing of value, provided:
 
  - ~~(A) the value does not exceed two hundred fifty dollars (\$250.00) per student per sports season;~~
  - ~~(B) the item is totally consumable and nontransferable, or labeled in a permanent manner, for example, monogrammed or engraved items; and~~
  - ~~(C) the item is approved by the student's principal and superintendent; or~~~~
- ~~(4) participating on an all star team or in an all star game that is not sanctioned by the administering organization of which the student's school is a member, provided the~~

~~student shall be ineligible only for the specific sport involved.~~

~~(g) Each PSU shall require the principal of a school that participates in interscholastic athletics to sign and date a list of eligible students for each sport. The PSU shall maintain copy of the most current list in the principal's office and the office of the superintendent.~~

~~(h) A PSU shall impose at least the following penalties on a student, coach, or school official in grades 6 through 12 who is ejected from an interscholastic athletic contest:~~

- ~~(1) for the first offense, the person shall be reprimanded and suspended from participating infor the next game at that level of play (varsity or junior varsity);~~
- ~~(2) for a second offense, the person shall be placed on probation and suspended from participating in for the next two games at that level of play (varsity or junior varsity);~~
- ~~(3) for a third offense, the person shall be suspended for one calendar year; and~~
- ~~(4) a coach who is suspended shall not coach any team for any grade level during the period of suspension.~~

~~Penalties are cumulative from sport to sport and from sport season to sport season. If no member of the school's coaching staff is present to assume an ejected coach's duties, the contest shall be terminated by a forfeit.~~

~~(i)(a) PSUs Public school units may allow their schools high schools under their jurisdiction to belong to an administering organization designated by the State Board of Education. Superintendent of Public Instruction ("Superintendent").~~

~~(j)(b) An administering organization that has entered into a memorandum of understanding with the State Board of Education Superintendent for the purpose of administering interscholastic athletics under this Rule Section shall apply and enforce all of the requirements of this Rule Section. An administering organization shall provide training and resources to ensure that all students, parents, and PSU personnel involved in the administration of interscholastic athletics understand and comply with the provisions of this Section.~~

~~(k)(c) The State Board of Education shall delegate to an administering organization its authority over participating schools to: If the Superintendent enters a memorandum of understanding with one or more administering organizations consistent with G.S. 115C-407.61, the SBE shall delegate to the administering organization(s) its authority over participating high schools to:~~

- ~~(1) waive any student eligibility requirement contained in this Rule, if it finds in a particular case that the requirement fails to promote academic progress, health, safety, and fair play, or it works an undue hardship on a student who has lost eligibility due to circumstances that made participation impossible such as prolonged illness or injury or if a waiver is necessary to reasonably accommodate a student's disability, as required under the Americans with Disabilities Act, U.S.C. § 1201 et seq.;~~

- (1) Apply and enforce student participation rules, as established in Rule .0207 of this Section.
- (2) ~~waive~~ Waive any student participation rule as applied to a specific student, in accordance with Rule .0207(k) of this Section.
- (3) Apply and enforce student health and safety requirements, as established in Rule .0205 of this Section.
- (2)(4) ~~adopt,~~ Adopt, apply, and enforce penalty rules, as defined in G.S. 115C-407.55(3); G.S. 115C-407.55(3), that establish a system of demerits that includes reprimands, probations, suspensions, forfeitures of contests, forfeitures of titles, and disqualifications; disqualifications, consistent with Rule .0209 of this Section.
- (3)(5) ~~adopt,~~ Adopt, apply, and enforce administrative rules, as defined in G.S. 115C-407.55(5); G.S. 115C-407.55(5).
- (4)(6) ~~adopt,~~ Adopt, apply, and enforce gameplay rules, as defined in G.S. 115C-407.55(6); and G.S. 115C-407.55(6).
- (5)(7) ~~establish and collect~~ Collect from all its members a uniform membership fee of either:
- (A) one thousand dollars (\$1,000) for each participating school, or
- (B) one dollar (\$1.00) for each student enrolled in a participating school.
- (4)(d) An administering organization shall:
- (1) ~~enter~~ Enter into a memorandum of understanding, consistent with the requirements of G.S. 115C-407.55(8) and 115C-407.61, with the ~~State Board of Education~~ Superintendent no later than March 15 prior to the academic year in which it is to begin administering interscholastic athletics and no later than the March 15 before the expiration of an existing memorandum of understanding;
- (2) ~~submit~~ Submit an audit report signed by an independent certified public accountant or accounting firm, which is in good standing with the North Carolina State Board of Certified Public Accountant Examiners and performs no other tasks or functions for the administering organization besides the annual audit, to the State Board of Education no later than March 15 each year;
- (3) ~~broadcast~~ Broadcast the meetings of its membership and board of directors in a manner that is announced on its website and which may be viewed electronically by any member of the public;
- (4) ~~provide~~ Provide to the State Board of Education within 30 days any requested organizational records, such as, financial information, annual audit reports, and any matters related to or impacting participating schools;
- (5) ~~enter~~ Enter into written agreements with PSUs that allow their eligible schools to participate in interscholastic ~~sports, athletics,~~ which agreements shall include an explanation of the fees to be charged, the obligations of the PSU and participating schools, penalties for the violation of this ~~Rule at the high school level~~ Section that may be imposed, and an explanation of the process to file an appeal pursuant to Rule .0215 of this Section; and
- (6) ~~publish~~ Publish the organization's rules through a link on the home page of its website.
- (e) Any person or PSU seeking to inquire about or report a violation of any rule administered by an administering organization shall direct the initial inquiry or report to the appropriate administering organization in accordance with the procedures adopted by the administering organization. For any matter involving the enforcement of any interscholastic athletics rule provided by this Section, the administering organization shall render a final decision in writing within 10 business days. An aggrieved party seeking to file an appeal of a final decision of an administering organization with the Superintendent shall do so in accordance with Rule .0215 of this Section.
- (f) A PSU, participating school, PSU employee, or student seeking to report allegations of intimidation or harassment by an administering organization shall file a report with the Superintendent. The report shall be in writing and include a detailed description of the factual basis for the allegations.
- (g) In the event that the Superintendent is unable to enter a memorandum of understanding with one or more administering organizations in accordance with this Rule, the State Board of Education shall delegate all authority and responsibility provided to an administering organization by this Section to the Superintendent.
- (h) The Superintendent shall be responsible for general oversight of interscholastic athletic activities at participating middle and junior high schools. Public school units shall apply and enforce the requirements of this Section for participating middle and junior high schools under their jurisdiction. A PSU may also waive any student participation rule as applied to a specific student enrolled at a middle or junior high school under the jurisdiction of the PSU, in accordance with Rule .0207(k) of this Section.
- (m) ~~The State Board of Education will appoint an appeals board to hear and act upon appeals from final decisions of an administering organization, or from the Department of Public Instruction if necessary pursuant to G.S. 115C-407.60(b), regarding student eligibility, penalties, fees imposed, retaliation, or discrimination. Panels of no fewer than three members of the appeals board may hear and decide matters on behalf of the board. A PSU aggrieved by a final decision of the administering organization may file an appeal with the State Board of Education's Office of General Counsel within five days after receipt of the administering organization's final decision. The final decision shall be mailed to the Superintendent or board of trustees of the PSU.~~
- (l) The administering organization's final decision shall contain:
- (A) findings of fact;
- (B) conclusions of law, including citation to any rules related to the decision;

- ~~(C) a description of any penalties; and~~
- ~~(D) a statement that the PSU may file a notice of appeal within five days of receipt of the administering organization's decision by mailing the notice to the State Board of Education's Office of General Counsel, 301 S. Wilmington Street, Raleigh, N.C. 27601, and emailing a copy of the notice of appeal to Office of General for the State Board of Education.~~

- ~~(2) The PSU's appeal shall:
 
  - ~~(A) be in writing;~~
  - ~~(B) include a description of the facts of the dispute;~~
  - ~~(C) include any evidence submitted to the administering organization; and~~
  - ~~(D) present an argument explaining with the PSU believes the administering organization's final decision was not based on substantial evidence as defined in G.S. 150B 2(8c) or is affected by an error of law.~~~~
- ~~(3) The administering organization may file a response to the PSU's submissions within five days. The panel may shorten the time for filing the administering organization's response if the decision affects a student's or coach's eligibility to participate in an intervening athletic contest.~~
- ~~(4) All documents filed in the appeal shall be simultaneously served on all parties in the manner prescribed in G.S. 1A 1, Rule 5 of the North Carolina Rules of Civil Procedure.~~
- ~~(5) Any hearing shall be recorded.~~
- ~~(6) No later than 30 days after the State Board of Education's receipt of the appeal, a panel of the appeals board shall issue its decision. The panel shall affirm the administering organization's final decision unless a majority of the panel determines that the final decision is not supported by substantial evidence or is affected by an error of law.~~
- ~~(7) The panel's decision shall be final.~~

~~(n) The PSU that has jurisdiction over a school may impose penalties in addition to those required by an administering organization.~~

*History Note: Authority G.S. 115C-12(12); 115C-12(23); 115C-47(4); 115C-407.50, 115C-407.55; 115C-407.60; 115C-407.65; 116-235(b);  
Emergency Adoption Eff. August 20, 2019;  
Amended Eff. March 1, 2021;  
Temporary Amendment Eff. July 1, 2022;  
Amended Eff. July 1, 2023;  
Temporary Amendment Eff. July 1, 2024.*

**16 NCAC 06E .0205 STUDENT HEALTH AND SAFETY REQUIREMENTS FOR INTERSCHOLASTIC ATHLETIC COMPETITION**

(a) For purposes of this Rule, a concussion is defined as a traumatic brain injury caused by a direct or indirect impact to the head that results in disruption of normal brain function, which may or may not result in loss of consciousness.

(b) An administering organization shall, on an annual basis, provide a concussion and head injury information sheet to all coaches, school nurses, athletic directors, first responders, volunteers, and students who participate in interscholastic athletic activities, and the parents or legal guardians of those students. The information shall include:

- (1) The definitions and symptoms of concussions and head injuries;
- (2) A description of the physiology and the potential short-term and long-term effects of concussions and other head injuries;
- (3) The medical return-to-play protocol for post-concussion participation in interscholastic athletic activities; and
- (4) Any other information deemed necessary by the PSU.

(c) School employees, first responders, volunteers, and students shall sign the information sheet and return it to the coach before participating in interscholastic athletic activities, including tryouts, practices, or competition. Parents shall sign the information sheet and return it to the coach before a child may participate in any such interscholastic athletic activities. The signed sheets shall be maintained in accordance with Rule .0207, Paragraph (b) of this Section.

(d) If a student participating in an interscholastic athletic activity exhibits signs or symptoms consistent with concussion, the student shall be removed from the activity at the time and shall not be allowed to return to play or practice that day. A student removed from play for exhibiting signs or symptoms consistent with concussion shall not return to play or practice on a subsequent day until the student is evaluated by and receives written clearance for such participation from one of the following:

- (1) A physician licensed under Chapter 90, Article 1 of the General Statutes with training in concussion management;
- (2) A neuropsychologist licensed under Chapter 90, Article 18A of the General Statutes with training in concussion management and working in consultation with a physician licensed under Chapter 90, Article 34 of the General Statutes;
- (3) An athletic trainer licensed under Chapter 90, Article 34 of the General Statutes;
- (4) A physician assistant, consistent with the limitations of G.S. 90-18.1; or
- (5) A nurse practitioner, consistent with the limitations of G.S. 90-18.2.

(e) Each participating school shall develop a venue-specific emergency action plan to deal with serious injuries and acute medical conditions in which the condition of the patient may deteriorate rapidly. The plan must be:

- (1) In writing;

- (2) Reviewed by an athletic trainer licensed under Chapter 90, Article 34 of the General Statutes;
- (3) Approved by the principal of the school;
- (4) Distributed to all appropriate personnel;
- (5) Posted conspicuously for community and parental awareness at all athletic-sponsored venues; and
- (6) Reviewed and rehearsed annually by all licensed athletic trainers, first responders, coaches, school nurses, athletic directors, and volunteers for interscholastic athletic activities.

(f) Each participating school's emergency management plan shall include:

- (1) A delineation of roles;
- (2) Methods of communication;
- (3) Available emergency equipment; and
- (4) Access to and plan for emergency transport.

(g) Each school shall maintain complete and accurate records of its compliance with the requirements of this Rule.

*History Note: Authority G.S. 115C-12(12); 115C-12(23); 115C-47(4); 115C-407.50; 115C-407.55; 115C-407.57; 115C-407.58; 115C-407.60;*  
*Interim Rule status conferred Eff. June 27, 2018, pursuant to S.L. 2018-114, sec. 27.(b);*  
*Emergency Rule Eff. August 20, 2019;*  
*Emergency Rule Exp. Eff. August 20, 2020;*  
*Temporary Adoption Eff. July 1, 2024.*

**16 NCAC 06E .0206 ATHLETIC TRAINERS**

(a) Each ~~Local Education Agency (LEA)~~ PSU shall designate for each participating high school within its jurisdiction either a licensed athletic trainer who is qualified pursuant to ~~Article 34 of Chapter 90~~ Chapter 90, Article 34 of the General Statutes of North Carolina or a first responder. These persons may be employed on a full-time or part-time basis or may serve as a volunteer.

(b) If not a licensed athletic trainer, a first responder shall:

- (1) ~~have completed and continue to~~ Complete and maintain certification in cardiopulmonary resuscitation as certified by an organization such as the American Red Cross or the American Heart Association;
- (2) ~~have completed and continue to~~ Complete and maintain certification in first aid as certified by an organization such as the American Red Cross or the American Heart Association;
- (3) ~~have completed and continue to~~ Complete and maintain training in concussion management as offered by an organization such as the National Federation of State High School Associations (~~NFHS~~) ("NFHS");
- (4) ~~have completed and continue to~~ Complete and maintain continuing education in injury prevention and management as offered by an organization such as the ~~National Federation of State High School Associations (NFHS);~~ NFHS; and
- (5) ~~complete~~ Complete 10 hours total of staff development each school year specific to first

aid and injury recognition and prevention. The 10 hours may include hours necessary for recertifications or renewals.

- (c) The licensed athletic trainer or first responder shall not have concurrent coaching responsibilities during the time in which the person is working as a licensed athletic trainer or first responder.
- (d) A licensed athletic trainer or first responder shall attend all football practices and games, unless excused by the local superintendent due to emergency.
- (e) Each ~~LEA~~ PSU shall monitor the school athletic trainer's or ~~the~~ first responder's compliance with this Rule.

*History Note: Authority G.S. 115C-12(12); 115C-12(23); 115C-47(4); 115C-407.50; 115C-407.55; 115C-407.60; 115C-407.65; 116-235(b);*  
*Emergency Adoption Eff. August 20, 2019;*  
*Eff. March 1, 2021;*  
*Temporary Amendment Eff. July 1, 2024.*

**16 NCAC 06E .0207 STUDENT PARTICIPATION RULES FOR INTERSCHOLASTIC ATHLETICS**

(a) A student ~~in grades 6 through 12~~ shall not participate in interscholastic athletics on behalf of a North Carolina public school unless the student has satisfied the eligibility requirements set forth in this Rule. PSUs are authorized to determine whether and to what extent students ~~in grades 6 through 12~~ under their jurisdiction may participate in interscholastic athletics, not inconsistent with the requirements of this Rule.

(b) Each PSU shall require the principal of a participating school to sign and date a list of eligible students for each sport. The PSU shall maintain a copy of the most current list in the principal's office and the office of the superintendent.

(c) Residency Requirements

- (1) For purposes of this Rule, a student's primary residence shall be determined as follows:
  - (A) If the student lives with both parents, the residence of both parents.
  - (B) If the student lives with a single parent, the residence of that parent.
  - (C) If the student's parents are separated or divorced, the residence of the parent to whom a court of competent jurisdiction has awarded primary custody of the student. If no custody order has been entered, the student's primary residence shall be deemed to be that at which the student is residing more than half-time at the beginning of the school year.
  - (D) If a student lives with an individual to whom a court of competent jurisdiction has awarded legal guardianship of the student, the residence of that individual.
  - (E) If a student has been emancipated in accordance with Chapter 7B, Article 35 of the General Statutes, the student's residence at the time of emancipation.

(F) If a student is a foreign national participating in a foreign exchange program authorized by federal and state law, the residence to which the student is assigned by the program or host PSU.

(2) A student shall not participate in interscholastic athletics following a change in primary residence unless ~~it is the change was made for a bona fide purpose. purpose and with the intent that it be permanent. A bona fide purpose means that the change in primary residence was made with the intent that it be permanent and not primarily for athletic purposes.~~ An administering organization shall resolve, by a preponderance of the evidence, any disputes regarding a high school student's primary residence or whether a change in a student's primary residence was for a bona fide purpose.

(d) Enrollment Requirements

(1) A student who attends a school supervised by a local board of education shall only participate in interscholastic athletics on behalf of the school to which the student is assigned under G.S. 115C-366.

(2) A student enrolled in a charter school, regional statewide public school, or school operated by the University of North Carolina shall meet all the enrollment criteria for that school and attend that school. A student who attends a school described in this Subparagraph shall not participate in interscholastic athletics on behalf of that school unless the student's primary residence is within either:

(A) the county in which the school is located, or

(B) Twenty-five miles of the school as determined by an administering organization.

(3) A local board of education may by policy allow ~~students who are a person who is enrolled in Grade 6 through 12~~ in a home school, as defined in G.S. 115C-563(a), and whose primary residence is within the board's jurisdiction to participate in interscholastic athletics on behalf of a participating school under the board's jurisdiction, provided that the board either agrees to cover any ~~home school student~~ such person whom it allows to participate under its catastrophic athletic accident insurance policy or verifies that the ~~student~~ person is independently covered by catastrophic accident insurance.

(e) Transfer Requirements

(1) After a student's initial entry into ~~grade~~ Grade 9, and absent a change in residence for a bona fide purpose as provided in Paragraph (c) of this Rule:

(A) a student who transfers from one school to another school within the same PSU shall not participate in interscholastic athletics for 365 calendar days following the student's enrollment in the new school, unless the governing authority of the PSU has adopted a policy allowing immediate eligibility for students who are assigned by the PSU to a different school within the same PSU.

(B) a student who transfers from a school in one PSU to a school in a different PSU shall not participate in interscholastic athletics for 365 calendar days following the student's enrollment in the new school, except by mutual agreement of the governing authorities of each PSU.

(2) ~~If~~ After a student's initial entry into Grade 9, if a student transfers to a new school within 365 calendar days after that school hires a coach for an interscholastic athletics team who was previously employed as a coach for an equivalent sport by the school from which the student is transferring, the student shall be ineligible to participate in interscholastic athletics for that ~~sport.~~ sport for 365 calendar days following the student's enrollment in the new school. An administering organization may waive this ~~requirement upon petition by the student's PSU if restriction~~ it determines by a preponderance of the evidence that the student's transfer was for a bona fide purpose.

(3) A student who receives priority enrollment as the child of a full-time employee of a charter school pursuant to G.S. 115C-218.45(f)(3) shall not be eligible to participate in interscholastic athletics for that charter school if the Department of Public Instruction determines that the parent's employment was a fraudulent basis for the student's priority enrollment. A student determined to be ineligible under this Subparagraph shall be ~~ineligible~~ ineligible to participate in interscholastic athletics for 365 calendar days following discovery of the violation.

(4) For purposes of this Paragraph, if a student transfers from a public school to a nonpublic school, including a home school as defined in G.S. 115C-563(a), and within 365 calendar days transfers to a different public school, the transfer from the nonpublic school shall be treated as a transfer from a public school.

(5) A student who transfers to the North Carolina School of Science and Mathematics is exempt from the requirements of this Paragraph upon initial entry into that school.

- (6) No student shall participate in more than one season of interscholastic athletics per year in the same sport, regardless of the school on behalf of which the student participated.
- (f) Scholastic Requirements
- (1) To be eligible to participate in interscholastic athletics, a student must be in good academic standing. For purposes of this Rule, a student shall be deemed to be in good academic standing under the following circumstances:
- (A) The student ~~has no more than nine unexcused absences in the current school year; attended at least 85 percent of the total number of instructional days in the PSU during the previous semester;~~
- (B) The student passed at least 70 percent of the courses taken in the preceding semester; and
- (C) The student is ~~on track to advance to the next grade level or graduate making sufficient progress toward meeting the academic and curricular requirements of the PSU and the State Board of Education to be promoted to the next grade level or to graduate within the next calendar year.~~
- (2) For the purpose of determining good academic standing during the fall semester, a student may count courses that the student passed in a summer school session in which the student was enrolled during the same calendar year toward the total number of courses passed in the preceding spring semester, provided that summer school courses shall not affect the total number of courses attempted in the preceding spring semester.
- ~~(2)(3)~~ A student who is promoted from ~~grade~~ Grade 5 to ~~grade~~ Grade 6 shall be deemed to have satisfied the requirements set forth in this Paragraph to participate in the first semester of ~~grade~~ Grade 6.
- ~~(3)(4)~~ A student who is promoted from ~~grade~~ Grade 8 to ~~grade~~ Grade 9 shall be deemed to have satisfied the requirements set forth in this Paragraph to participate in the first semester of ~~grade~~ Grade 9.
- (5) For interscholastic athletic activities occurring between July 1, 2024, and December 31, 2024, any student who has satisfied the requirements of 16 NCAC 06E .0204(d), as it was written on June 30, 2024, shall be deemed to have satisfied the requirements of this Paragraph.
- (g) Age Requirements
- (1) Each PSU shall determine the age of a student participating in interscholastic athletics based on a preponderance of the evidence known to the PSU.
- (2) A student who is ineligible to participate at one grade level due to age shall be eligible to participate at the next higher grade level only, ~~subject to the following restrictions: provided that a student:~~
- (A) ~~A student shall~~ Shall be eligible to participate at the middle school level for no more than six consecutive semesters, beginning with the student's initial entry into Grade 6.
- (B) ~~A student shall~~ Shall be eligible to participate at the high school level for no more than eight consecutive semesters, beginning with the student's initial entry into Grade 9.
- (C) ~~A student shall~~ Shall not participate on a ~~grade 6, 7, or 8~~ middle school team if the student becomes 15 years of age before August 31 of that school year.
- (D) ~~A student shall~~ Shall not participate on a ~~grade 7, 8, or 9~~ junior high school team if the student becomes 16 years of age on or before August 31 of that school year.
- (E) ~~A student shall~~ Shall not participate on ~~any grade 9, 10, 11, or 12~~ a high school team if the student becomes 19 years of age on or before August 31 of that school year.
- (3) A student in ~~grade~~ Grade 6 shall not participate in tackle football.
- (h) Biological Requirements. All students participating in interscholastic athletics shall comply with the biological participation requirements as provided in G.S. 115C-407.59.
- (i) Medical Requirements. To be eligible to participate in interscholastic athletics, a student shall receive a medical examination every 395 days by a licensed physician, nurse practitioner, or physician assistant, subject to the provisions of G.S. 90-9.1, G.S. 90-9.2, G.S. 90-9.3, G.S. 90-18.1, and G.S. 90-18.2. Chapter 90 of the General Statutes.
- (j) A student shall not participate in interscholastic athletics after pleading guilty or "no contest" to, or being ~~finally~~ convicted of, a felony under the laws of North Carolina, the United States, or any other state. Prior to deeming the student ineligible, an administering organization shall receive a certified copy of a criminal record reflecting the conviction and verify that the student is the same individual identified in the criminal record.
- (k) An administering organization shall, in an individual student's case, waive any eligibility requirement contained in this Rule ~~upon a petition by the student's PSU and a finding by the administering organization if it finds~~ that enforcing the requirement:
- (1) fails to promote academic progress, health, safety, and fair play;
- (2) works an undue hardship on a student who has lost eligibility due to circumstances that made participation impossible, such as prolonged illness or injury; or

- (3) prevents the reasonable accommodation of a student's disability, as required by the Americans with Disabilities Act, 42 U.S.C. 12101 et seq.

*History Note: Authority G.S. 115C-12(12); 115C-12(23); 115C-47(4); 115C-407.50; 115C-407.55; 115C-407.60; 115C-407.65; 116-235(b)*  
*Temporary Adoption Eff. July 1, 2024.*

**16 NCAC 06E .0208 AMATEUR RULES FOR INTERSCHOLASTIC ATHLETICS**

(a) As used in this Rule, the phrase "name, image, or likeness" or "NIL" shall refer to the use of a student's name, image, or likeness for commercial purposes and in exchange for compensation to the student. Compensation may include cash, in-kind gifts, or other tangible benefits to the student.

(b) No student participating in interscholastic athletics shall enter into any agreement to use the student's name, image, or likeness in any of the following ways:

- (1) Public appearances or commercials.
- (2) Autograph signings.
- (3) Athletic camps and clinics.
- (4) Sale of non-fungible tokens ("NFTs").
- (5) Product or service endorsements.
- (6) Promotional activities, including in-person events and social media advertisements.

(c) A student shall not participate in interscholastic athletics after any of the following:

- (1) ~~Graduation.~~ Graduation from high school, except that the student may continue to participate in playoff and state championship contests in spring sports after graduation;
- (2) Signing a professional athletic contract, except that the student may continue to participate in any sport for which the student has not signed a professional contract.
- (3) Receiving remuneration as a participant in an athletic contest, except that the student may accept a gift, merchandise, or other thing of value, provided that:
  - (A) The value does not exceed two hundred-fifty dollars (\$250.00) per student per season;
  - (B) The item is totally consumable and nontransferable, or labeled in a permanent manner (e.g., an engraved or monogrammed item); and
  - (C) The item is approved by the principal of the student's school and the local superintendent.
- (4) ~~participating~~ Participating on an all-star team or in all-star game or bowl game that is not sanctioned by the administering organization of which the student's school is a member, provided that the student shall be ineligible only for that sport.

(d) A student shall not be deemed ineligible under this Rule for payment by an administering organization, PSU, or athletic

booster club affiliated with the student's school or PSU for essential expenses arising from a specific interscholastic athletic contest in which the student participates. Essential expenses shall include the reasonable cost of meals, lodging, and transportation.

(e) A student shall not be deemed ineligible under this Rule for receipt of a nominal, standard fee or salary for instructing, supervising, or officiating an organized youth sports program, recreational activities, playground, or camp, whether or not affiliated with a PSU.

*History Note: Authority G.S. 115C-12(12); 115C-12(23); 115C-47(4); 115C-407.50; 115C-407.55; 115C-407.60; 115C-407.65; 116-235(b)*  
*Temporary Adoption Eff. July 1, 2024.*

**16 NCAC 06E .0209 PENALTY RULES FOR INTERSCHOLASTIC ATHLETICS**

(a) A PSU shall impose at least the following penalties on a student, coach, or school official in ~~grades~~ Grades 6 through 12 who is ejected from an interscholastic athletic contest:

- (1) for the first offense, the person shall be reprimanded and suspended from participating in the next ~~game at that level of play (varsity or junior varsity); game;~~
- (2) for a second offense, the person shall be placed on probation and suspended from participating in the next two ~~games at that level of play (varsity or junior varsity); games;~~
- (3) for a third offense, the person shall be suspended from participation in interscholastic athletics for one calendar year;
- (4) a coach who is suspended shall not coach any team for any grade level during the period of suspension.

(b) Penalties shall be cumulative from sport to sport and from sport season to sport season. If no member of the school's coaching staff is present to assume an ejected coach's duties, the contest shall be terminated by forfeit.

(c) The PSU that has jurisdiction over a participating school may impose penalties in addition to those required by an administering organization.

*History Note: Authority G.S. 115C-12(12); 115C-12(23); 115C-47(4); 115C-407.50; 115C-407.55; 115C-407.60; 115C-407.65; 116-235(b);*  
*Temporary Adoption Eff. July 1, 2024.*

**16 NCAC 06E .0210 LIMITATIONS ON RECRUITING AND UNDUE INFLUENCE**

(a) No ~~student participating in interscholastic athletics shall be subject~~ student, coach, professional educator, or other employee of a PSU or administering organization shall subject a student to undue influence by any other student, coach, principal, local superintendent, or other PSU employee for the purpose of inducing or causing the student to transfer from one participating school to another to participate in interscholastic athletics on behalf of the receiving school.

(b) For purposes of this Rule, "undue influence" means communication or conduct undertaken for the purpose and intent

of soliciting or encouraging a student to enroll in a participating school, including the following:

- (1) Initiating or arranging communication or contact in any form, including letters, email, or phone calls, with the student or a member of the student's family.
- (2) Visiting or entertaining the student or a member of the student's family.
- (3) Providing or arranging for transportation for the student or member of the student's family to visit a participating school or meet with anyone associated with the participating school.
- (4) ~~(4)~~ Communicating to a student or a member of the student's family, either implicitly or explicitly, that a participating school's athletic program or sports team is superior to that of another participating school, or that it would be advantageous for the student to participate in athletics at a specific participating school. Such communication may be oral, written, or audiovisual in format.

(c) A party alleging undue influence shall direct the initial inquiry or report to the appropriate administering organization in accordance with the procedures adopted by the administering organization. The party alleging undue influence bears the burden of proving undue influence by a preponderance of the evidence.

(d) If the administering organization finds by a preponderance of the evidence that the accused party has engaged in undue influence, the administering organization shall impose penalties consistent with its regulations and with Rule .0209 of this Section.

*History Note: Authority G.S. 115C-12(12); 115C-12(23); 115C-47(4); 115C-407.50; 115C-407.55; 115C-407.60; 115C-407.65; 116-235(b);*

*Temporary Adoption Eff. July 1, 2024.*

**16 NCAC 06E .0215 APPEALS**

(a) The Superintendent of Public Instruction ("Superintendent") shall appoint an independent interscholastic athletics appeals board ("appeals board") to hear and act upon appeals from a final decision of an administering ~~organization, organization or PSU,~~ or from the Department of Public Instruction if necessary pursuant to Rule .0204(g) of this Section, regarding student eligibility to participate in interscholastic athletics; violations of limitations on recruiting or undue influence; penalties or fees imposed on students, coaches, or participating schools; ~~retaliation, or discrimination, or other enforcement of rules pursuant to this Section.~~

(b) The administering organization's final decision shall contain:

- (1) Findings of fact.
- (2) Conclusions of law, including citation to and a copy of any rules related to the decision.
- (3) A description of any penalties imposed.
- (4) A statement that the aggrieved party may file a notice of appeal within five days of receipt of the administering organization's decision by sending the notice to the Superintendent via

~~email and~~ electronic mail or the United States Postal Service.

~~(b)(c)~~ An aggrieved party may file an appeal with the Superintendent within five days after receipt of the administering organization's final decision. The final decision shall be mailed to the aggrieved party, with a copy to the local superintendent and principal with jurisdiction over the aggrieved party.

(d) The aggrieved party's appeal shall:

- (1) Be in ~~writing;~~ writing.
- (2) Include a description of the facts of the ~~dispute;~~ dispute.
- (3) Include any evidence submitted to the administering ~~organization; and organization.~~
- (4) Present an argument explaining with the aggrieved party believes the administering organization's final decision was not based on substantial evidence, as defined in G.S. 150B-2(8c), or is affected by an error of law.

(e) The administering organization may file a response to the aggrieved party's submissions within five days. The panel appeals board may shorten the time for filing the administering organization's response if the decision affects a student's or coach's eligibility to participate in an intervening athletic contest.

(f) All documents filed in the appeal shall be simultaneously served on all parties via email and the United States Postal Service. If the aggrieved party is a student, parent, or coach, the parties shall also ~~serve~~ provide copies of the documents ~~or via~~ electronic mail or the United States Postal Service to the local superintendent and principal with jurisdiction over the aggrieved party.

(g) Panels of no fewer than three members of the appeals board may hear and decide matters on behalf of the appeals board. The panel may conduct a live hearing in person or via teleconference. Any hearing so conducted shall be recorded.

(h) No later than 30 days after the Superintendent's receipt of the appeal, the panel shall issue its decision. The panel shall affirm the administering organization's final decision unless a majority of the panel determines that the final decision is not supported by substantial evidence or is affected by an error of law. The panel may also remand the decision to the administering organization for further review if there is an intervening change in any relevant law or if the panel determines that additional information is necessary to inform its decision.

(i) The Superintendent, or the Superintendent's authorized designee, may stay a determination of ineligibility or a penalty imposed by the administering organization pending the final decision of the appeals board.

~~(j)~~ The panel's decision shall be final.

*History Note: Authority G.S. 115C-12(12); 115C-12(23); 115C-47(4); 115C-407.50; 115C-407.55; 115C-407.60; 115C-407.65; 116-235(b);*

*Temporary Adoption Eff. July 1, 2024.*

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**APPROVED RULES**

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*This Section includes a listing of rules approved by the Rules Review Commission followed by the full text of those rules. The rules that have been approved by the RRC in a form different from that originally noticed in the Register or when no notice was required to be published in the Register are identified by an \* in the listing of approved rules. Statutory Reference: G.S. 150B-21.17.*

Rules approved by the Rules Review Commission at its meeting on March 27, 2024.

**REGISTER CITATION TO THE  
NOTICE OF TEXT**

**ELECTIONS, STATE BOARD OF**

<u>Standards for Certification of Electronic Poll Books</u>	08 NCAC 04 .0401*	38:06 NCR
<u>Procedures for Certification of Electronic Poll Books</u>	08 NCAC 04 .0402*	38:06 NCR
<u>Verification of Photo Identification During In-Person Voting</u>	08 NCAC 17 .0101*	38:10 NCR
<u>Determination of Reasonable Resemblance by Judges of Elec...</u>	08 NCAC 17 .0102	38:10 NCR
<u>Identification Required of Curbside Voters</u>	08 NCAC 17 .0103	38:10 NCR
<u>Declaration of Religious Objection to Photograph</u>	08 NCAC 17 .0105	38:10 NCR
<u>Signage Notifying One-Stop Voters of the Option to Regues...</u>	08 NCAC 17 .0106	38:10 NCR
<u>Photo Identification for Absentee-by-Mail Ballots</u>	08 NCAC 17 .0109*	38:10 NCR

**STATE BUDGET AND MANAGEMENT, OFFICE OF**

<u>Recipient and Subrecipient Responsibilities</u>	09 NCAC 03M .0202*	38:08 NCR
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**MEDICAL CARE COMMISSION**

<u>Written Policies and Procedures</u>	10A NCAC 13L .0301	38:06 NCR
<u>Personnel Records</u>	10A NCAC 13L .0302	38:06 NCR
<u>Abbreviations</u>	10A NCAC 13P .0101*	38:06 NCR
<u>Definitions</u>	10A NCAC 13P .0102*	38:06 NCR
<u>EMS System Requirements</u>	10A NCAC 13P .0201	38:06 NCR
<u>Ground Ambulance: Vehicle and Equipment Requirements</u>	10A NCAC 13P .0207*	38:06 NCR
<u>Weapons and Explosives Forbidden</u>	10A NCAC 13P .0216	38:06 NCR
<u>Medical Ambulance/Evacuation Bus: Vehicle and Equipment R...</u>	10A NCAC 13P .0217	38:06 NCR
<u>Pediatric Specialty Care Ground Ambulance: Vehicle and Eq...</u>	10A NCAC 13P .0218	38:06 NCR
<u>Patient Transportation Between Hospitals</u>	10A NCAC 13P .0221	38:06 NCR
<u>Ground Ambulance Vehicle Manufacturing Standards</u>	10A NCAC 13P .0224	38:06 NCR
<u>Specialty Care Transport Program Criteria</u>	10A NCAC 13P .0301	38:06 NCR
<u>Components of Medical Oversight for EMS Systems</u>	10A NCAC 13P .0401	38:06 NCR
<u>Components of Medical Oversight for Specialty Care Transp...</u>	10A NCAC 13P .0402	38:06 NCR
<u>Responsibilities of the Medical Director for EMS Systems</u>	10A NCAC 13P .0403	38:06 NCR
<u>Responsibilities of the Medical Director for Specialty Ca...</u>	10A NCAC 13P .0404	38:06 NCR
<u>Requirements for Emergency Medical Dispatch Priority Refe...</u>	10A NCAC 13P .0407	38:06 NCR
<u>Components of Medical Oversight for Air Medical Programs</u>	10A NCAC 13P .0410*	38:06 NCR
<u>Initial Credentialing Requirements for EMR, EMT, AEMT, Pa...</u>	10A NCAC 13P .0502*	38:06 NCR
<u>Term of Credentials for EMS Personnel</u>	10A NCAC 13P .0503*	38:06 NCR
<u>Reinstatement of Lapsed EMS Credential</u>	10A NCAC 13P .0512	38:06 NCR
<u>Continuing Education EMS Educational Program Requirements</u>	10A NCAC 13P .0601*	38:06 NCR
<u>Basic and Advanced EMS Educational Institution Requirements</u>	10A NCAC 13P .0602*	38:06 NCR
<u>Initial Designation Process</u>	10A NCAC 13P .0904	38:06 NCR
<u>Renewal Designation Process</u>	10A NCAC 13P .0905	38:06 NCR
<u>EMS Educational Institutions</u>	10A NCAC 13P .1505	38:06 NCR

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<u>EMS Personnel Credentials</u>	10A NCAC 13P .1507*	38:06	NCR
<b>PUBLIC HEALTH, COMMISSION FOR</b>			
<u>Definitions</u>	15A NCAC 18A .1001	38:11	NCR
<u>Field Sanitation</u>	15A NCAC 18A .1002	38:11	NCR
<u>Standards and Approval of Plans</u>	15A NCAC 18A .1003	38:11	NCR
<u>Permits</u>	15A NCAC 18A .1004*	38:11	NCR
<u>Inspections and Reinspections</u>	15A NCAC 18A .1006	38:11	NCR
<u>Inspection Forms</u>	15A NCAC 18A .1007	38:11	NCR
<u>Grading</u>	15A NCAC 18A .1008*	38:11	NCR
<u>Standards</u>	15A NCAC 18A .1009	38:11	NCR
<u>Water Supply</u>	15A NCAC 18A .1011	38:11	NCR
<u>Recreational Waters</u>	15A NCAC 18A .1012	38:11	NCR
<u>Toilet: Handwashing: Laundry: and Bathing Facilities</u>	15A NCAC 18A .1014	38:11	NCR
<u>Food Service Facilities</u>	15A NCAC 18A .1017*	38:11	NCR
<u>Food Service Utensils and Equipment</u>	15A NCAC 18A .1018	38:11	NCR
<u>Food Supplies</u>	15A NCAC 18A .1019	38:11	NCR
<u>Shellfish</u>	15A NCAC 18A .1020	38:11	NCR
<u>Milk and Milk Products</u>	15A NCAC 18A .1021	38:11	NCR
<u>Food Protection</u>	15A NCAC 18A .1022	38:11	NCR
<u>Food Service Employees</u>	15A NCAC 18A .1027	38:11	NCR
<u>Definitions</u>	15A NCAC 18A .1601	38:11	NCR
<u>Approval of Plans</u>	15A NCAC 18A .1602	38:11	NCR
<u>Inspections</u>	15A NCAC 18A .1603*	38:11	NCR
<u>Reinspections: Visits</u>	15A NCAC 18A .1604	38:11	NCR
<u>Inspection Forms</u>	15A NCAC 18A .1605	38:11	NCR
<u>Scoring System</u>	15A NCAC 18A .1606	38:11	NCR
<u>Floors</u>	15A NCAC 18A .1607	38:11	NCR
<u>Walls and Ceilings</u>	15A NCAC 18A .1608	38:11	NCR
<u>Lighting and Ventilation</u>	15A NCAC 18A .1609	38:11	NCR
<u>Toilet: Handwashing: and Bathing Facilities</u>	15A NCAC 18A .1610	38:11	NCR
<u>Water Supply</u>	15A NCAC 18A .1611	38:11	NCR
<u>Drinking Water Facilities: Ice Handling</u>	15A NCAC 18A .1612	38:11	NCR
<u>Liquid Wastes</u>	15A NCAC 18A .1613	38:11	NCR
<u>Solid Wastes</u>	15A NCAC 18A .1614*	38:11	NCR
<u>Pest Control and Outdoor Premises</u>	15A NCAC 18A .1615	38:11	NCR
<u>Chemical and Medication Storage</u>	15A NCAC 18A .1616*	38:11	NCR
<u>Beds: Linen: Laundry: Furniture</u>	15A NCAC 18A .1617	38:11	NCR
<u>Food Service Utensils and Equipment</u>	15A NCAC 18A .1618	38:11	NCR
<u>Food</u>	15A NCAC 18A .1619	38:11	NCR
<u>Food Protection</u>	15A NCAC 18A .1620	38:11	NCR
<u>Employees</u>	15A NCAC 18A .1621	38:11	NCR
<u>Circulation System</u>	15A NCAC 18A .2518*	38:11	NCR
<u>Suction Hazard Reduction</u>	15A NCAC 18A .2539*	38:11	NCR

**ARCHITECTURE AND REGISTERED INTERIOR DESIGNERS, BOARD OF**

<u>Fees</u>	21 NCAC 02 .0108	38:10	NCR
<u>Architect, Registered Interior Designer, Firm or Partners...</u>	21 NCAC 02 .0201*	38:10	NCR

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*APPROVED RULES*

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<u>Rules of Professional Conduct</u>	21 NCAC 02 .0203*	38:10 NCR
<u>Requirement for and Use of Professional Seal by an Archit...</u>	21 NCAC 02 .0206*	38:10 NCR
<u>Incompetence</u>	21 NCAC 02 .0210*	38:10 NCR
<u>Individual Licenses and Registrations</u>	21 NCAC 02 .0213*	38:10 NCR
<u>Firm Practice of Architecture and Registered Interior Design</u>	21 NCAC 02 .0214*	38:10 NCR
<u>Out of State Firms</u>	21 NCAC 02 .0215	38:10 NCR
<u>Architectural Licensure by Examination</u>	21 NCAC 02 .0302*	38:10 NCR
<u>Architecture Licensure by Reciprocity</u>	21 NCAC 02 .0303	38:10 NCR
<u>Interior Designer Registration</u>	21 NCAC 02 .0306	38:10 NCR
<u>Certification and Licensure for Military Personnel and Mi...</u>	21 NCAC 02 .0307*	38:10 NCR
<u>Who Shall Hear Contested Cases</u>	21 NCAC 02 .0606	38:10 NCR

**CERTIFIED PUBLIC ACCOUNTANT EXAMINERS, BOARD OF**

<u>Conditioning Requirements</u>	21 NCAC 08F .0105	38:09 NCR
<u>Work Experience Required of Candidates for CPA Certification</u>	21 NCAC 08F .0401	38:09 NCR

**CHIROPRACTIC EXAMINERS, BOARD OF**

<u>Preceptors</u>	21 NCAC 10 .0218*	38:11 NCR
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**INTERPRETER AND TRANSLITERATOR LICENSING BOARD**

<u>Continuing Education Requirements</u>	21 NCAC 25 .0501*	38:11 NCR
<u>Proration of Continuing Education Requirements</u>	21 NCAC 25 .0502*	38:11 NCR
<u>Failure to Meet Continuing Education Requirements</u>	21 NCAC 25 .0503*	38:11 NCR
<u>CEU Credit for Workshops, Conferences, and Independent St...</u>	21 NCAC 25 .0505*	38:11 NCR

**LANDSCAPE ARCHITECTS, BOARD OF**

<u>Fees</u>	21 NCAC 26 .0105	38:06 NCR
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**FUNERAL SERVICE, BOARD OF**

<u>Passing Score</u>	21 NCAC 34B .0208*	38:12 NCR
<u>National Board Certificate</u>	21 NCAC 34B .0211*	38:12 NCR
<u>Expiration of Text Scores</u>	21 NCAC 34B .0213	38:12 NCR

**PODIATRY EXAMINERS, BOARD OF**

<u>Continuing Education</u>	21 NCAC 52 .0208*	37:21 NCR
<u>Fee Schedule</u>	21 NCAC 52 .0613	38:01 NCR

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**TITLE 08 – STATE BOARD OF ELECTIONS**

**08 NCAC 04 .0401 STANDARDS FOR  
CERTIFICATION OF ELECTRONIC POLL BOOKS**

(a) As used in this Chapter, an "electronic poll book" is a system (including hardware, software, and firmware) used to check the registration of voters who appear to vote in person, to assign voters their correct ballots, and to record the voters' check-in and acceptance of ballots. An electronic poll book shall, to qualify for certification by the State Board for use in any election in North Carolina, fulfill the following requirements:

- (1) It shall record all information a voter is required by law to provide when presenting to vote and

- (2) be equipped so that voters and election workers can complete the steps required by law for checking a voter's registration and the distribution of ballots to checked-in voters. It shall be equipped for use on any day the polls are open for in-person voting and shall contain the list of registered voters eligible to vote in the election.
- (3) It shall verify a voter's eligibility to receive a ballot, confirm a voter has not previously voted in the election based on available records, and record a voter's check-in and receipt of a ballot.

- (4) It shall log all user activity and that log shall be secured from unauthorized alteration and be available only to authorized users. It shall require the use of individual user accounts assigned to individual authorized users and not allow shared accounts for access to the electronic poll book. As used in this Chapter, an "authorized user" is an individual designated by the State Board or a purchasing county board of elections to operate and maintain the electronic poll book.
- (5) It shall secure the data of the electronic poll book such that the data is stored in a manner that an unauthorized party will not be able to access the data.
- (6) It shall secure the data contained within the electronic poll book such that the data is not transmitted or transported for any purpose except for official use in the conduct of an election or as otherwise authorized by law.
- (7) It shall ensure that the voter data contained within the electronic poll book is not deleted without prompting by an authorized user, so that county elections personnel can comply with all applicable laws pertaining to records retention.
- (8) It shall not allow access to confidential voter data, except for official use by authorized users.
- (9) It shall meet applicable federal requirements for electronic poll books.
- (10) It shall be reviewed by an independent testing authority accredited by or partnered with a federal agency for compliance with applicable state law.
- (11) It shall be simple for election workers to set up and use, and any hardware shall be transportable to voting locations.
- (12) It shall be compatible with systems, equipment, and software utilized by the State Board and county boards of elections for storing and processing voter registration and voting data.
- (13) It shall allow for a wired connection to peripherals approved by the State Board, when certifying an electronic poll book pursuant to Rule .0402 of this Chapter, that are required for the operation of the electronic poll book and, as minimally required for functionality, allow for a secure network connection for the secure transmission of data with the state's electronic information management system, provided that the connection to the network is not automatically enabled by default upon powering on or opening the electronic poll book. All other forms of connectivity are prohibited.

(b) A vendor applying for certification by the State Board of Elections of an electronic poll book shall, as part of the certification application, fulfill the following requirements:

- (1) The vendor shall submit the electronic poll book for examination, testing, and evaluation by the State Board. The vendor shall initiate the certification process by submitting a letter of application directed to the Executive Director of the State Board. A corporate officer or designee of the vendor shall sign the letter, and the letter shall include:
  - (A) The name and contact information of the company and the name and title of the corporate officer signing the application and all corporate information requested by the State Board.
  - (B) The vendor's corporate information. Corporate information shall include a history and description of the business, year established, products and services offered, areas served, branch office locations, and subsidiary or parent companies; a list of owners or shareholders with a five percent or greater interest or share in each of the vendor's company, subsidiary companies, and parent company; a description of management and staff organization, number of full-time employees by category, number of part-time employees by category, and resumes of employees to be tasked with assisting purchasing counties; documentation demonstrating that the vendor meets the same level of security compliance required for vendors connected to the State Network, as that term is defined in G.S. 143B-1370(a)(5)g.; a report showing the results of an independent audit of the business for its most current fiscal year; a comfort letter from the vendor's primary bank; and a description of the vendor's financial history including a financial statement for the past three fiscal years. If the vendor is not the manufacturer of the equipment for which application is made, the vendor shall include the vendor's financial statement for the past three fiscal years.
  - (C) The name and version number of the electronic poll book to be certified, and a list of all jurisdictions that have certified, have used, or are currently using the electronic poll book.
  - (D) An attestation that the corporate officer signing the application has reviewed and confirmed that the electronic poll book meets all legal

- requirements of electronic poll book systems under state and federal law.
  - (2) The vendor shall provide a listing of all software, hardware, and consumables necessary for operation of the electronic poll book, a technical data package, an accounting of any prior submission of the electronic poll book to another jurisdiction for certification, an accounting of any decertification of the vendor's electronic poll book or other voting product, and a demonstration of the system. The vendor shall provide access to the information required to be placed in escrow by a vendor pursuant to G.S. 163-165.9A.
  - (3) The vendor shall submit documentation of any review of the electronic poll book by an independent testing authority for compliance with federal or state standards, requirements, or guidance applicable to electronic poll books.
  - (4) The vendor shall provide a copy of its standard purchase contract and shall quote a statewide uniform price for each unit of the electronic poll book, including peripherals, consumables, and software required for operation of the electronic poll book.
  - (5) The vendor shall post a bond or letter of credit to cover damages resulting from defects in the electronic poll book, sufficient to cover any costs of conducting a new statewide election attributable to those defects. The State Board shall survey the county boards of elections in April of every odd-numbered year following an election held at the time prescribed in G.S. 163-1(c) to determine each county's costs for conducting its most recent general election, and the State Board shall aggregate those amounts to arrive at the cost of conducting a new statewide election. That aggregate amount shall determine the bond or letter of credit requirement, and it shall be effective June 1 of the year the survey is conducted and remain in effect until an amount is likewise calculated in a subsequent odd-numbered year following an election held at the time prescribed in G.S. 163-1(c) and is made effective.
  - (6) The vendor shall bear all of its costs associated with certification.
- (c) The State Board shall terminate a pending certification process if:
- (1) The vendor fails to respond to a State Board request for information or other resources required to be provided under Paragraph (b) of this Rule for the certification process.
  - (2) The State Board identifies the lack of a necessary quality or element in the electronic poll book system, vendor, or certification application that cannot be remedied by the vendor and is required for certification under this Rule.
  - (3) The vendor withdraws from the certification process.
- (d) A vendor, to maintain certification by the State Board of Elections of the vendor's electronic poll book, shall fulfill the following requirements for the duration of the electronic poll book's certification and use in North Carolina:
- (1) The vendor shall conduct a presentation to demonstrate for a county board of elections, as part of that county board's procurement and acceptance of a certified electronic poll book, the system's ability to execute its designed functionality as presented and tested during State-level certification and the vendor's ability to fulfill the duties required by G.S. 163-165.9A.
  - (2) The vendor shall submit to the State Board any escrow-related affidavits and other information required by G.S. 163-165.9A.
  - (3) The vendor's contract with each purchasing county shall include the agreement required by G.S. 163-165.7(c)(4) and the following training and support:
    - (A) Operational training for a purchasing county's elections personnel;
    - (B) Operational support prior to and during any election in which the certified electronic poll book will be in use; and
    - (C) End-of-life and end-of-service-life planning for the certified electronic poll book system, including guaranteed support until the system has reached the vendor's stated end-of-life date, optional extended support until the system has reached the end-of-service-life date, and sanitization of the electronic poll book once it has reached its end-of-service-life. End-of-life shall mean the point in time in which the vendor will no longer sell or market the electronic poll book. End-of-service-life shall mean the point in time in which the vendor will no longer provide maintenance or support for the electronic poll book.
  - (4) The vendor shall provide, upon request by the State Board or a purchasing county, memory devices or USB drives, sufficient in number to support the operation of the certified electronic poll book in an election setting, that meet industry standards for sanitization and security requirements for cryptographic modules, use cryptographic hashing algorithms of Secure Hash Algorithm 256-bit (SHA-256) or higher, and meet all applicable North Carolina Department of Information Technology information security standards. The standard for sanitization shall be as prescribed in National Institute of Standards and Technology

(NIST) SP 800-88 Guidelines for Media Sanitization, including subsequent amendments and editions. A copy of the SP 800-88 Guidelines are available for inspection in the offices of the State Board of Elections and may also be obtained at no cost by accessing the NIST website at <https://csrc.nist.gov/pubs/sp/800/88/r1/final>.

The security requirements for cryptographic modules shall be as prescribed in the National Institute of Standards and Technology's Federal Information Processing Standards 140-3 (FIPS 140-3), including subsequent amendments and editions. A copy of the FIPS 140-3 is available for inspection in the offices of the State Board of Elections and may also be obtained at no cost by accessing the NIST website at <https://csrc.nist.gov/pubs/fips/140-3/final>.

- (5) The vendor shall allow the State Board to examine the certified electronic poll book at any time to ensure compliance with state and federal election laws and certification standards. To facilitate this requirement, the vendor shall make available to the State Board, upon request and at no cost to the agency, a certified electronic poll book model. The vendor shall, upon request, assist in the State Board's examination and submit requested changes to the electronic poll book to the State Board to ensure continued compliance with state and federal law.
- (6) The vendor shall submit documentation to the State Board identifying and describing a proposed change to a certified electronic poll book in use in North Carolina. The vendor shall, upon request, assist in the State Board's review of proposed changes. No vendor shall provide a county board of elections any software, firmware, hardware, or instruction that will change a certified electronic poll book unless that change has first been approved in accordance with Rule .0402(b) of this Chapter.
- (7) The vendor shall provide electronic notice to the State Board of another United States jurisdiction's decision to decertify or halt the use of its electronic poll book or other voting product within 24 hours of the jurisdiction's decision. The vendor shall provide electronic notice to the State Board of any incident, anomaly, or defect in the same system known to have occurred anywhere, and of any relevant defect known to have occurred in similar systems, within 24 hours of knowledge of the incident, anomaly, or defect.
- (8) The vendor shall maintain the required bond or letter of credit on a continuous basis, without interruption.
- (9) The vendor shall, on a quarterly basis, provide the State Board a quote for a statewide uniform

price for each unit of the electronic poll book. The vendor shall, on a quarterly basis, furnish the State Board with an accounting of purchases of certified electronic poll books by a jurisdiction within North Carolina.

- (e) In accordance with G.S. 163-165.7, compliance with this Rule shall not be required of an electronic poll book which is developed or maintained by the State Board of Elections for that electronic poll book to be used in an election in North Carolina.

*History Note: Authority G.S. 163-22; 163-165.7; 163-165.9A; 163-166.7;*  
*Eff. April 1, 2024.*

**08 NCAC 04 .0402 PROCEDURES FOR CERTIFICATION OF ELECTRONIC POLL BOOKS**

(a) Before certifying an electronic poll book for use in North Carolina, the State Board shall do the following:

- (1) Evaluate the electronic poll book for compliance with North Carolina laws and rules related to electronic poll books.
- (2) Examine an electronic poll book's system functions, operational procedures, user guides and maintenance manuals, certification reports from other states, reviews from product users, and any other documentation provided by the vendor.
- (3) Test the electronic poll book for its ability to meet the requirements in Rule .0401 of this Chapter.
- (4) Obtain from the proposed vendor a current financial statement and the manufacturer's contact information.

(b) Changes to Certified Electronic Poll Books. A vendor shall submit in writing for the review of the Executive Director of the State Board of Elections any change to a certified electronic poll book, including changes to its software, firmware, or hardware, prior to implementation in a certified electronic poll book in use in any county's elections. Following the review, the Executive Director shall determine whether the change is a modification or minor change of the certified electronic poll book. "Minor change" shall have the same meaning as that term is defined in Section 3.5 of Version 3.0 of the United States Election Assistance Commission's Voting System Testing & Certification Program Manual, not including subsequent amendments and editions. Minor changes can include manufacturer enhancements. A copy of the Manual is available for inspection in the offices of the State Board of Elections. A copy of the Manual may be obtained at no cost by accessing the website of the Election Assistance Commission at <https://www.eac.gov/voting-equipment/manuals-and-forms>. A "modification" is a change to a certified electronic poll book that is not a minor change. Based on this determination, the Executive Director shall proceed as follows:

- (1) If it is determined to be a modification, the vendor shall submit the electronic poll book as modified to the State Board of Elections for full review of its ability to meet the requirements in Rule .0401 of this Chapter.

(2) A vendor that proposes to implement a minor change to a certified electronic poll book shall, when submitting the proposal to the Executive Director for review and approval, identify whether the proposed minor change has been submitted to an independent testing authority accredited by or partnered with a federal agency for review and endorsement. If the State Board is unable to determine the nature and extent of a proposed minor change on the certified electronic poll book, the State Board may require the vendor to obtain review and endorsement by an independent testing authority accredited by or partnered with a federal agency before approving the minor change. The Executive Director shall make a written recommendation for administrative decision on the proposed minor change to the State Board. The State Board will then act on the recommendation as follows:

- (A) If, after two calendar days following the transmission of the recommendation, no State Board member has raised an oral or written objection to the Executive Director's recommendation, the recommendation will become effective.
- (B) If a State Board member raises an oral or written objection to the Executive Director's recommendation within two calendar days following the transmission of the recommendation, the State Board shall hear the matter or require the change to be reviewed as a modification.

A county board of elections using an electronic poll book certified by the State Board shall not implement a change to the electronic poll book until that change has been approved in accordance with this Paragraph.

(c) Decertification of Electronic Poll Book. The State Board of Elections shall hear and act on complaints, arising by petition or otherwise, that may result in the decertification of an electronic poll book in use in North Carolina. The State Board shall base its decision to decertify an electronic poll book on any of the following grounds:

- (1) The failure or neglect of an electronic poll book or its vendor to comply with any part of the election laws of the State of North Carolina, including a failure to adhere to and fulfill the requirements of Rule .0401 of this Chapter.
- (2) The implementation by a vendor of a change to a certified electronic poll book prior to State Board review and approval pursuant to Paragraph (b) of this Rule.
- (3) The failure or neglect of a vendor to update and maintain the operability and security of the electronic poll book.
- (4) The failure of the electronic poll book to satisfy all performance standards in Rule .0401 of this

Chapter in examination and testing, or in an election setting.

(5) The failure of the vendor to comply with the requirement in Rule .0401(d)(7) of this Chapter to provide electronic notice to the State Board of an incident or anomaly affecting the electronic poll book in any jurisdiction. As used in this Chapter, an "incident" is an event related to the security or functioning of the electronic poll book that contributed to, caused, or may have caused any of the following:

- (A) An interruption to the voter check-in process, reporting process, or both processes.
- (B) An unauthorized disclosure of voter information.
- (C) An unauthorized access to the electronic poll book.
- (D) The software or data of the electronic poll book to become unreliable or corrupt.  
As used in this Chapter, an "anomaly" is an unexpected functioning of the electronic poll book in its operation.

(6) The failure of the vendor to report in writing to the State Board a change in the vendor's corporate information provided with the certification application. The vendor shall make the report within 30 calendar days of the change.

(7) The electronic poll book reaching its end-of-service-life date.

Before exercising its power to decertify an electronic poll book, the State Board shall notify the electronic poll book vendor and any affected county boards of elections, and shall give the opportunity for the vendor and county boards to be heard at a hearing to be set by the State Board. The State Board's written decision to decertify an electronic poll book shall be considered a final decision for purposes of seeking judicial review. An electronic poll book that has been decertified by the State Board cannot be used for elections held in the State of North Carolina and cannot be purchased by a county board of elections. Upon decertification of an electronic poll book, the memory of those units in the possession of a county board of elections shall be sanitized by the county board of elections in accordance with the applicable North Carolina Department of Information Technology information security standard for media sanitization, including subsequent amendments and editions, prior to disposition.

(d) Suspension of Electronic Poll Book. The Executive Director of the State Board shall, in the event of a threat to the integrity of an election or the privacy of voter information, issue a written order to a county board of elections to suspend the use of a certified electronic poll book system, or individual unit, for a term not to exceed one month. The Executive Director shall give written notice of the suspension to the electronic poll book vendor.

(e) In accordance with G.S. 163-165.7, this Rule shall not apply to an electronic poll book which is developed or maintained by the State Board of Elections.

History Note: Authority G.S. 163-22; 163-165.7; 163-165.9A; 163-166.7; Eff. April 1, 2024.

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**08 NCAC 17 .0101 VERIFICATION OF PHOTO IDENTIFICATION DURING IN-PERSON VOTING**

(a) When a person presenting to vote checks in at a voting site, an election official shall ask the voter to show photo identification in accordance with G.S. 163-166.16 and this Rule. The election official shall examine any photo identification provided by the person presenting to vote and shall determine the following:

- (1) The photo identification is of the type acceptable for voting purposes pursuant to G.S. 163-166.16(a). A valid United States passport book or passport card is acceptable pursuant to G.S. 163-166.16(a)(1)c.
- (2) The photograph appearing on the photo identification bears a reasonable resemblance to the person presenting to vote. A reasonable resemblance is a similarity in appearance such that an ordinary person would conclude that the photograph on the identification is more likely than not the person presenting to vote. The election official shall make this determination based on the totality of the circumstances, bearing in mind that there are many reasons that a person's appearance could change (such as, for illustrative purposes only, changes in hair, facial hair, or weight; or the effects of medical conditions, aging, or medical treatment). The election official shall also be guided by the purpose of the photo identification requirement, which is to confirm the person presenting to vote is the registered voter on the voter registration records.
- (3) The name appearing on the photo identification is the same as or substantially equivalent to the name contained in the voter's voter registration record. The election official shall make this determination based on the totality of the circumstances, construing all evidence, along with any explanation or documentation voluntarily offered by the person presenting to vote, in the light most favorable to that person. The election official shall consider the name appearing on the photo identification to be substantially equivalent to the name contained in the registration record if differences are attributable to a reasonable explanation, which shall include but is not limited to one or more of the following reasons:
  - (A) Omission or inclusion of one or more parts of the name (such as, for

illustrative purposes only, Mary Beth Smith versus Beth Smith, or Patrick Todd Jackson, Jr. versus Patrick Todd Jackson, or Maria Guzman-Santana versus Maria Guzman);

- (B) Use of a variation or nickname rather than a formal name (such as, for illustrative purposes only, Bill versus William, or Sue versus Susanne);
- (C) Use of an initial in place of one or more parts of a given name (such as, for illustrative purposes only, A.B. Sanchez versus Aaron B. Sanchez);
- (D) Use of a former name, including maiden names (such as, for illustrative purposes only, Emily Jones versus Emily Gibson), or a variation that includes or omits a hyphenation or hyphen (such as, for illustrative purposes only, Chantell D. Jacobson-Smith versus Chantell D. Jacobson or Chantell D. Jacobson Smith), an accent (such as, for illustrative purposes only, José Muñoz versus Jose Munoz), or an apostrophe (such as, for illustrative purposes only, Andrea D'Antonio versus Andrea Dantonio);
- (E) Ordering of names (such as, for illustrative purposes only, Maria Eva Garcia Lopez versus Maria E. Lopez-Garcia); or
- (F) Variation in spelling or typographical errors (such as, for illustrative purposes only, Dennis McCarthy versus Denis McCarthy, or Aarav Robertson versus Aarav Robertsson).

If a voter is casting a provisional ballot because the voter's record does not appear in the poll book, the election official shall instead compare the name on the photo identification with the name provided by the voter on the provisional ballot application.

- (b) The election official checking in the person presenting to vote, when examining the photo identification of that person, shall not require the voter to provide any evidence regarding the identification apart from the identification itself. If the face of the person presenting to vote is covered to such an extent that the election official cannot determine reasonable resemblance under Subparagraph (a)(2) of this Rule, then the election official shall inform the voter that the face covering is preventing the official from determining that the photo on the identification is that of the voter and shall offer the voter the option to briefly remove the face covering. If the voter chooses not to remove the covering, then the election official shall enter a challenge in accordance with Subparagraph (d)(3) of this Rule.
- (c) Differences between the address appearing on the photo identification of a person presenting to vote and the address contained in the registration record of that person shall not be

considered as evidence that the photographic identification fails to meet the requirements of G.S. 163-166.16 or this Rule.

(d) After examining the photo identification according to Paragraphs (a) through (c) of this Rule, the election official shall proceed as follows:

- (1) If the election official determines that the photo identification meets all the requirements of Paragraph (a) of this Rule, then the election official shall allow the person to vote pursuant to G.S. 163-166.7.
- (2) If the election official determines that the photo identification is not an acceptable type of photo identification under Subparagraph (a)(1) of this Rule, the election official shall inform the person presenting to vote of the reasons for that determination (such as, for illustrative purposes only, that the photo identification is not on the list of student identifications approved by the State Board of Elections) and shall invite the person to provide any other photo identification that is acceptable under Subparagraph (a)(1) of this Rule that the person may have. If the person presenting to vote does not produce photo identification that meets all the requirements of Subparagraph (a)(1) of this Rule, then the election official shall inform the person presenting to vote of both options to vote by provisional ballot in accordance with Paragraph (e) of this Rule.
- (3) If the election official determines that the photo or name on the photo identification do not satisfy Subparagraphs (a)(2) and (a)(3) of this Rule, the election official shall inform the person presenting to vote of the reasons for that determination and shall invite the person to provide any other photo identification that the person may have that is acceptable under Subparagraph (a)(1) and satisfies Subparagraphs (a)(2) and (a)(3) of this Rule. If the person presenting to vote does not produce photo identification that meets all the requirements of Paragraph (a) of this Rule, then the election official shall enter a challenge pursuant to G.S. 163-87 and immediately notify the voting site's judges of election of the challenge. The judges of election shall then conduct a challenge hearing, in accordance with the applicable procedures in G.S. 163-88. At the conclusion of the hearing, the judges of election shall vote on whether the photo appearing on the photo identification of the person presenting to vote bears a reasonable resemblance to that person or whether the name appearing on the photo identification is the same as or substantially equivalent to the name contained in the voter's voter registration record, applying the same standards as the election official initially reviewing the identification under Subparagraphs (a)(2) and (a)(3). Each judge

shall record the judge's findings in writing. Only if the judges of election unanimously find that the photo appearing on the photo identification does not bear a reasonable resemblance to the person presenting to vote, or that the name appearing on the photo identification is not the same as or substantially equivalent to the name contained in the voter's voter registration record, the voter shall be offered both options to vote by provisional ballot in accordance with Paragraph (e) of this Rule. Absent such a unanimous finding, the person shall vote with a regular ballot pursuant to G.S. 163-166.7. When the judges of election conduct a challenge hearing under this Rule and the challenge is to a curbside voter, to ensure the voting enclosure remains properly attended, the judges may separately visit the curbside location to assess the voter's identification.

(e) A person presenting to vote who does not present acceptable photo identification in accordance with this Rule shall be offered both of the following options:

- (1) To vote by provisional ballot with an affidavit claiming an exception to the identification requirement, pursuant to G.S. 163-166.16(d). If the voter has completed the affidavit as required in G.S. 163-166.16(d) and is otherwise eligible to vote, the county board shall count the provisional ballot unless the county board unanimously finds that the affidavit is false. The county board shall substantiate any finding of falsity with grounds recorded in a written decision, and those grounds shall be based only on facts and not speculation. Before disapproving a voter's provisional ballot because of a finding of falsity, the county board shall provide the voter advance notice and an opportunity to address the county board prior to completion of the canvass on any grounds that the county board is considering regarding the falsity of the affidavit. The notice shall identify the specific reasons the county board is considering the affidavit to be potentially false and inform the voter how the voter may address the reasons for potential falsity, which shall include the options to provide a written explanation or documentation or to address the board at a meeting in person. The county board shall send the notice via U.S. Mail within one business day of a county board's preliminary finding of falsity, provided that the opportunity to be heard is at least five days from the date of mailing. The notice shall be mailed for next-day delivery if the opportunity to be heard is less than five days from the date of mailing. Notice shall also be provided within one business day of a county board's preliminary finding of falsity by any email address or phone number that the county board possesses for the voter.

The notice and opportunity to address the county board provided for in this Subparagraph shall be offered only to those provisional voters for whom a number of county board members equal to one less than all of the members of the county board, or more, have identified a specific reason, based only on facts and not speculation, to find that the affidavit claiming an exception to the identification requirement is false.

(2) To vote by provisional ballot and then bring to the office of the county board identification acceptable under G.S. 163-166.16 and this Rule before 5 p.m. on the business day before county canvass. If the voter brings photo identification to the office of a county board in a timely manner, a county board staff member shall examine the photo identification in accordance with Paragraphs (a), (b), and (c) of this Rule. After examining the photo identification, the staff member shall proceed as follows:

(A) If the photo identification meets all the requirements of Paragraph (a) of this Rule, the staff member shall recommend approval of the provisional ballot to the county board.

(B) If the photo identification is not an acceptable type of photo identification under Subparagraph (a)(1) of this Rule, then the staff member shall inform the voter of the reasons for that determination, while the voter is at the county board office, and invite the voter to provide an acceptable photo identification in accordance with Subparagraph (d)(2) of this Rule. If the voter does not provide acceptable identification by 5:00 p.m. on the business day prior to the canvass, then county board staff shall recommend disapproval of the provisional ballot to the county board.

(C) If the photo or name on the photo identification do not satisfy Subparagraphs (a)(2) and (a)(3) of this Rule, then the staff member shall inform the voter of the reasons for that determination and shall invite the voter to provide any other photo identification that meets the requirement of Paragraph (a) of this Rule. If the voter does not produce photo identification that meets the requirement of Paragraph (a) of this Rule, then the staff member shall recommend disapproval of the provisional ballot to the county board. While the voter is at the county board office, the staff member shall inform

the voter of the recommendation and provide notice to the voter of the county board meeting at which the voter's provisional ballot will be reviewed and considered by the county board. If the voter appears at that meeting and desires to address the county board on whether their photo identification meets the requirement of Paragraph (a) of this Rule, the county board members are subject to the requirements of this Rule in the same manner as a staff member initially examining a voter's photo identification.

If the voter brings photo identification that is an acceptable type of photo identification under Subparagraph (a)(1) of this Rule to the county board office before 5 p.m. on the business day prior to the canvass, the county board shall count the provisional ballot unless the county board unanimously decides the photo identification presented does not satisfy Subparagraphs (a)(2) and (a)(3) of this Rule, in which case the county board shall record in writing the grounds for its decision.

*History Note: Authority G.S. 163-22; 163-166.7; 163-166.11; 163-166.16; Eff. January 1, 2016; Temporary Amendment Eff. August 23, 2019; Temporary Amendment Expired Eff. June 12, 2020; Temporary Amendment Eff. August 1, 2023; Amended Eff. April 1, 2024.*

**08 NCAC 17 .0102 DETERMINATION OF REASONABLE RESEMBLANCE BY JUDGES OF ELECTION**

**08 NCAC 17 .0103 IDENTIFICATION REQUIRED OF CURBSIDE VOTERS**

*History Note: Authority G.S. 163-166.7; 163-82.6A; 163-82.15; 163-88.1; 163-166.7; NAACP v. McCrory, 831 F.3d 204 (4<sup>th</sup> Cir. 2016); 163A-1145.1; S.L. 2018-144, s. 3.1(e); Eff. January 1, 2016; Temporary Amendment Eff. August 23, 2019 (.0102); Temporary Repeal Eff. August 23, 2019 (.0103); Temporary Amendment Expired Eff. June 12, 2020 (.0103); Temporary Repeal Eff. August 1, 2023; Repealed Eff. April 1, 2024.*

**08 NCAC 17 .0105 DECLARATION OF RELIGIOUS OBJECTION TO PHOTOGRAPH**

*History Note: Authority NAACP v. McCrory, 831 F.3d 204 (4<sup>th</sup> Cir. 2016); S.L. 2018-144, s. 3.1.(a),(e), (h); Eff. January 1, 2016; Temporary Repeal Eff. August 23, 2019; Temporary Repeal Exp. Eff. June 12, 2020;*

*Temporary Repeal Eff. August 1, 2023;*  
*Repealed Eff. April 1, 2024.*

**08 NCAC 17 .0106      SIGNAGE NOTIFYING ONE-STOP VOTERS OF THE OPTION TO REQUEST AN ABSENTEE BALLOT**

*History Note: Authority NAACP v. McCrory, 831 F.3d 204 (4th Cir. 2016); S.L. 2018-144, s. 3.1.(j); Eff. March 1, 2016;*  
*Temporary Repeal Eff. August 23, 2019;*  
*Temporary Repeal Exp. Eff. June 12, 2020;*  
*Temporary Repeal Eff. August 1, 2023;*  
*Repealed Eff. April 1, 2024.*

**08 NCAC 17 .0109      PHOTO IDENTIFICATION FOR ABSENTEE-BY-MAIL BALLOTS**

(a) Identification Requirement for Absentee-by-Mail Ballots. Photo identification accompanying a voter's absentee ballot pursuant to G.S. 163-230.1(f1) is acceptable if it is a photocopy of a type of photo identification acceptable for voting purposes under 08 NCAC 17 .0101(a)(1), is readable, and the name appearing on the identification is the same as or substantially equivalent to the name contained in the voter's voter registration record in accordance with 08 NCAC 17 .0101(a)(3). As used in this Rule, "readable" means that, on the photocopy of identification required by this Rule, the name on the identification can be read and the photograph depicts a person, as opposed to displaying, for example, a mere shadow or outline of a person. A photo identification shall not be rejected due to differences between the address appearing on an absentee voter's photo identification and any address contained in the voter's absentee request form, absentee ballot application, or registration record. A copy of photo identification that is acceptable under this Rule need include only the side of the identification (or, if the identification is a booklet, the page of the identification) where the person's name and photo appears.

(b) Initial Review by County Board Staff. County board staff shall, upon receipt of a voter's absentee ballot application, determine whether the application is accompanied by a photocopy of photo identification that is acceptable under Paragraph (a) of this Rule, or, if the application is accompanied by an affidavit claiming an exception to the identification requirement pursuant to G.S. 163-166.16(d), determine whether the affidavit includes the affirmations required by G.S. 163-166.16(d) for that exception and, if applicable, the personal identification number required to be provided by G.S. 163-230.1(g)(2). Staff shall review the registration records to determine whether the number provided matches the corresponding number in the registration records. The number required to be provided by G.S. 163-230.1(g)(2) is deficient only if it does not match the corresponding number listed in the voter's voter registration record.

If staff identify any deficiency, they shall mail written notice of the deficiency to the voter within one business day of identifying the deficiency, informing the voter that the voter, the voter's verifiable legal guardian or near relative, or a person of the voter's choice if the voter needs assistance due to the voter's disability, may provide a photocopy of the voter's acceptable photo identification or a completed affidavit claiming an exception. The

notice shall state the photocopy or affidavit must be received by the county board by 5 p.m. on the business day before the county canvass. The notice of the deficiency shall also be provided by telephone or email if the telephone number or email address was provided by the voter on the request form for the absentee ballot. The voter may transmit either of the above documentation curing the deficiency in person, by mail, or by email.

(c) Final Review by County Board. The county board shall, at the first meeting held pursuant to G.S. 163-230.1(f) after the application and ballot is received, proceed as follows:

(1) If the voter has submitted a photocopy of their photo identification, the county board shall make its determination whether the identification is acceptable under Paragraph (a) of this Rule. A final determination that the photocopy of photo identification is not acceptable under Paragraph (a) of this Rule shall require a unanimous vote by the county board. If the county board makes a final determination that a voter's photocopy of photo identification is not acceptable, staff shall notify the voter as provided in Paragraph (b) of this Rule, and the county board shall reserve its final decision on the approval of the absentee application until the next official meeting after it receives documentation curing the deficiency or the county canvass, whichever occurs first.

(2) If the voter has completed an affidavit claiming an exception to the identification requirement pursuant to G.S. 163-166.16(d) and is otherwise eligible to vote, the county board may reject that person's ballot only if the county board unanimously finds that the affidavit is false. The county board shall substantiate any finding of falsity with grounds recorded in a written decision, and those grounds shall be based only on facts and not speculation. Before rejecting a voter's ballot because of a finding of falsity, the county board shall provide the voter advance notice and an opportunity to address the county board prior to the completion of canvass on any grounds that the county board is considering regarding the falsity of the affidavit. The notice shall identify the specific reasons the county board is considering the affidavit to be potentially false and inform the voter how the voter may address the reasons for potential falsity, which shall include the options to provide a written explanation or documentation or to address the board at a meeting in person. The county board shall send the notice via U.S. Mail within one business day of a county board's preliminary finding of falsity, provided that the opportunity to be heard is at least five days from the date of mailing. The notice shall be mailed for next-day delivery if the opportunity to be heard is less than five days from the date of mailing. Notice shall also be provided within one business day of a county

board's preliminary finding of falsity by any email address or phone number that the county board possesses for the voter. The notice and opportunity to address the county board provided for in this Subparagraph shall be offered only to those voters for whom a number of county board members equal to one less than all of the members of the county board, or more, have identified a specific reason, based only on facts and not speculation, to find that the affidavit claiming an exception to the identification requirement is false.

- (3) If a voter's photocopy of photo identification or affidavit claiming an exception to the identification requirement pursuant to G.S. 163-166.16(d) is deemed deficient upon initial review under Paragraph (b) of this Rule, the county board shall reserve its final decision on the approval of the absentee application until the next official meeting after it receives documentation curing the deficiency identified pursuant to Paragraph (b) of this Rule or the county canvass, whichever occurs first.

(d) Exception for Military and Overseas Voters. A voter who is casting a ballot pursuant to G.S. 163, Article 21A, Part 1 is not required to submit a photocopy of acceptable photo identification under Paragraph (a) of this Rule or claim an exception under G.S. 163-166.16(d).

(e) Return of Original Form of Identification. If a voter sends their original form of photo identification in the container-return envelope, or if a voter or other person permitted to return the voter's absentee ballot hand-delivers an absentee ballot to the county board of elections that is not accompanied by a photocopy of the voter's photo identification and the voter or other person has the voter's photo identification that is a type acceptable for voting purposes under 08 NCAC 17 .0101(a)(1) on hand, the county board shall make a photocopy of the identification, which shall serve as an acceptable photo identification accompanying the voter's absentee ballot. When a voter sends their original form of photo identification in the container-return envelope, the county board shall notify the voter by mail and by any email address or phone number that the county board possesses for the voter that the original photo identification will be returned to the voter. The county board shall use a method of return that documents receipt of the photo identification.

*History Note:* Authority G.S. 163-22; 163-166.7; 163-166.16; 163-230.1;  
*Temporary Adoption Eff.* August 23, 2019; January 1, 2020;  
*Temporary Rule Exp. Eff.* October 11, 2020;  
*Temporary Adoption Eff.* August 1, 2023;  
*Eff.* April 1, 2024.

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**TITLE 09 - OFFICE OF THE GOVERNOR AND LT. GOVERNOR**

**09 NCAC 03M .0202 RECIPIENT AND SUBRECIPIENT RESPONSIBILITIES**

A recipient or subrecipient that receives grants shall ensure that those funds are utilized for their intended purpose, as outlined in the contract, and shall expend those funds in compliance with requirements established by this Subchapter and their contract. Recipients and subrecipients shall:

- (1) Maintain reports and accounting records that support the allowable expenditure of State funds. Recipients and subrecipients shall maintain such reports and records for five years from the end of the grant agreement and shall make available all reports and records for inspection by the awarding agency, the Office of State Budget and Management, and the Office of the State Auditor for oversight, monitoring, and evaluation purposes.
- (2) Ensure that subrecipients comply with all reporting requirements established by this Subchapter and their contract and report to the appropriate disbursing entity.
- (3) Have the option to request in writing to the Office of State Budget and Management to be removed from the Suspension of Funding List if they believe they have been suspended in error. Once removed from the Suspension of Funding List, the recipient is eligible for current and future grants.

*History Note:* Authority G.S. 143C-6-22; 143C-6-23;  
*Eff.* July 1, 2005;  
*Readopted Eff.* July 1, 2016;  
*Amended Eff.* July 1, 2024.

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**TITLE 10A - DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**10A NCAC 13L .0301 WRITTEN POLICIES AND PROCEDURES**

- (a) The nursing pool shall have written administrative and personnel policies to govern the services that it provides. These policies shall include those concerning patient care, personnel, training and orientation, supervision, employee evaluation, and organizational structure.
- (b) At the option of the licensee, written policies and procedures may address other services not subject to the Nursing Pool Licensure Act. The Division shall not require separate policies and procedures if the premises from which nursing pool services are offered also offers additional temporary nursing services not subject to licensure.
- (c) Policies shall provide that no reprisal action shall be taken against any employee who reports instances of patient rights violations or patient abuse, neglect, or exploitation to the appropriate governmental authority.
- (d) The nursing pool shall retain all administrative records for five years and shall make these records available to the Division upon request. Administrative records shall include:

- (1) documents evidencing control and ownerships, such as corporation or partnership papers;
- (2) policies and procedures governing the operation of the agency;
- (3) minutes of the agency's professional and administrative staff meetings;
- (4) reports of complaints, inspections, reviews, and corrective actions taken related to licensure; and
- (5) contracts and agreements to which the agency is a party.

- (8) EMD: Emergency Medical Dispatcher;
- (9) EMDPRS: Emergency Medical Dispatch Priority Reference System;
- (10) EMR: Emergency Medical Responder;
- (11) EMS: Emergency Medical Services;
- (12) EMS-NP: EMS Nurse Practitioner;
- (13) EMS-PA: EMS Physician Assistant;
- (14) EMT: Emergency Medical Technician;
- (15) FAA: Federal Aviation Administration;
- (16) FCC: Federal Communications Commission;
- (17) ICD: International Classification of Diseases;
- (18) ISS: Injury Severity Score;
- (19) NHTSA: National Highway Traffic Safety Administration;
- (20) OEMS: Office of Emergency Medical Services;
- (21) OR: Operating Room;
- (22) PSAP: Public Safety Answering Point;
- (23) RAC: Regional Advisory Committee;
- (24) RFP: Request For Proposal;
- (25) SCTP: Specialty Care Transport Program;
- (26) STEMI: ST Elevation Myocardial Infarction; and
- (27) US DOT: United States Department of Transportation.

*History Note: Authority G.S. 131E-154.4; Eff. January 1, 1991; Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. June 20, 2015; Amended Eff. April 1, 2024.*

**10A NCAC 13L .0302 PERSONNEL RECORDS**

- (a) A nursing pool shall maintain a personnel record on each individual.
- (b) Each individual's personnel record shall include:
  - (1) A legible copy of an unexpired license verification to practice nursing as a registered nurse or a licensed practical nurse or an unexpired Nurse Aide I or Nurse Aide II listing verification.
  - (2) A completed job application with employment history, training, education, continuing education, and identification data including name, address, and telephone number.
  - (3) Results of reference checks.
  - (4) Performance evaluations annually. The annual performance evaluation shall include feedback from the health care facility of the on-site performance of contracted nursing personnel.
- (c) Personnel records shall be maintained for one year after termination from agency employment.

*History Note: Authority G.S. 143-508(b); Temporary Adoption Eff. January 1, 2002; Eff. April 1, 2003; Amended Eff. January 1, 2009; January 1, 2004; Readopted Eff. January 1, 2017; Amended Eff. April 1, 2024; July 1, 2021.*

**10A NCAC 13P .0102 DEFINITIONS**

In addition to the definitions in G.S. 131E-155, the following definitions apply throughout this Subchapter:

- (1) "Affiliated EMS Provider" means the firm, corporation, agency, organization, or association identified with a specific county EMS system as a condition for EMS Provider Licensing as required by Rule .0204 of this Subchapter.
- (2) "Affiliated Hospital" means a non-trauma center hospital that is owned by the Trauma Center or a hospital with a contract or other agreement to allow for the acceptance or transfer of the Trauma Center's patient population to the non-trauma center hospital.
- (3) "Affiliate" or "Affiliation" means a reciprocal agreement and association that includes active participation, collaboration, and involvement in a process or system between two or more parties.
- (4) "Alternative Practice Setting" means a practice setting that utilizes credentialed EMS personnel that may not be affiliated with or under the oversight of an EMS System or EMS System Medical Director.
- (5) "Air Medical Ambulance" means an aircraft configured and medically equipped to transport

*History Note: Authority G.S. 131E-154.4; Eff. January 1, 1991; Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. June 20, 2015; Amended Eff. April 1, 2024.*

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**10A NCAC 13P .0101 ABBREVIATIONS**

As used in this Subchapter, the following abbreviations mean:

- (1) ACS: American College of Surgeons;
- (2) AEMT: Advanced Emergency Medical Technician;
- (3) AHA: American Heart Association;
- (4) ASTM: American Society for Testing and Materials;
- (5) CAAHEP: Commission on Accreditation of Allied Health Education Programs;
- (6) CPR: Cardiopulmonary Resuscitation;
- (7) ED: Emergency Department;

- patients by air. The patient care compartment of air medical ambulances shall be staffed by medical crew members approved for the mission by the Medical Director.
- (6) "Air Medical Program" means a SCTP or EMS System utilizing rotary-wing or fixed-wing aircraft configured and operated to transport patients.
- (7) "Assistant Medical Director" means a physician, EMS-PA, or EMS-NP who assists the Medical Director with the medical aspects of the management of a practice setting utilizing credentialed EMS personnel or medical crew members.
- (8) "Bypass" means a decision made by the patient care technician to transport a patient from the scene of an accident or medical emergency past a receiving facility for the purposes of accessing a facility with a higher level of care, by a hospital of its own volition to reroute a patient from the scene of an accident or medical emergency or referring hospital to a facility with a higher level of care.
- (9) "Community Paramedicine" means an EMS System utilizing credentialed personnel who have received additional training as determined by the EMS System Medical Director to provide knowledge and skills for the community needs beyond the 911 emergency response and transport operating guidelines defined in the EMS System plan.
- (10) "Contingencies" mean conditions placed on a designation that, if unmet, may result in the loss or amendment of a designation.
- (11) "Convalescent Ambulance" means an ambulance used on a scheduled basis solely to transport patients having a known non-emergency medical condition. Convalescent ambulances shall not be used in place of any other category of ambulance defined in this Subchapter.
- (12) "Deficiency" means the failure to meet essential criteria for a designation that can serve as the basis for a focused review or denial of a designation.
- (13) "Department" means the North Carolina Department of Health and Human Services.
- (14) "Diversion" means the hospital is unable to accept a patient due to a lack of staffing or resources.
- (15) "Educational Medical Advisor" means the physician responsible for overseeing the medical aspects of approved EMS educational programs.
- (16) "EMS Care" means all services provided within each EMS System by its affiliated EMS agencies and personnel that relate to the dispatch, response, treatment, and disposition of any patient.
- (17) "EMS Educational Institution" means any agency credentialed by the OEMS to offer EMS educational programs.
- (18) "EMS Non-Transporting Vehicle" means a motor vehicle operated by a licensed EMS provider dedicated and equipped to move medical equipment and EMS personnel functioning within the scope of practice of an AEMT or Paramedic to the scene of a request for assistance. EMS nontransporting vehicles shall not be used for the transportation of patients on the streets, highways, waterways, or airways of the state.
- (19) "EMS Peer Review Committee" means a committee as defined in G.S. 131E-155(6b).
- (20) "EMS Provider" means those entities defined in G.S. 131E-155(13a) that hold a current license issued by the Department pursuant to G.S. 131E-155.1.
- (21) "EMS System" means a coordinated arrangement of local resources under the authority of the county government (including all agencies, personnel, equipment, and facilities) organized to respond to medical emergencies and integrated with other health care providers and networks including public health, community health monitoring activities, and special needs populations.
- (22) "Essential Criteria" means those items that are the requirements for the respective level of trauma center designation (I, II, or III), as set forth in Rule .0901 of this Subchapter.
- (23) "Focused Review" means an evaluation by the OEMS of corrective actions to remove contingencies that are a result of deficiencies following a site visit.
- (24) "Ground Ambulance" means an ambulance used to transport patients with traumatic or medical conditions or patients for whom the need for specialty care, emergency, or non-emergency medical care is anticipated either at the patient location or during transport.
- (25) "Hospital" means a licensed facility as defined in G.S. 131E-176 or an acute care in-patient diagnostic and treatment facility located within the State of North Carolina that is owned and operated by an agency of the United States government.
- (26) "Inclusive Trauma System" means an organized, multi-disciplinary, evidence-based approach to provide quality care and to improve measurable outcomes for all defined injured patients. EMS, hospitals, other health systems, and clinicians shall participate in a structured manner through leadership, advocacy, injury prevention, education, clinical care, performance improvement, and research resulting in integrated trauma care.

- (27) "Infectious Disease Control Policy" means a written policy describing how the EMS system will protect and prevent its patients and EMS professionals from exposure and illness associated with contagions and infectious disease.
- (28) "Lead RAC Agency" means the agency (comprised of one or more Level I or II trauma centers) that provides staff support and serves as the coordinating entity for trauma planning.
- (29) "Level I Trauma Center" means a hospital that has the capability of providing guidance, research, and total care for every aspect of injury from prevention to rehabilitation.
- (30) "Level II Trauma Center" means a hospital that provides trauma care regardless of the severity of the injury, but may lack the comprehensive care as a Level I trauma center, and does not have trauma research as a primary objective.
- (31) "Level III Trauma Center" means a hospital that provides assessment, resuscitation, emergency operations, and stabilization, and arranges for hospital transfer as needed to a Level I or II trauma center.
- (32) "Medical Crew Member" means EMS personnel or other health care professionals who are licensed or registered in North Carolina and are affiliated with a SCTP.
- (33) "Medical Director" means the physician responsible for the medical aspects of the management of a practice setting utilizing credentialed EMS personnel or medical crew members, or a Trauma Center.
- (34) "Medical Oversight" means the responsibility for the management and accountability of the medical care aspects of a practice setting utilizing credentialed EMS personnel or medical crew members. Medical Oversight includes physician direction of the initial education and continuing education of EMS personnel or medical crew members; development and monitoring of both operational and treatment protocols; evaluation of the medical care rendered by EMS personnel or medical crew members; participation in system or program evaluation; and directing, by two-way voice communications, the medical care rendered by the EMS personnel or medical crew members.
- (35) "Mobile Integrated Healthcare" means utilizing credentialed personnel who have received additional training as determined by the Alternative Practice Setting medical director to provide knowledge and skills for the healthcare provider program needs.
- (36) "Office of Emergency Medical Services" means a section of the Division of Health Service Regulation of the North Carolina Department of Health and Human Services located at 1201 Umstead Drive, Raleigh, North Carolina 27603.
- (37) "On-line Medical Control" means the medical supervision or oversight provided to EMS personnel through direct communication in-person, via radio, cellular phone, or other communication device during the time the patient is under the care of an EMS professional.
- (38) "Operational Protocols" means the administrative policies and procedures of an EMS System or that provide guidance for the day-to-day operation of the system.
- (39) "Physician" means a medical or osteopathic doctor licensed by the North Carolina Medical Board to practice medicine in the state of North Carolina.
- (40) "Regional Advisory Committee" means a committee comprised of a lead RAC agency and a group representing trauma care providers and the community, for the purpose of regional planning, establishing, and maintaining a coordinated trauma system.
- (41) "Request for Proposal" means a State document that must be completed by each hospital seeking initial or renewal trauma center designation.
- (42) "Specialized Ambulance Protocol Summary (SAPS)" means a document listing of all standard medical equipment, supplies, and medications, approved by the Specialty Care or Air Medical Program Medical Director as sufficient to manage the anticipated number and severity of injury or illness of the patients, for all vehicles used in the program based on the treatment protocols and approved by the OEMS.
- (43) "Significant Failure to Comply" means a degree of non-compliance determined by the OEMS during compliance monitoring to exceed the ability of the local EMS System to correct, warranting enforcement action pursuant to Section .1500 of this Subchapter.
- (44) "Specialty Care Transport Program" means a program designed and operated for the transportation of a patient by ground or air requiring specialized interventions, monitoring, and staffing by a paramedic who has received additional training as determined by the program Medical Director beyond the minimum training prescribed by the OEMS, or by one or more other healthcare professional(s) qualified for the provision of specialized care based on the patient's condition.
- (45) "Specialty Care Transport Program Continuing Education Coordinator" means a Level I EMS Instructor within a SCTP who is responsible for the coordination of EMS continuing education

- programs for EMS personnel within the program.
- (46) "Stretcher" means any wheeled or portable device capable of transporting a person in a recumbent position and may only be used in an ambulance vehicle permitted by the Department.
- (47) "Stroke" means an acute cerebrovascular hemorrhage or occlusion resulting in a neurologic deficit.
- (48) "System Continuing Education Coordinator" means the Level II EMS Instructor designated by the local EMS System who is responsible for the coordination of EMS continuing education programs.
- (49) "System Data" means all information required for daily electronic submission to the OEMS by all EMS Systems using the EMS data set, data dictionary, and file format as specified in "North Carolina College of Emergency Physicians: Standards for Medical Oversight and Data Collection," incorporated herein by reference including subsequent amendments and editions. This document is available from the OEMS at <https://oems.nc.gov/systems> at no cost.
- (50) "Trauma Center" means a hospital designated by the State of North Carolina and distinguished by its ability to manage, on a 24-hour basis, the severely injured patient or those at risk for severe injury.
- (51) "Trauma Patient" means any patient with an ICD-CM discharge diagnosis as defined in the "North Carolina Trauma Registry Data Dictionary," incorporated herein by reference, including subsequent amendments and editions. This document is available from the OEMS online at <https://oems.nc.gov/wp-content/uploads/2022/10/datadictionary.pdf> at no cost.
- (52) "Trauma Program" means an administrative entity that includes the trauma service and coordinates other trauma-related activities. It shall also include the trauma Medical Director, trauma program manager/trauma coordinator, and trauma registrar. This program's reporting structure shall give it the ability to interact with at least equal authority with other departments in the hospital providing patient care.
- (53) "Trauma Registry" means a disease-specific data collection composed of a file of uniform data elements that describe the injury event, demographics, pre-hospital information, diagnosis, care, outcomes, and costs of treatment for injured patients collected and electronically submitted as defined by the OEMS. The elements of the Trauma Registry can be accessed online at <https://oems.nc.gov/wp-content/uploads/2022/10/datadictionary.pdf> at no cost.
- (54) "Treatment Protocols" means a document approved by the Medical Directors of the local EMS System, Specialty Care Transport Program, Alternative Practice Setting, or Trauma Center and the OEMS specifying the diagnostic procedures, treatment procedures, medication administration, and patient-care-related policies that shall be completed by EMS personnel or medical crew members based upon the assessment of a patient.
- (55) "Triage" means the assessment and categorization of a patient to determine the level of EMS and healthcare facility based care required.
- (56) "Water Ambulance" means a watercraft specifically configured and medically equipped to transport patients.

*History Note: Authority G.S. 131E-155(6b); 131E-162; 143-508(b); 143-508(d)(1); 143-508(d)(2); 143-508(d)(3); 143-508(d)(4); 143-508(d)(5); 143-508(d)(6); 143-508(d)(7); 143-508(d)(8); 143-508(d)(13); 143-518(a)(5); Temporary Adoption Eff. January 1, 2002; Eff. April 1, 2003; Amended Eff. March 3, 2009 pursuant to E.O. 9, Beverly Perdue, March 3, 2009; Pursuant to G.S. 150B-21.3(c), a bill was not ratified by the General Assembly to disapprove this rule; Readopted Eff. January 1, 2017; Amended Eff. April 1, 2024; July 1, 2021; September 1, 2019; July 1, 2018.*

**10A NCAC 13P .0201 EMS SYSTEM REQUIREMENTS**

(a) County governments shall establish EMS Systems. Each EMS System shall have:

- (1) a defined geographical service area for the EMS System. The minimum service area for an EMS System shall be one county. There may be multiple EMS Provider service areas within an EMS System. The highest level of care offered within any EMS Provider service area shall be available to the citizens within that service area 24 hours a day, seven days a week;
- (2) a defined scope of practice for all EMS personnel functioning in the EMS System within the parameters set forth by the North Carolina Medical Board pursuant to G.S. 143-514;
- (3) written policies and procedures describing the dispatch, coordination, and oversight of all responders that provide EMS care, specialty patient care skills, and procedures as set forth in Rule .0301 of this Subchapter, and ambulance transport within the system;
- (4) at least one licensed EMS Provider;

- (5) a listing of permitted ambulances to provide coverage to the service area 24 hours a day, seven days a week;
- (6) personnel credentialed to perform within the scope of practice of the system and to staff the ambulance vehicles as required by G.S. 131E-158. There shall be a written plan for the use of credentialed EMS personnel for all practice settings used within the system;
- (7) written policies and procedures specific to the utilization of the EMS System's EMS Care data for the daily and on-going management of all EMS System resources;
- (8) a written Infectious Disease Control Policy as defined in Rule .0102 of this Subchapter and written procedures that are approved by the EMS System Medical Director that address the cleansing and disinfecting of vehicles and equipment that are used to treat or transport patients;
- (9) a listing of resources that will provide online medical direction for all EMS Providers operating within the EMS System;
- (10) an EMS communication system that provides for:
  - (A) public access to emergency services by dialing 9-1-1 within the public dial telephone network as the primary method for the public to request emergency assistance. This number shall be connected to the PSAP with immediate assistance available such that no caller will be instructed to hang up the telephone and dial another telephone number. A person calling for emergency assistance shall not be required to speak with more than two persons to request emergency medical assistance;
  - (B) a PSAP operated by public safety telecommunicators with training in the management of calls for medical assistance available 24 hours a day, seven days a week;
  - (C) dispatch of the most appropriate emergency medical response unit or units to any caller's request for assistance. The dispatch of all response vehicles shall be in accordance with a written EMS System plan for the management and deployment of response vehicles including requests for mutual aid; and
  - (D) two-way radio voice communications from within the defined service area to the PSAP and to facilities where patients are transported. The PSAP shall maintain all required FCC radio licenses or authorizations;
- (11) written policies and procedures for addressing the use of SCTP and Air Medical Programs resources utilized within the system;
- (12) a written continuing education program for all credentialed EMS personnel, under the direction of a System Continuing Education Coordinator, developed and modified based on feedback from EMS Care system data, review, and evaluation of patient outcomes and quality management peer reviews, that follows the criteria set forth in Rule .0501 of this Subchapter;
- (13) written policies and procedures to address management of the EMS System that includes:
  - (A) triage and transport of all acutely ill and injured patients with time-dependent or other specialized care issues including trauma, stroke, STEMI, burn, and pediatric patients that may require the bypass of other licensed health care facilities and that are based upon the expanded clinical capabilities of the selected healthcare facilities;
  - (B) triage and transport of patients to facilities outside of the system;
  - (C) arrangements for transporting patients to identified facilities when diversion or bypass plans are activated;
  - (D) reporting, monitoring, and establishing standards for system response times using system data;
  - (E) a disaster plan;
  - (F) a mass-gathering plan that includes how the provision of EMS standby coverage for the public-at-large will be provided;
  - (G) a mass-casualty plan;
  - (H) a weapons plan for any weapon as set forth in Rule .0216 of this Section;
  - (I) a plan on how EMS personnel shall report suspected child abuse pursuant to G.S. 7B-301;
  - (J) a plan on how EMS personnel shall report suspected abuse of the disabled pursuant to G.S. 108A-102;
  - (K) a plan on how each responding agency is to maintain a current roster of its personnel providing EMS care within the county under the provider number issued pursuant to Paragraph (c) of this Rule, in the OEMS credentialing and information database; and
  - (L) a plan on how each licensed hospital facility will use and maintain two-way radio communication for receiving in coming patient from EMS providers;

- (14) affiliation as defined in Rule .0102 of this Subchapter with a trauma RAC as required by Rule .1101(b) of this Subchapter; and
  - (15) medical oversight as required by Section .0400 of this Subchapter.
- (b) Each EMS System that utilizes emergency medical dispatching agencies applying the principles of EMD or offering EMD services, procedures, or programs to the public shall have:
- (1) a defined service area for each agency;
  - (2) appropriate personnel within each agency, credentialed in accordance with the requirements set forth in Section .0500 of this Subchapter, to ensure EMD services to the citizens within that service area are available 24 hours per day, seven days a week, and a written policy describing how the agency will maintain a roster of credentialed EMD personnel in the OEMS credentialing and information database; and
  - (3) EMD responsibilities in special situations, such as disasters, mass-casualty incidents, or situations requiring referral to specialty hotlines; and
  - (4) EMD medical oversight as required in Section .0400 of this Subchapter.

(c) The EMS System shall obtain provider numbers from the OEMS for each entity that provides EMS Care within the county.

(d) An application to establish an EMS System shall be submitted by the county to the OEMS for review. When the system is comprised of more than one county, only one application shall be submitted. The proposal shall demonstrate that the system meets the requirements in Paragraph (a) of this Rule. System approval shall be granted for a period of six years. Systems shall apply to OEMS for reapproval no more than 90 days prior to expiration.

*History Note: Authority G.S. 131E-155(1); 131E-155(6); 131E-155(7); 131E-155(8); 131E-155(9); 131E-155(13a); 131E-155(15); 143-508(b); 143-508(d)(1); 143-508(d)(2); 143-508(d)(3); 143-508(d)(5); 143-508(d)(8); 143-508(d)(9); 143-508(d)(10); 143-508(d)(13); 143-517; 143-518;*

*Temporary Adoption Eff. January 1, 2002;*

*Eff. August 1, 2004;*

*Amended Eff. January 1, 2009;*

*Readopted Eff. January 1, 2017;*

*Amended Eff. April 1, 2024; July 1, 2018.*

**10A NCAC 13P .0207 GROUND AMBULANCE: VEHICLE AND EQUIPMENT REQUIREMENTS**

- (a) To be permitted as a Ground Ambulance, a vehicle shall have:
- (1) a patient compartment that meets the following interior dimensions:
    - (A) the length, measured on the floor from the back of the driver's compartment, driver's seat or partition to the inside edge of the rear loading doors, is at least 102 inches; and
    - (B) the height is at least 48 inches over the patient area, measured from the

- (2) approximate center of the floor, exclusive of cabinets or equipment; patient care equipment and supplies as defined in the "North Carolina College of Emergency Physicians: Standards for Medical Oversight and Data Collection." The equipment and supplies shall be clean, in working order, and secured in the vehicle;
- (3) other equipment that includes:
  - (A) one fire extinguisher mounted in a quick release bracket that is either a dry chemical or all-purpose type and has a pressure gauge; and
  - (B) the availability of one pediatric restraint device to safely transport pediatric patients and children under 40 pounds in the patient compartment of the ambulance;
- (4) the name of the EMS Provider permanently displayed on each side of the vehicle;
- (5) reflective tape affixed to the vehicle such that there is reflectivity on all sides of the vehicle;
- (6) emergency warning lights and audible warning devices mounted on the vehicle as required by G.S. 20-125. All warning devices shall function properly;
- (7) no structural or functional defects that may adversely affect the patient, the EMS personnel, or the safe operation of the vehicle;
- (8) an operational two-way radio that:
  - (A) is mounted to the ambulance and installed for safe operation and controlled by the ambulance driver;
  - (B) has the range, radio frequencies, and capabilities to establish and maintain two-way voice radio communication from within the defined service area of the EMS System to the emergency communications center or PSAP designated to direct or dispatch the deployment of the ambulance;
  - (C) is capable of establishing two-way voice radio communication from within the defined service area to the emergency department of the hospital(s) where patients are routinely transported and to facilities that provide on-line medical direction to EMS personnel;
  - (D) is equipped with a radio control device in the patient compartment capable of operation by the patient attendant to receive on-line medical direction; and
  - (E) is licensed or authorized by the FCC;
- (9) permanently installed heating and air conditioning systems; and
- (10) a copy of the EMS System patient care treatment protocols.

(b) Ground ambulances permitted by the OEMS that do not back up the 911 EMS System shall be exempt from requirements for two-way radio communications as defined in Subparagraph (a)(8) of this Rule. A two-way radio or radiotelephone device such as a cellular telephone shall be available to summon emergency assistance.

(c) Communication instruments or devices such as data radio, facsimile, computer, or telemetry radio shall be in addition to the mission dedicated dispatch radio and shall function independently from the mission dedicated radio.

*History Note: Authority G.S. 131E-157(a); 143-508(d)(8); Temporary Adoption Eff. January 1, 2002; Eff. April 1, 2003; Amended Eff. January 1, 2009; January 1, 2004; Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. February 2, 2016; Amended Eff. April 1, 2024.*

**10A NCAC 13P .0216 WEAPONS AND EXPLOSIVES FORBIDDEN**

(a) Weapons, whether lethal or non-lethal, and explosives shall not be worn or carried aboard an ambulance or EMS non-transporting vehicle within the State of North Carolina when the vehicle is operating in any patient treatment or transport capacity or is available for such function.

(b) Conducted electrical weapons and chemical irritants such as mace, pepper (oleoresin capsicum) spray, and tear gas shall be considered weapons for the purpose of this Rule.

(c) This Rule shall apply whether such weapons and explosives are concealed or visible.

(d) If any weapon is found to be in the possession of a patient or person accompanying the patient during transportation, the weapon shall be safely secured in accordance with the weapons policy as set forth in Rule .0201 of this Section.

(e) Weapons authorized for use by EMS personnel attached to a law enforcement tactical team in accordance with the weapons policy as set forth in Rule .0201 of this Section may be secured in a locked, dedicated compartment or gun safe mounted within the ambulance or non-transporting vehicle for use when dispatched in support of the law enforcement tactical team, but are not to be worn or carried open or concealed by any EMS personnel in the performance of normal EMS duties under any circumstances.

(f) This Rule shall not apply to duly appointed law enforcement officers.

(g) Safety flares are authorized for use on an ambulance with the following restrictions:

- (1) these devices are not stored inside the patient compartment of the ambulance; and
- (2) these devices shall be packaged and stored to prevent accidental discharge or ignition.

*History Note: Authority G.S. 131E-157(a); 143-508(d)(8); Temporary Adoption Eff. January 1, 2002; Eff. April 1, 2003; Readopted Eff. January 1, 2017; Amended Eff. April 1, 2024.*

**10A NCAC 13P .0217 MEDICAL AMBULANCE/EVACUATION BUS: VEHICLE AND EQUIPMENT REQUIREMENTS**

(a) A Medical Ambulance/Evacuation bus is a multiple passenger vehicle configured and medically equipped for emergency and non-emergency transport of at least three stretcher bound patients with traumatic or medical conditions.

(b) To be permitted as a Medical Ambulance/Evacuation Bus, a vehicle shall have:

- (1) a non-light penetrating sliding curtain installed behind the driver from floor-to-ceiling and from side-to-side to keep all light from the patient compartment from reaching the driver's area during vehicle operation at night;
- (2) patient care equipment and supplies as defined in the "North Carolina College of Emergency Physicians: Standards for Medical Oversight and Data Collection." The equipment and supplies shall be clean, in working order, and secured in the vehicle;
- (3) five-pound fire extinguishers mounted in a quick release bracket located inside the patient compartment at the front and rear of the vehicle that are either a dry chemical or all-purpose type and have pressure gauges;
- (4) monitor alarms installed inside the patient compartment at the front and rear of the vehicle to warn of unsafe buildup of carbon monoxide;
- (5) the name of the EMS provider permanently displayed on each side of the vehicle;
- (6) reflective tape affixed to the vehicle such that there is reflectivity on all sides of the vehicle;
- (7) emergency warning lights and audible warning devices mounted on the vehicle as required by G.S. 20-125. All warning devices shall function properly;
- (8) no structural or functional defects that may adversely affect the patient, the EMS personnel, or the safe operation of the vehicle;
- (9) an operational two-way radio that:
  - (A) is mounted to the ambulance and installed for safe operation and controlled by the ambulance driver;
  - (B) has the range, radio frequencies, and capabilities to establish and maintain two-way voice radio communication from within the defined service area of the EMS System to the emergency communications center or PSAP designated to direct or dispatch the deployment of the ambulance;
  - (C) is capable of establishing two-way voice radio communication from within the defined service area to the emergency department of the hospital(s) where patients are routinely transported and to facilities that provide on-line medical direction to EMS personnel;

- (D) is equipped with a radio control device in the patient compartment capable of operation by the patient attendant to receive on-line medical direction; and
  - (E) is licensed or authorized by the FCC;
  - (10) permanently installed heating and air conditioning systems; and
  - (11) a copy of the EMS System patient care treatment protocols.
- (c) A Medical Ambulance/Evacuation Bus shall not use a radiotelephone device such as a cellular telephone as the only source of two-way radio voice communication.
- (d) Communication instruments or devices such as data radio, facsimile, computer, or telemetry radio shall be in addition to the mission dedicated dispatch radio and shall function independently from the mission dedicated radio.
- (e) The EMS System medical director shall designate the combination of medical equipment as required in Subparagraph (b)(2) of this Rule that is carried on a mission based on anticipated patient care needs.
- (f) The ambulance permit for this vehicle shall remain in effect for two years unless any of the following occurs:
- (1) the Department imposes an administrative sanction which specifies permit expiration;
  - (2) the EMS Provider closes or goes out of business;
  - (3) the EMS Provider changes name or ownership; or
  - (4) failure to comply with the applicable Paragraphs of this Rule.

*History Note: Authority G.S. 131E-157(a); 143-508(d)(8); Eff. July 1, 2011; Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. February 2, 2016; Amended Eff. April 1, 2024.*

**10A NCAC 13P .0218 PEDIATRIC SPECIALTY CARE GROUND AMBULANCE: VEHICLE AND EQUIPMENT REQUIREMENTS**

- (a) A Pediatric Specialty Care Ground Ambulance is an ambulance used to transport only those patients 18 years old or younger with traumatic or medical conditions or for whom the need for specialty care or emergency or non-emergency medical care is anticipated during an inter-facility or discharged patient transport.
- (b) To be permitted as a Pediatric Specialty Care Ground Ambulance, a vehicle shall have:
- (1) a patient compartment that meets the following interior dimensions:
    - (A) the length, measured on the floor from the back of the driver's compartment, driver's seat or partition to the inside edge of the rear loading doors, is at least 102 inches; and
    - (B) the height is at least 48 inches over the patient area, measured from the center of the floor, exclusive of cabinets or equipment;

- (2) patient care equipment and supplies as defined in the "North Carolina College of Emergency Physicians: Standards for Medical Oversight and Data Collection." The equipment and supplies shall be clean, in working order, and secured in the vehicle;
- (3) one fire extinguisher mounted in a quick release bracket that is either a dry chemical or all-purpose type and has a pressure gauge;
- (4) the name of the EMS Provider permanently displayed on each side of the vehicle;
- (5) reflective tape affixed to the vehicle such that there is reflectivity on all sides of the vehicle;
- (6) emergency warning lights and audible warning devices mounted on the vehicle as required by G.S. 20-125. All warning devices shall function properly;
- (7) no structural or functional defects that may adversely affect the patient, the EMS personnel, or the safe operation of the vehicle;
- (8) an operational two-way radio that:
  - (A) is mounted to the ambulance and installed for safe operation and controlled by the ambulance driver;
  - (B) has the range, radio frequencies, and capabilities to establish and maintain two-way voice radio communication from within the defined service area of the EMS System to the emergency communications center or PSAP designated to direct or dispatch the deployment of the ambulance;
  - (C) is capable of establishing two-way voice radio communication from within the defined service area to the emergency department of the hospital(s) where patients are routinely transported and to facilities that provide on-line medical direction to EMS personnel;
  - (D) is equipped with a radio control device in the patient compartment capable of operation by the patient attendant to receive on-line medical direction; and
  - (E) is licensed or authorized by the FCC;
- (9) permanently installed heating and air conditioning systems; and
- (10) a copy of the EMS System patient care treatment protocols.

- (c) Pediatric Specialty Care Ground ambulances shall not use a radiotelephone device such as a cellular telephone as the only source of two-way radio voice communication.
- (d) Communication instruments or devices such as data radio, facsimile, computer, or telemetry radio shall be in addition to the mission dedicated dispatch radio and shall function independently from the mission dedicated radio.
- (e) The Specialty Care Transport Program medical director shall designate the combination of medical equipment as required in

Subparagraph (b)(2) of this Rule that is carried on a mission based on anticipated patient care needs.

(f) The ambulance permit for this vehicle shall remain in effect for two years unless any of the following occurs:

- (1) the Department imposes an administrative sanction which specifies permit expiration;
- (2) the EMS Provider closes or goes out of business;
- (3) the EMS Provider changes name or ownership; or
- (4) failure to comply with the applicable paragraphs of this Rule.

*History Note: Authority G.S. 131E-157(a); 143-508(d)(8); Eff. July 1, 2011;*  
*Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. February 2, 2016;*  
*Amended Eff. April 1, 2024.*

**10A NCAC 13P .0221 PATIENT TRANSPORTATION BETWEEN HOSPITALS**

(a) For the purpose of this Rule, hospital means those facilities as defined in Rule .0102 of this Subchapter.

(b) Every ground ambulance when transporting a patient between hospitals shall be occupied by all of the following:

- (1) one person who holds a credential issued by the OEMS as an emergency medical responder or higher who is responsible for the operation of the vehicle and rendering assistance to the patient caregiver when needed; and
- (2) at least one of the following individuals as determined by the transferring physician to manage the anticipated severity of injury or illness of the patient who is responsible for the medical aspects of the mission:
  - (A) emergency medical technician;
  - (B) advanced EMT;
  - (C) paramedic;
  - (D) nurse practitioner;
  - (E) physician;
  - (F) physician assistant;
  - (G) registered nurse; or
  - (H) respiratory therapist.

(c) Information shall be provided to the OEMS by the licensed EMS provider in the application:

- (1) describing the intended staffing pursuant to Rule .0204 of this Section; and
- (2) showing authorization pursuant to Rule .0204 of this Section by the county where the EMS provider license is issued to use the staffing in Paragraph (b) of this Rule.

(d) Ambulances used for patient transports between hospitals shall contain all medical equipment, supplies, and medications approved by the Medical Director, based upon the NCCEP treatment protocol guidelines. These protocol guidelines set forth in Rules .0405 and .0406 of this Subchapter are available online at no cost at <https://oems.nc.gov>.

*History Note: Authority G.S. 131E-155.1; 131E-158(b); 143-508(d)(1); 143-508(d)(8); Eff. July 1, 2012;*  
*Readopted Eff. January 1, 2017;*  
*Amended Eff. April 1, 2024; September 1, 2019.*

**10A NCAC 13P .0224 GROUND AMBULANCE VEHICLE MANUFACTURING STANDARDS**

(a) In addition to the terms defined in Rule .0102 of this Subchapter, the following definitions apply to this Rule:

- (1) "Remounted" means a ground ambulance patient compartment module that has been removed from its original chassis and mounted onto a different chassis.
- (2) "Refurbished" means upgrading or repairing an existing ground ambulance patient care module or chassis that may not involve replacement of the chassis.

(b) "Ground ambulances" as defined in Rule .0102 of this Subchapter manufactured after July 1, 2018, or remounted after July 1, 2025, that are based and operated in North Carolina shall meet one of the following manufacturing standards:

- (1) the Commission on Accreditation of Ambulance Services (CAAS) "Ground Vehicle Standard for Ambulances, which is incorporated herein by reference including all subsequent amendments and editions. This document is available online at no cost at [www.groundvehiclestandard.org](http://www.groundvehiclestandard.org); or
- (2) the National Fire Protection Association (NFPA) 1917-2016 "Standard for Automotive Ambulances," which is incorporated herein by reference including all subsequent amendments and editions. This document is available for purchase online at [www.nfpa.org](http://www.nfpa.org) for a cost of seventy-eight dollars (\$78.00).

(c) The following shall be exempt from the criteria set forth in Paragraph (b) of this Rule:

- (1) ambulances owned and operated by an agency of the United States government;
- (2) ambulances manufactured prior to July 1, 2018;
- (3) ambulances remounted prior to July 1, 2025;
- (4) "convalescent ambulances" as defined in Rule .0102 of this Subchapter;
- (5) refurbished ambulances; or
- (6) Medical Ambulance/Evacuation/Bus as set forth in Rule .0217 of this Section.

(d) Effective July 1, 2018, the National Highway Traffic Safety Administration (NHTSA) KKK-A-1822F- Ambulance Manufacturing Standard shall no longer meet the manufacturing standards for new ground ambulances as set forth in Paragraph (b) of the Rule.

(e) Ground ambulances that do not meet the criteria set forth in this Rule shall be ineligible for permitting as set forth in Rule .0211 of this Section.

*History Note: Authority G.S. 131E-156; 131E-157; 143-508(d)(8); Eff. January 1, 2018;*

*Amended Eff. April 1, 2024.*

**10A NCAC 13P .0301 SPECIALTY CARE TRANSPORT PROGRAM CRITERIA**

(a) EMS Providers seeking designation to provide specialty care transports shall submit an application for program approval to the OEMS at least 60 days prior to field implementation. The application shall document that the program has:

- (1) a defined service area that identifies the specific transferring and receiving facilities the program is intended to service;
- (2) written policies and procedures implemented for medical oversight meeting the requirements of Section .0400 of this Subchapter;
- (3) service available on a 24 hour a day, seven days a week basis;
- (4) the capability to provide the patient care skills and procedures as specified in "North Carolina College of Emergency Physicians: Standards for Medical Oversight and Data Collection;"
- (5) a written continuing education program for EMS personnel, under the direction of the Specialty Care Transport Program Continuing Education Coordinator, developed and modified based upon feedback from program data, review and evaluation of patient outcomes, and quality management review that follows the criteria set forth in Rule .0501 of this Subchapter;
- (6) a communication system that provides two-way voice communications for transmission of patient information to medical crew members anywhere in the service area of the program. The SCTP Medical Director shall verify that the communications system is satisfactory for on-line medical direction;
- (7) medical crew members that have completed training conducted every six months regarding:
  - (A) operation of the EMS communications system used in the program; and
  - (B) the medical and patient safety equipment specific to the program;
- (8) written operational protocols for the management of equipment, supplies, and medications. These protocols shall include:
  - (A) a Specialized Ambulance Protocol Summary document listing of all standard medical equipment, supplies, and medications, approved by the Medical Director as sufficient to manage the anticipated number and severity of injury or illness of the patients, for all vehicles and aircraft used in the program based on the treatment protocols and approved by the OEMS; and
  - (B) a methodology to ensure that each ground vehicle and aircraft contains

the required equipment, supplies, and medications on each response; and

- (9) written policies and procedures specifying how EMS Systems will dispatch and utilize the ground ambulances and aircraft operated by the program.
- (b) When transporting patients, staffing for the ground ambulance and aircraft used in the SCTP shall be approved by the SCTP Medical Director as medical crew members, using any of the following as determined by the transferring physician who is responsible for the medical aspects of the mission to manage the anticipated severity of injury or illness of the patient:
  - (1) paramedic;
  - (2) nurse practitioner;
  - (3) physician;
  - (4) physician assistant;
  - (5) registered nurse; or
  - (6) respiratory therapist.
- (c) SCTP as defined in Rule .0102 of this Subchapter are exempt from the staffing requirements defined in G.S. 131E-158(a).
- (d) SCTP approval is valid for six years. Programs shall apply to the OEMS for reapproval no more than 90 days prior to expiration.

*History Note: Authority G.S. 131E-155.1(b); 131E-158; 143-508; Temporary Adoption Eff. January 1, 2002; Eff. January 1, 2004; Amended Eff. January 1, 2004; Amended Eff. March 3, 2009 pursuant to E.O. 9, Beverly Perdue, March 3, 2009; Pursuant to G.S. 150B-21.3(c), a bill was not ratified by the General Assembly to disapprove this rule; Readopted Eff. January 1, 2017; Amended Eff. April 1, 2024; July 1, 2018.*

**10A NCAC 13P .0401 COMPONENTS OF MEDICAL OVERSIGHT FOR EMS SYSTEMS**

Each EMS System shall have the following components in place to assure medical oversight of the system:

- (1) a medical director for adult and pediatric patients appointed, either directly or by written delegation, by the county responsible for establishing the EMS System. Systems may elect to appoint one or more assistant medical directors. The medical director and assistant medical directors shall meet the criteria defined in the "North Carolina College of Emergency Physicians: Standards for Medical Oversight and Data Collection;"
- (2) written treatment protocols for adult and pediatric patients for use by EMS personnel;
- (3) for systems providing EMD service, an EMDPRS approved by the medical director;
- (4) an EMS Peer Review Committee; and
- (5) written procedures for use by EMS personnel to obtain on-line medical direction. On-line medical direction shall:

- (a) be restricted to medical orders that fall within the scope of practice of the EMS personnel and within the scope of approved system treatment protocols;
- (b) be provided only by a physician, EMS-NP, or EMS-PA. Only physicians may deviate from written treatment protocols; and
- (c) be provided by a system of two-way voice communication that can be maintained throughout the treatment and disposition of the patient.

*Amended Eff. January 1, 2009; January 1, 2004; Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. February 2, 2016; Amended Eff. April 1, 2024.*

**10A NCAC 13P .0403 RESPONSIBILITIES OF THE MEDICAL DIRECTOR FOR EMS SYSTEMS**

- (a) The Medical Director for an EMS System is responsible for the following:
- (1) ensuring that medical control as set forth in Rule .0401(5) of this Section is available 24 hours a day, seven days a week;
  - (2) the establishment, approval, and annual updating of adult and pediatric treatment protocols as set forth in Rule .0405 of this Section;
  - (3) EMD programs, the establishment, approval, and annual updating of the EMDPRS, including subsequent editions published by the EMDPRS program utilized by the EMS System;
  - (4) medical supervision of the selection, system orientation, continuing education and performance of all EMS personnel;
  - (5) medical supervision of a scope of practice performance evaluation for all EMS personnel in the system based on the treatment protocols for the system;
  - (6) the medical review of the care provided to patients;
  - (7) providing guidance regarding decisions about the equipment, medical supplies, and medications that will be carried on all ambulances and EMS nontransporting vehicles operating within the system;
  - (8) determining the combination and number of EMS personnel sufficient to manage the anticipated number and severity of injury or illness of the patients transported in Medical Ambulance/Evacuation Bus Vehicles defined in Rule .0219 of this Subchapter; and
  - (9) keeping the care provided up-to-date with current medical practice.

(b) Any tasks related to Paragraph (a) of this Rule may be completed, through the Medical Director's written delegation, by assisting physicians, physician assistants, nurse practitioners, registered nurses, EMDs, or paramedics.

The EMS System Medical Director may delegate physician medical oversight for a licensed EMS provider at the EMT level of service that does not back up the emergency 911 EMS System. Any decision delegating medical oversight for a licensed provider shall comply with the EMS System franchise requirements in Rule .0204 of this Subchapter. Medical oversight delegated for a licensed EMS provider shall meet the following requirements:

- (1) a medical director for adult and pediatric patients. The medical director and assistant medical directors shall meet the criteria defined in "The North Carolina College of Emergency Physicians: Standards for Medical Oversight and Collection;"

*History Note: Authority G.S. 143-508(b); 143-509(12); Temporary Adoption Eff. January 1, 2002; Eff. April 1, 2003; Amended Eff. January 1, 2009; January 1, 2004; Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. February 2, 2016; Amended Eff. April 1, 2024.*

**10A NCAC 13P .0402 COMPONENTS OF MEDICAL OVERSIGHT FOR SPECIALTY CARE TRANSPORT PROGRAMS**

Each Specialty Care Transport Program shall have the following components in place to assure Medical Oversight of the system:

- (1) a medical director. The administration of the SCTP shall appoint a medical director following the criteria for medical directors of Specialty Care Transport Programs as defined by the "North Carolina College of Emergency Physicians: Standards for Medical Oversight and Data Collection." The program administration may elect to appoint one or more assistant medical directors;
- (2) treatment protocols for adult and pediatric patients for use by medical crew members;
- (3) an EMS Peer Review Committee; and
- (4) a written protocol for use by medical crew members to obtain on-line medical direction. On-line medical direction shall:
  - (a) be restricted to medical orders that fall within the scope of practice of the medical crew members and within the scope of approved program treatment protocols;
  - (b) be provided only by a physician, EMS-NP, or EMS-PA. Only physicians may deviate from written treatment protocols; and
  - (c) be provided by a system of two-way voice communication that can be maintained throughout the treatment and disposition of the patient.

*History Note: Authority G.S. 143-508(b); 143-509(12); Temporary Adoption Eff. January 1, 2002; Eff. April 1, 2003;*

- (2) treatment protocols must be adopted in their original form from the standard adult and pediatric treatment protocols as defined in the "North Carolina College of Emergency Physicians: Standards for Medical Oversight and Data Collection;" and
- (3) establish an agency peer review committee that meets quarterly. The agency peer review committee minutes shall be reported to the EMS System peer review committee.

(c) The Medical Director may suspend temporarily, pending review, any EMS personnel from further participation in the EMS System when he or she determines that the individual's actions are detrimental to the care of the patient, the individual committed unprofessional conduct, or the individual failed to comply with credentialing requirements. During the review process, the Medical Director may:

- (1) restrict the EMS personnel's scope of practice pending completion of remediation on the identified deficiencies;
- (2) continue the suspension pending completion of remediation on the identified deficiencies; or
- (3) permanently revoke the EMS personnel's participation in the EMS System.

*History Note: Authority G.S. 143-508(b); 143-508(d)(3); 143-508(d)(7);  
Temporary Adoption Eff. January 1, 2002;  
Eff. April 1, 2003;  
Amended Eff. January 1, 2009; January 1, 2004;  
Readopted Eff. January 1, 2017;  
Amended Eff. April 1, 2024.*

**10A NCAC 13P .0404 RESPONSIBILITIES OF THE MEDICAL DIRECTOR FOR SPECIALTY CARE TRANSPORT PROGRAMS**

- (a) The medical director for a Specialty Care Transport Program is responsible for the following:
- (1) the establishment, approval, and updating of adult and pediatric treatment protocols as set forth in Rule .0406 of this Section;
  - (2) medical supervision of the selection, program orientation, continuing education, and performance of medical crew members;
  - (3) medical supervision of a scope of practice performance evaluation for all medical crew members in the program based on the treatment protocols for the program;
  - (4) the medical review of the care provided to patients;
  - (5) keeping the care provided up to date with current medical practice;
  - (6) approving the Specialized Ambulance Protocol Summary (SAPS) document listing of all medications, equipment, and supplies for all Specialty Care level ground vehicles and aircraft permitted by the OEMS; and
  - (7) in air medical programs, determination and specification of the medical equipment required

in Rule .0209 of this Subchapter that is carried on a mission based on anticipated patient care needs.

(b) Any tasks related to Paragraph (a) of this Rule may be completed, through written delegation, by assisting physicians, physician assistants, nurse practitioners, registered nurses, or medical crew members.

(c) The medical director may suspend temporarily, pending due process review, any medical crew members from further participation in the Specialty Care Transport Program when it is determined the activities or medical care rendered by such personnel may be detrimental to the care of the patient, constitute unprofessional conduct, or result in non-compliance with credentialing requirements. During the review process, the medical director may:

- (1) restrict the EMS personnel's scope of practice pending completion of remediation on the identified deficiencies;
- (2) continue the suspension pending completion of remediation on the identified deficiencies; or
- (3) permanently revoke the EMS personnel's participation in the Specialty Care Transport Program.

*History Note: Authority G.S. 143-508(b); 143-509(12);  
Temporary Adoption Eff. January 1, 2002;  
Eff. April 1, 2003;  
Amended Eff. January 1, 2009;  
Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. February 2, 2016;  
Amended Eff. April 1, 2024.*

**10A NCAC 13P .0407 REQUIREMENTS FOR EMERGENCY MEDICAL DISPATCH PRIORITY REFERENCE SYSTEM**

- (a) EMDPRS used by an EMD within an approved EMD program shall:
- (1) be approved by the OEMS Medical Director and meet or exceed the statewide standard for EMDPRS as defined by the "North Carolina College of Emergency Physicians: Standards for Medical Oversight and Data Collection;"
  - (2) not exceed the EMD scope of practice defined by the North Carolina Medical Board pursuant to G.S. 143-514;
  - (3) have a written plan how the agency is to maintain a current roster of EMD personnel in the OEMS credentialing and information database;
  - (4) have a written plan how the emergency medical dispatching agency applying the principles of EMD or offering EMD services, procedures, or program will comply with subsequent editions and compliance standards defined by the EMDPRS program and the EMS System; and
  - (5) participate and report compliance data at EMS System peer review meetings.
- (b) An EMDPRS developed locally shall be reviewed and updated annually and submitted to the OEMS Medical Director

for approval. Any change in the EMDPRS shall be submitted to the OEMS Medical Director for review and approval at least 30 days prior to the implementation of the change.

*History Note: Authority G.S. 143-508(b); 143-509(12); Temporary Adoption Eff. January 1, 2002; Eff. April 1, 2003; Amended Eff. January 1, 2004; Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. February 2, 2016; Amended Eff. April 1, 2024.*

**10A NCAC 13P .0410 COMPONENTS OF MEDICAL OVERSIGHT FOR AIR MEDICAL PROGRAMS**

(a) Licensed EMS providers seeking to offer rotary-wing or fixed-wing air medical program services within North Carolina shall receive approval from the OEMS prior to beginning operation.

(b) Licensed EMS providers seeking to offer multiple air medical programs under separate medical oversight processes as set forth in Paragraph (c) of this Rule shall make application for each program and receive approval from the OEMS as set forth in Paragraph (a) of this Rule.

(c) Each Air Medical Program providing services within North Carolina shall meet the following requirements for the provision of medical oversight:

- (1) a Medical Director as set forth in Rules .0402 and .0404 of this Section;
- (2) treatment protocols approved by the OEMS, to be utilized by the provider as required by Rule .0406 of this Section;
- (3) a peer review committee as required by Rule .0409 of this Section;
- (4) notify all North Carolina EMS Systems where services will be provided to enable each EMS System to include the provider in their EMS System plan, as set forth in Rule .0201 of this Subchapter;
- (5) all aircrafts used within North Carolina shall comply with Rule .0209 of this Subchapter;
- (6) populate and maintain a roster in the North Carolina database for all air medical crew members, Medical Directors, and staff identified by the program to serve as primary and secondary administrative contacts;
- (7) all medical crew members operating in North Carolina shall maintain a North Carolina license or credential in accordance with the rules and regulations of the respective state licensing or credentialing body;
- (8) active membership in each Trauma RAC containing the majority of hospitals where the program transports patients for admission;
- (9) submit patient care data electronically, within 24 hours, to the OEMS EMS care database as defined in the "North Carolina College of Emergency Physicians: Standards for Medical Oversight and Collection" for all interstate and

intrastate transports as set forth in Rule .0204 of this Subchapter;

- (10) provide information regarding procedures performed during transport within North Carolina to OEMS for quality management review as required by the "North Carolina College of Emergency Physicians: Standards for Medical Oversight and Data Collection;"
- (11) submit peer review materials to the receiving hospital's peer review committee for each patient transported for admission; and
- (12) a method providing for the coordinated dispatch of resources between air medical programs for scene safety, ensuring that only the number of air medical resources needed respond to the incident location are provided, and arranging for the receiving hospital to prepare for the incoming patient.

(d) In addition to the requirements set forth in Paragraph (c) of this Rule, Air Medical Program whose base of operation is outside of North Carolina who operate fixed-wing or rotary-wing air medical programs within the State shall meet the following requirements for the provision of medical oversight:

- (1) submit to the OEMS all existing treatment protocols utilized by the program in the state that it is based for comparison with North Carolina standards as set forth in the "North Carolina College of Emergency Physicians: Standards for Medical Oversight and Data Collection," and make any modifications identified by the OEMS to comply with the standards as set forth in Subparagraph (c)(2) of this Rule;
- (2) all aircrafts used within North Carolina shall comply with Rule .0209 of this Subchapter, inspections to be conducted at a location inside North Carolina at a time agreed upon by the Department and the Air Medical Program;
- (3) submit written notification to the Department within three business days of receiving notice of any arrests or regulatory investigations for the diversion of drugs or patient care issues involving a North Carolina credentialed or licensed medical crew member; and
- (4) any medical crew member suspended by the Department shall be barred from patient contact when operating in North Carolina until such time as the case involving the medical crew member has been adjudicated or resolved as set forth in Rule .1507 of this Subchapter;

(e) Significant failure to comply with the criteria set forth in this Rule shall result in revocation of the Air Medical Program as set forth in Rule .1503 of this Subchapter.

*History Note: Authority G.S. 131E-155.1; 131E-156; 131E-157(a); 131E-161; 143-508(d)(8); Eff. January 1, 2018; Amended Eff. April 1, 2024.*

**10A NCAC 13P .0502 INITIAL CREDENTIALING REQUIREMENTS FOR EMR, EMT, AEMT, PARAMEDIC, AND EMD**

(a) In order to be credentialed by the OEMS as an EMR, EMT, AEMT, or Paramedic, individuals shall:

- (1) Be at least 18 years of age. An examination may be taken at age 17; however, the EMS credential shall not be issued until the applicant has reached the age of 18.
- (2) Complete an approved educational program as set forth in Rule .0501 of this Section for their level of application.
- (3) Complete a scope of practice performance evaluation that uses performance measures based on the cognitive, psychomotor, and affective educational objectives set forth in Rule .0501 of this Section and that is consistent with their level of application, and approved by the OEMS. This scope of practice evaluation shall be completed no more than one year prior to examination. This evaluation shall be conducted by a Level I or Level II EMS Instructor credentialed at or above the level of application or under the direction of the primary credentialed EMS instructor or educational medical advisor for the approved educational program.
- (4) Within 90 days from their course graded date as reflected in the OEMS credentialing database, complete a written examination administered by the OEMS. If the applicant fails to register and complete a written examination within the 90-day period, the applicant shall obtain a letter of authorization to continue eligibility for testing from his or her EMS Educational Institution's program director to qualify for an extension of the 90-day requirement set forth in this Paragraph. If the EMS Educational Institution's program director declines to provide a letter of authorization, the applicant shall be disqualified from completing the credentialing process. Following a review of the applicant's specific circumstances, OEMS staff will determine, based on professional judgment, if the applicant qualifies for EMS credentialing eligibility. The OEMS shall notify the applicant in writing within 10 business days of the decision.

- (A) a maximum of three attempts within six months shall be allowed.
- (B) if unable to pass the written examination requirement after three attempts, the educational program shall become invalid and the individual may only become eligible for credentialing by repeating the requirements set forth in Rule .0501 of this Section.

- (5) Submit to a criminal background history check as set forth in Rule .0511 of this Section.
- (6) Submit evidence of completion of all court conditions resulting from any misdemeanor or felony conviction(s).

(b) An individual seeking credentialing as an EMR, EMT, AEMT, or Paramedic may qualify for initial credentialing under the legal recognition option set forth in G.S. 131E-159(c). Individuals seeking credentialing as an AEMT or Paramedic shall submit documentation that the credential being used for application is from an educational program meeting the requirements as set forth in Rule .0501 of this Section. Individuals applying to OEMS for legal recognition, who completed initial educational courses through an OEMS approved North Carolina educational institution, shall complete a written examination administered by the OEMS.

(c) In order to be credentialed by the OEMS as an EMD, individuals shall:

- (1) be at least 18 years of age;
- (2) complete the educational requirements set forth in Rule .0501 of this Section;
- (3) possess a valid CPR card;
- (4) submit to a criminal background history check as defined in Rule .0511 of this Section;
- (5) submit evidence of completion of all court conditions resulting from any misdemeanor or felony conviction(s); and
- (6) possess an EMD nationally recognized credential pursuant to G.S. 131E-159(d).

(d) Pursuant to G.S. 131E-159(h), the Department shall not issue an EMS credential for any person listed on the Department of Public Safety, Sex Offender and Public Protection Registry, or who was convicted of an offense that would have required registration if committed at a time when registration would have been required by law.

*History Note: Authority G.S. 131E-159(a); 131E-159(b); 131E-159(g); 131E-159(h); 143-508(d)(3); 143B-952; Temporary Adoption Eff. January 1, 2002; Eff. February 1, 2004; Amended Eff. January 1, 2009; Readopted Eff. January 1, 2017; Amended Eff. April 1, 2024; July 1, 2021.*

**10A NCAC 13P .0503 TERM OF CREDENTIALS FOR EMS PERSONNEL**

EMR, EMT, AEMT, Paramedic, and Instructor credentials shall be valid for a period of four years, and the EMD credential shall be valid for a period of two years, barring any delay in expiration as set forth in Rule .0504 of this Section.

*History Note: Authority G.S. 131E-159(a); Temporary Adoption Eff. January 1, 2002; Eff. April 1, 2003; Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. February 2, 2016; Amended Eff. April 1, 2024; January 1, 2017.*

**10A NCAC 13P .0512 REINSTATEMENT OF LAPSED EMS CREDENTIAL**

(a) EMS personnel enrolled in an OEMS approved continuing education program as set forth in Rule .0601 of this Subchapter and who were eligible for renewal of an EMS credential prior to expiration, may request the EMS educational institution submit documentation of the continuing education record to the OEMS. OEMS shall renew the EMS credential to be valid for four years from the previous expiration date.

(b) An individual with a lapsed North Carolina EMS credential is eligible for reinstatement through the legal recognition option defined in G.S. 131E-159(c) and Rule .0502 of this Section.

(c) EMR, EMT, AEMT, and Paramedic applicants for reinstatement of an EMS credential, lapsed up to 12 months, shall:

- (1) be ineligible for legal recognition pursuant to G.S. 131E-159(c);
- (2) be a resident of North Carolina or affiliated with a North Carolina EMS provider or employed with an alternative practice setting in compliance with Rule .0506 of this Section;
- (3) at the time of application, present evidence that renewal education requirements were met prior to expiration or complete a refresher course at the level of application taken following expiration of the credential;
- (4) complete an OEMS administered written examination for the individual's level of credential application;
- (5) undergo a criminal history check performed by the OEMS as defined in Rule .0511 of this Section; and
- (6) submit evidence of completion of all court conditions resulting from applicable misdemeanor or felony conviction(s).

(d) EMR, EMT, AEMT, and Paramedic applicants for reinstatement of an EMS credential, lapsed more than 12 months shall:

- (1) be ineligible for legal recognition pursuant to G.S. 131E-159(c);
- (2) be a resident of North Carolina, affiliated with a North Carolina EMS Provider, or employed with an alternative practice setting in compliance with Rule .0506 of this Section;
- (3) at the time of application, complete a refresher course at the level of application taken following expiration of the credential;
- (4) complete an OEMS administered written examination for the level of credential application;
- (5) undergo a criminal history check performed by the OEMS as defined in Rule .0511 of this Section; and
- (6) submit evidence of completion of all court conditions resulting from applicable misdemeanor or felony conviction(s).

(e) EMT, AEMT, and Paramedic applicants for reinstatement of an EMS Instructor Credential, lapsed up to 12 months, shall:

- (1) be ineligible for legal recognition pursuant to G.S. 131E-159(c);

- (2) be a resident of North Carolina or affiliated with a North Carolina EMS Provider; and
- (3) at the time of application, present evidence that renewal requirements were met prior to expiration or within six months following the expiration of the Instructor credential.

(f) EMT, AEMT, and Paramedic applicants for reinstatement of an EMS Instructor credential, lapsed greater than 12 months, shall:

- (1) be ineligible for legal recognition pursuant to G.S. 131E-159(c); and
- (2) meet the requirements for initial Instructor credentialing set forth in Rules .0507 and .0508 of this Section. Degree requirements that were not applicable to EMS Instructors initially credentialed prior to July 1, 2021 shall be required for reinstatement of a lapsed credential.

(g) EMD applicants shall renew a lapsed credential by meeting the requirements for initial credentialing set forth in Rule .0502 of this Section.

(h) Pursuant to G.S. 131E-159(h), the Department shall not issue or renew an EMS credential for any person listed on the Department of Public Safety, Sex Offender and Public Protection Registry, or who was convicted of an offense that would have required registration if committed at a time when registration would have been required by law.

*History Note: Authority G.S. 131E-159; 143-508(d)(3); 143B-952; Eff. January 1, 2017; Amended Eff. April 1, 2024; July 1, 2021.*

**10A NCAC 13P .0601 CONTINUING EDUCATION EMS EDUCATIONAL PROGRAM REQUIREMENTS**

(a) Continuing Education EMS Educational Programs shall be credentialed by the OEMS to provide only EMS continuing education. An application for credentialing as an approved EMS continuing education program shall be submitted to the OEMS for review.

(b) Continuing Education EMS Educational Programs shall have:

- (1) at least a Level I EMS Instructor as program coordinator and shall hold a Level I EMS Instructor credential at a level equal to or greater than the highest level of continuing education program offered in the EMS System, Specialty Care Transport Program, or Agency;
- (2) a continuing education program shall be consistent with the services offered by the EMS System, Specialty Care Transport Program, or Agency;
  - (A) In an EMS System, the continuing education programs shall be reviewed and approved by the system continuing education director and Medical Director;
  - (B) In a Specialty Care Transport Program, the continuing education program shall be reviewed and

approved by Specialty Care Transport Program Continuing Education director and the Medical Director; and

- (C) In an Agency not affiliated with an EMS System or Specialty Care Transport Program, the continuing education program shall be reviewed and approved by the Agency Program Medical Director;

- (3) written educational policies and procedures to include each of the following;

- (A) the delivery of educational programs in a manner where the content and material is delivered to the intended audience, with a limited potential for exploitation of such content and material;
- (B) the record-keeping system of student attendance and performance;
- (C) the selection and monitoring of EMS instructors; and
- (D) student evaluations of faculty and the program's courses or components, and the frequency of the evaluations;

- (4) access to instructional supplies and equipment necessary for students to complete educational programs as defined in Rule .0501 of this Subchapter;

- (5) meet the educational program requirements as defined in Rule .0501 of this Subchapter;

- (6) Upon request, the approved EMS continuing education program shall provide records to the OEMS in order to verify compliance and student eligibility for credentialing; and

- (7) approved education program credentials are valid for a period not to exceed four years.

(c) Program directors shall attend an OEMS Program Coordinator workshop annually. A listing of scheduled OEMS Program Director Workshops is available at <https://emspic.org>. Newly appointed program directors who have not attended an OEMS Program Director Workshop within the past year shall attend a workshop within one year of appointment as the program director.

(d) Assisting physicians delegated by the EMS System Medical Director as authorized by Rule .0403 of this Subchapter or SCTP Medical Director as authorized by Rule .0404 of this Subchapter for provision of medical oversight of continuing education programs shall meet the Education Medical Advisor criteria as defined in the "North Carolina College of Emergency Physicians: Standards for Medical Oversight."

*History Note: Authority G.S. 143-508(d)(4); 143-508(d)(13); Temporary Adoption Eff. January 1, 2002; Eff. January 1, 2004; Amended Eff. January 1, 2009; Readopted Eff. January 1, 2017; Amended Eff. April 1, 2024; July 1, 2021.*

**10A NCAC 13P .0602 BASIC AND ADVANCED EMS EDUCATIONAL INSTITUTION REQUIREMENTS**

(a) Basic and Advanced EMS Educational Institutions may offer educational programs for which they have been credentialed by the OEMS.

- (1) EMS Educational Institutions shall complete a minimum of two initial courses at the highest level educational program approved for the Educational Institution's credential approval period.

- (2) EMS Educational Institutions that do not complete two initial courses for each educational program approved shall be subject to action as set forth in Rule .1505 of this Subchapter.

(b) For initial courses, Basic EMS Educational Institutions shall meet all of the requirements for continuing EMS educational programs defined in Rule .0601 of this Section and shall have:

- (1) a Level I or higher EMS Instructor as each lead course instructor for all courses. The lead course instructor must be credentialed at a level equal to or higher than the course and shall meet the lead instructor responsibilities of the CAAHEP Standards and Guidelines for the Accreditation of Educational Programs in the Emergency Medical Services Professions as set forth in Rule .0501 of this Subchapter. The lead instructor shall:
  - (A) perform duties assigned under the direction and delegation of the program director.
  - (B) assist in coordination of the didactic, lab, clinical, and field internship instruction.

- (2) a lead EMS educational program director. This individual shall be a Level II EMS Instructor credentialed at or above the highest level of course offered by the institution. Newly appointed program directors who have not attended an OEMS Program Coordinator Workshop with the past year shall attend a workshop within one year of appointment as the program director; and:
  - (A) have EMS or related allied health education, training, and experience;
  - (B) be knowledgeable about methods of instruction, testing, and evaluation of students;
  - (C) have field experience in the delivery of pre-hospital emergency care;
  - (D) have academic training and preparation related to emergency medical services, at least equivalent to that of a paramedic; and
  - (E) be knowledgeable of current versions of the National EMS Scope of Practice and National EMS Education Standards as defined by USDOT NHTSA National EMS, evidence-

- informed clinical practice, and incorporated by Rule .0501 of this Subchapter;
- (3) a lead EMS educational program director responsible for the following:
    - (A) the administrative oversight, organization, and supervision of the program;
    - (B) the continuous quality review and improvement of the program;
    - (C) the long-range planning on ongoing development of the program;
    - (D) evaluating the effectiveness of the instruction, faculty, and overall program;
    - (E) the collaborative involvement with the Education Medical Advisor;
    - (F) the training and supervision of clinical and field internship preceptors; and
    - (G) the effectiveness and quality of fulfillment of responsibilities delegated to another qualified individual;
  - (4) written educational policies and procedures that include:
    - (A) the written educational policies and procedures set forth in Rule .0601 of this Section;
    - (B) the delivery of cognitive and psychomotor examinations in a manner that will protect and limit the potential for exploitation of such content and material;
    - (C) the exam item validation process utilized for the development of validated cognitive examinations;
    - (D) the selection and monitoring of all in-state and out-of-state clinical education and field internship sites;
    - (E) the selection and monitoring of all educational institutionally approved clinical education and field internship preceptors;
    - (F) utilization of EMS preceptors providing feedback to the student and EMS program;
    - (G) the evaluation of preceptors by their students, including the frequency of evaluations;
    - (H) the evaluation of the clinical education and field internship sites by their students, including the frequency of evaluations;
    - (I) completion of an annual evaluation of the program to identify any correctable deficiencies;
    - (J) the program annually assesses goals and learning domains that include how program staff identify and respond to changes in the needs or expectations of the community's interests; and
  - (K) an advisory committee representing all practice settings utilizing EMS personnel, including clinical preceptor sites, shall assist the program to monitor community needs and expectations and provide guidance to revise goals and responsiveness to change. The advisory committee shall meet no less than annually.
- (5) an Educational Medical Advisor that meets the criteria as defined in the "North Carolina College of Emergency Physicians: Standards for Medical Oversight and Data Collection" who is responsible for the following:
    - (A) medical oversight of the program;
    - (B) collaboration to provide appropriate and updated educational content for the program curriculum;
    - (C) establishing minimum requirements for program completion;
    - (D) oversight of student evaluation, monitoring, and remediation as needed;
    - (E) ensuring entry level competence;
    - (F) ensuring interaction of physician and students; and
  - (6) written educational policies and procedures describing the delivery of educational programs, the record-keeping system detailing student attendance and performance, and the selection and monitoring of EMS instructors.
    - (c) For initial courses, Advanced Educational Institutions shall meet all requirements set forth in Paragraph (b) of this Rule, Standard III of the CAAHEP Standards and Guidelines for the Accreditation of Educational Programs in the Emergency Medical Services Professions shall apply, and;
      - (1) The faculty must be knowledgeable in course content and effective in teaching their assigned subjects, and capable through academic preparation, training, and experience to teach the courses or topics to which they are assigned.
      - (2) A faculty member to assist in teaching and clinical coordination in addition to the program coordinator.
    - (d) The educational institution shall notify the OEMS within 10 business days of a change to the program director or Medical Advisor position. The educational institution shall submit the change to the OEMS as an addendum to the approved Educational Institution application within 30 days of the effective date of the position change.
    - (e) Basic and Advanced EMS Educational Institution credentials shall be valid for a period of four years, unless the institution is accredited in accordance with Rule .0605 of this Section.

*History Note: Authority G.S. 143-508(d)(4); 143-508(d)(13); Temporary Adoption Eff. January 1, 2002; Eff. January 1, 2004;*

*Amended Eff. January 1, 2009;*  
*Readopted Eff. January 1, 2017;*  
*Amended Eff. April 1, 2024; July 1, 2021.*

**10A NCAC 13P .0904 INITIAL DESIGNATION PROCESS**

(a) For initial Trauma Center designation or changing the level of Trauma Center designation, the hospital shall request a consult visit by OEMS and the consult shall occur within one year prior to submission of the RFP.

(b) A hospital interested in pursuing Trauma Center designation shall submit a letter of intent 180 days prior to the submission of an RFP to the OEMS. The letter shall define the hospital's primary trauma catchment area. Simultaneously, Level I or II applicants shall also demonstrate the need for the Trauma Center designation by submitting one original and three copies of documents that include:

- (1) the population to be served and the extent that the population is underserved for trauma care with the methodology used to reach this conclusion;
- (2) geographic considerations, to include trauma primary and secondary catchment area and distance from other Trauma Centers; and
- (3) evidence the Trauma Center will admit 1200 or more trauma patients annually or show that its trauma service will be taking care of at least 240 trauma patients with an ISS greater than or equal to 15 yearly. These criteria shall be met without compromising the quality of care or cost effectiveness of any other designated Level I or II Trauma Center sharing all or part of its catchment area or by jeopardizing the existing Trauma Center's ability to meet this same 240-patient minimum.

(c) The hospital shall be participating in the State Trauma Registry as defined in Rule .0102 of this Subchapter, and submit data weekly to the OEMS of 12 months or more prior to application that includes all the Trauma Center's trauma patients as defined in Rule .0102 of this Subchapter who are:

- (1) diverted to an affiliated hospital;
- (2) admitted to the Trauma Center for greater than 24 hours from an ED or hospital;
- (3) die in the ED;
- (4) are DOA; or
- (5) are transferred from the ED to the OR, ICU, or another hospital (including transfer to any affiliated hospital).

(d) OEMS shall review the regional Trauma Registry data from both the applicant and the existing trauma center(s), and ascertain the applicant's ability to satisfy the justification of need information required in Paragraph (b) of this Rule. The OEMS shall notify the applicant's primary RAC of the application and provide the regional data submitted by the applicant in Paragraph (b) of this Rule for review and comment. The RAC shall be given 30 days to submit written comments to the OEMS.

(e) OEMS shall notify the respective Board of County Commissioners in the applicant's primary catchment area of the

request for initial designation to allow for comment during the same 30 day comment period.

(f) OEMS shall notify the hospital in writing of its decision to allow submission of an RFP. If approved, the RAC and Board of County Commissioners in the applicant's primary catchment area shall also be notified by the OEMS that an RFP will be submitted.

(g) Once the hospital is notified that an RFP will be accepted, the hospital shall complete and submit an electronic copy of the completed RFP with signatures to the OEMS no later than 45 days prior to the proposed site visit date.

(h) The RFP shall demonstrate that the hospital meets the standards for the designation level applied for as found in Rule .0901 of this Section.

(i) If OEMS does not recommend a site visit based upon failure to comply with Rule .0901 of this Section, the OEMS shall send the written reasons to the hospital within 30 days of the decision. The hospital may reapply for designation within six months following the submission of an updated RFP. If the hospital fails to respond within six months, the hospital shall reapply following the process outlined in Paragraphs (a) through (h) of this Rule.

(j) If after review of the RFP, the OEMS recommends the hospital for a site visit, the OEMS shall notify the hospital within 30 days. The hospital and the OEMS shall agree on the date of the site visit.

(k) Except for OEMS representatives, reviewers for a Level I or II visit shall be from outside the local or adjacent RAC, unless mutually agreed upon by the OEMS and the trauma center seeking designation where the hospital is located. The composition of a Level I or II site survey team shall be as follows:

- (1) one trauma surgeon who is a Fellow of the ACS, experienced as a site surveyor, who shall be the primary reviewer;
- (2) one emergency physician who currently works in a designated trauma center, is a member of the American College of Emergency Physicians or American Academy of Emergency Medicine, and is boarded in emergency medicine by the American Board of Emergency Medicine or the American Osteopathic Board of Emergency Medicine;
- (3) one trauma surgeon;
- (4) one trauma program manager; and
- (5) OEMS Staff.

(l) All site team members for a Level III visit except for the OEMS representatives, shall be from outside the local or adjacent RAC where the hospital is located. The composition of a Level III state site survey team shall be as follows:

- (1) one trauma surgeon who is a Fellow of the ACS and shall be the primary reviewer;
- (2) one emergency physician who currently works in a designated trauma center and is boarded in emergency medicine by the American Board of Emergency Medicine or the American Osteopathic Board of Emergency Medicine;
- (3) one trauma program manager; and
- (4) OEMS Staff.

(m) The hospital shall make available all requested patient medical charts.

(n) The primary reviewer of the site review team shall give a verbal post-conference report representing a consensus of the site

review team. The primary reviewer shall complete and submit to the OEMS a written consensus report within 30 days of the site visit.

(o) The report of the site survey team and the staff recommendations shall be reviewed by the State Emergency Medical Services Advisory Council at its next regularly scheduled meeting following the site visit. Based upon the site visit report and the staff recommendation, the State Emergency Medical Services Advisory Council shall recommend to the OEMS that the request for Trauma Center designation be approved or denied.

(p) All criteria defined in Rule .0901 of this Section shall be met for initial designation at the level requested.

(q) Hospitals with a deficiency(ies) resulting from the site visit shall be given up to 12 months to demonstrate compliance. Satisfaction of deficiency(ies) may require an additional site visit. The need for an additional site visit shall be determined on a case-by-case basis based on the type of deficiency. If compliance is not demonstrated within the time period set by OEMS, the hospital shall submit a new application and updated RFP and follow the process outlined in Paragraphs (a) through (h) of this Rule.

(r) The final decision regarding Trauma Center designation shall be rendered by the OEMS.

(s) The OEMS shall notify the hospital in writing of the State Emergency Medical Services Advisory Council's and OEMS' final recommendation within 30 days of the Advisory Council meeting.

(t) If a trauma center changes its trauma program administrative structure such that the trauma service, trauma Medical Director, trauma program manager, or trauma registrar are relocated on the hospital's organizational chart at any time, it shall notify OEMS of this change in writing within 30 days of the occurrence.

(u) Initial designation as a trauma center shall be valid for a period of three years.

*History Note: Authority G.S. 131E-162; 143-508(d)(2); Temporary Adoption Eff. January 1, 2002; Eff. April 1, 2003; Amended Eff. January 1, 2009; Readopted Eff. January 1, 2017; Amended Eff. April 1, 2024; July 1, 2018.*

**10A NCAC 13P .0905 RENEWAL DESIGNATION PROCESS**

(a) Hospitals may utilize one of two options to achieve Trauma Center renewal:

- (1) undergo a site visit conducted by OEMS to obtain a four-year renewal designation; or
- (2) undergo a verification visit by the ACS, in conjunction with the OEMS, to obtain a three-year renewal designation.

(b) For hospitals choosing Subparagraph (a)(1) of this Rule:

- (1) prior to the end of the designation period, the OEMS shall forward to the hospital an RFP for completion. The hospital shall, within 10 business days of receipt of the RFP, define for OEMS the Trauma Center's trauma primary catchment area.
- (2) hospitals shall complete and submit an electronic copy of the RFP to the OEMS and the

specified site surveyors at least 30 days prior to the site visit. The RFP shall include information that supports compliance with the criteria contained in Rule .0901 of this Section as it relates to the Trauma Center's level of designation.

(3) all criteria defined in Rule .0901 of this Section, as it relates to the Trauma Center's level of designation, shall be met for renewal designation.

(4) a site visit shall be conducted within 120 days prior to the end of the designation period. The hospital and the OEMS shall agree on the date of the site visit.

(5) the composition of a Level I or II site survey team shall be the same as that specified in Rule .0904 of this Section.

(6) the composition of a Level III site survey team shall be the same as that specified in Rule .0904 of this Section.

(7) on the day of the site visit, the hospital shall make available all requested patient medical charts.

(8) the primary reviewer of the site review team shall give a verbal post-conference report representing a consensus of the site review team. The primary reviewer shall complete and submit to the OEMS a written consensus report within 30 days of the site visit.

(9) the report of the site survey team and a staff recommendation shall be reviewed by the NC Emergency Medical Services Advisory Council at its next regularly scheduled meeting following the site visit. Based upon the site visit report and the staff recommendation, the NC Emergency Medical Services Advisory Council shall recommend to the OEMS that the request for Trauma Center renewal be:

- (A) approved;
- (B) approved with a contingency(ies) due to a deficiency(ies) requiring a focused review;
- (C) approved with a contingency(ies) not due to a deficiency(ies) requiring a consultative visit; or
- (D) denied.

(10) hospitals with a deficiency(ies) shall have up to 10 business days prior to the NC Emergency Medical Services Advisory Council meeting to provide documentation to demonstrate compliance. If the hospital has a deficiency that cannot be corrected in this period prior to the NC Emergency Medical Services Advisory Council meeting, the hospital shall be given 12 months by the OEMS to demonstrate compliance and undergo a focused review that may require an additional site visit. The need for an additional site visit is on a case-by-case basis based on the type of deficiency. The

hospital shall retain its Trauma Center designation during the focused review period. If compliance is demonstrated within the prescribed time period, the hospital shall be granted its designation for the four-year period from the previous designation's expiration date. If compliance is not demonstrated within the 12 month time period, the Trauma Center designation shall not be renewed. To become redesignated, the hospital shall submit an updated RFP and follow the initial applicant process outlined in Rule .0904 of this Section.

- (11) the final decision regarding trauma center renewal shall be rendered by the OEMS.
  - (12) the OEMS shall notify the hospital in writing of the NC Emergency Medical Services Advisory Council's and OEMS' final recommendation within 30 days of the NC Emergency Medical Services Advisory Council meeting.
  - (13) hospitals with a deficiency(ies) shall submit an action plan to the OEMS to address the deficiency(ies) within 10 business days following receipt of the written final decision on the trauma recommendations.
- (c) For hospitals choosing Subparagraph (a)(2) of this Rule:
- (1) at least six months prior to the end of the Trauma Center's designation period, the trauma center shall notify the OEMS of its intent to undergo an ACS verification visit. It shall simultaneously define in writing to the OEMS its trauma primary catchment area. Trauma Centers choosing this option shall then comply with all the ACS' verification procedures, as well as any additional state criteria as defined in Rule .0901 of this Section, that apply to their level of designation.
  - (2) when completing the ACS' documentation for verification, the Trauma Center shall ensure access to the ACS on-line PRQ (pre-review questionnaire) to OEMS. The Trauma Center shall simultaneously complete any documents supplied by OEMS and forward these to the OEMS.
  - (3) the Trauma Center shall make sure the site visit is scheduled to ensure that the ACS' final written report, accompanying medical record reviews and cover letter are received by OEMS at least 30 days prior to a regularly scheduled NC Emergency Medical Services Advisory Council meeting to ensure that the Trauma Center's state designation period does not terminate without consideration by the NC Emergency Medical Services Advisory Council.
  - (4) any in-state review for a hospital choosing Subparagraph (a)(2) of this Rule, except for the OEMS staff, shall be from outside the local or adjacent RAC in which the hospital is located.

- (5) the composition of a Level I, II, or III site survey team for hospitals choosing Subparagraph (a)(2) of this Rule shall be as follows:
  - (A) one trauma surgeon who is a Fellow of the ACS, experienced as a site surveyor, who shall be the primary reviewer;
  - (B) one emergency physician who works in a designated trauma center, is a member of the American College of Emergency Physicians or the American Academy of Emergency Medicine, and is boarded in emergency medicine by the American Board of Emergency Physicians or the American Osteopathic Board of Emergency Medicine;
  - (C) one trauma program manager; and
  - (D) OEMS staff.
- (6) the date, time, and all proposed members of the site visit team shall be submitted to the OEMS for review at least 45 days prior to the site visit. The OEMS shall approve the site visit schedule if the schedule does not conflict with the ability of attendance by required OEMS staff. The OEMS shall approve the proposed site visit team members if the OEMS determines there is no conflict of interest, such as previous employment, by any site visit team member associated with the site visit.
- (7) all state Trauma Center criteria shall be met as defined in Rule .0901 of this Section for renewal of state designation. ACS' verification is not required for state designation. ACS' verification does not ensure a state designation.
- (8) The ACS final written report and supporting documentation described in Subparagraph (c)(4) of this Rule shall be used to generate a report following the post conference meeting for presentation to the NC Emergency Medical Services Advisory Council for renewal designation.
- (9) the final written report issued by the ACS' verification review committee, the accompanying medical record reviews from which all identifiers shall be removed and cover letter shall be forwarded to OEMS within 10 business days of its receipt by the Trauma Center seeking renewal.
- (10) the OEMS shall present its summary of findings report to the NC Emergency Medical Services Advisory Council at its next regularly scheduled meeting. The NC Emergency Medical Services Advisory Council shall recommend to the Chief of the OEMS that the request for Trauma Center renewal be:
  - (A) approved;

- (B) approved with a contingency(ies) due to a deficiency(ies) requiring a focused review;
  - (C) approved with a contingency(ies) not due to a deficiency(ies); or
  - (D) denied.
- (11) the OEMS shall send the hospital written notice of the NC Emergency Medical Services Advisory Council's and OEMS' final recommendation within 30 days of the NC Emergency Medical Services Advisory Council meeting.
- (12) the final decision regarding trauma center designation shall be rendered by the OEMS.
- (13) hospitals with contingencies as the result of a deficiency(ies), as determined by OEMS, shall have up to 10 business days prior to the NC Emergency Medical Services Advisory Council meeting to provide documentation to demonstrate compliance. If the hospital has a deficiency that cannot be corrected in this time period, the hospital, may undergo a focused review to be conducted by the OEMS whereby the Trauma Center shall be given 12 months by the OEMS to demonstrate compliance. Satisfaction of contingency(ies) may require an additional site visit. The need for an additional site visit is on a case-by-case basis based on the type of deficiency. The hospital shall retain its Trauma Center designation during the focused review period. If compliance is demonstrated within the prescribed time period, the hospital shall be granted its designation for the three-year period from the previous designation's expiration date. If compliance is not demonstrated within the 12 month time period, the Trauma Center designation shall not be renewed. To become redesignated, the hospital shall submit a new RFP and follow the initial applicant process outlined in Rule .0904 of this Section.
- (14) hospitals with a deficiency(ies) shall submit an action plan to the OEMS to address the deficiency(ies) within 10 business days following receipt of the written final decision on the trauma recommendations.

(d) If a Trauma Center currently using the ACS' verification process chooses not to renew using this process, it must notify the OEMS at least six months prior to the end of its state trauma center designation period of its intention to exercise the option in Subparagraph (a)(1) of this Rule. Upon notification, the OEMS shall extend the designation for one additional year to ensure consistency with hospitals using Subparagraph (a)(1) of this Rule.

*History Note: Authority G.S. 131E-162; 143-508(d)(2); Temporary Adoption Eff. January 1, 2002; Eff. April 1, 2003; Amended Eff. April 1, 2009; January 1, 2009; January 1, 2004; Readoption Eff. January 1, 2017;*

*Amended Eff. April 1, 2024; July 1, 2021.*

**10A NCAC 13P .1505 EMS EDUCATIONAL INSTITUTIONS**

(a) For the purpose of this Rule, "focused review" means an evaluation by the OEMS of an educational institution's corrective actions to remove contingencies that are a result of deficiencies identified in the initial or renewal application process.

(b) The Department shall deny the initial or renewal designation, without first allowing a focused review, of an EMS Educational Institution. An Educational Institution denied initial designation shall not be eligible to reapply to the OEMS for two years.

Reasons for denial are:

- (1) significant failure to comply with the provisions of Sections .0500 and .0600 of this Subchapter; or
- (2) attempting to obtain an EMS Educational Institution designation through fraud or misrepresentation.

(c) When an EMS Educational Institution is required to have a focused review, it shall demonstrate compliance with the provisions of Sections .0500 and .0600 of this Subchapter within six months or less.

(d) The Department shall amend, suspend, or revoke an EMS Educational Institution designation at any time whenever the Department finds that the EMS Educational Institution has significant failure to comply, as defined in Rule .0102 of this Subchapter, with the provisions of Section .0600 of this Subchapter, and:

- (1) it is not probable that the EMS Educational Institution can remedy the deficiencies within six months or less as determined by OEMS staff based upon analysis of the educational institution's ability to take corrective measures to resolve the issue of non-compliance with Section .0600 of this Subchapter;
- (2) although the EMS Educational Institution may be able to remedy the deficiencies, it is not probable that the EMS Educational Institution shall be able to remain in compliance with credentialing rules;
- (3) failure to produce records upon request as required in Rule .0601 of this Subchapter;
- (4) the EMS Educational Institution failed to meet the requirements of a focused review within six months, as set forth in Paragraph (c) of this Rule;
- (5) the failure to comply endangered the health, safety, or welfare of patients cared for as part of an EMS educational program as determined by OEMS staff in their professional judgment based upon a complaint investigation, in consultation with the Department and Department of Justice, to verify the results of the investigations are sufficient to initiate enforcement action pursuant to G.S. 150B; or
- (6) the EMS Educational Institution altered, destroyed, or attempted to destroy evidence needed for a complaint investigation.

(e) The Department shall give the EMS Educational Institution written notice of action taken on the Institution designation. This notice shall be given personally or by certified mail and shall set forth:

- (1) the factual allegations;
- (2) the statutes or rules alleged to be violated; and
- (3) notice of the EMS Educational Institution's right to a contested case hearing, set forth in Rule .1509 of this Section, on the revocation of the designation.

(f) Focused review is not a procedural prerequisite to the revocation of a designation as set forth in Rule .1509 of this Section.

(g) If determined by the educational institution that suspending its approval to offer EMS educational programs is necessary, the EMS Educational Institution may voluntarily surrender its credential without explanation by submitting a written request to the OEMS stating its intention. The voluntary surrender shall not affect the original expiration date of the EMS Educational Institution's designation. To reactivate the designation:

- (1) the institution shall provide OEMS written documentation requesting reactivation; and
- (2) the OEMS shall verify the educational institution is compliant with all credentialing requirements set forth in Section .0600 of this Subchapter prior to reactivation of the designation by the OEMS.

(h) If the institution fails to resolve the issues that resulted in a voluntary surrender, the Department shall revoke the EMS Educational Institution designation.

(i) In the event of a revocation or voluntary surrender, the Department shall provide written notification to all EMS Systems within the EMS Educational Institution's defined service area. The Department shall provide written notification to all EMS Systems within the EMS Educational Institution's defined service area when the voluntary surrender reactivates to full credential.

(j) When an accredited EMS Educational Institution as defined in Rule .0605 of this Subchapter has administrative action taken against its accreditation, the OEMS shall determine if the cause of action is sufficient for revocation of the EMS Educational Institution designation or imposing a focused review pursuant to Paragraphs (b) and (c) of this Rule is warranted.

*History Note: Authority G.S. 143-508(d)(4); 143-508(d)(10); Eff. January 1, 2013;*

*Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. February 2, 2016;*

*Amended Eff. April 1, 2024; July 1, 2021; July 1, 2018; January 1, 2017.*

**10A NCAC 13P .1507 EMS PERSONNEL CREDENTIALS**

(a) Any EMS credential that has been forfeited under G.S. 15A-1331.1 may not be reinstated until the person has complied with the court's requirements, has petitioned the Department for reinstatement, has completed the disciplinary process, and has received Department reinstatement approval.

(b) The Department shall amend, deny, suspend, or revoke the credentials of EMS personnel for any of the following:

- (1) significant failure to comply with the applicable performance and credentialing requirements as found in this Subchapter;
- (2) making false statements or representations to the Department, or concealing information in connection with an application for credentials;
- (3) making false statements or representations, concealing information, or failing to respond to inquiries from the Department during a complaint investigation;
- (4) tampering with, or falsifying any record used in the process of obtaining an initial EMS credential, or in the renewal of an EMS credential;
- (5) in any manner or using any medium, engaging in the stealing, manipulating, copying, reproducing, or reconstructing of any written EMS credentialing examination questions, or scenarios;
- (6) cheating, or assisting others to cheat while preparing to take, or when taking a written EMS credentialing examination;
- (7) altering an EMS credential, using an EMS credential that has been altered, or permitting or allowing another person to use his or her EMS credential for the purpose of alteration. "Altering" includes changing the name, expiration date, or any other information appearing on the EMS credential;
- (8) unprofessional conduct, including a significant failure to comply with the rules relating to the function of credentialed EMS personnel contained in this Subchapter, or the performance of or attempt to perform a procedure that is detrimental to the health and safety of any person, or that is beyond the scope of practice of credentialed EMS personnel or EMS instructors;
- (9) being unable to perform as credentialed EMS personnel with reasonable skill and safety to patients and the public by reason of illness that will compromise skill and safety, use of alcohol, drugs, chemicals, or any other type of material, or by reason of any physical impairment;
- (10) conviction in any court of a crime involving moral turpitude, a conviction of a felony, a conviction requiring registering on a sex offender registry, or conviction of a crime involving the scope of practice of credentialed EMS personnel;
- (11) by theft or false representations, obtaining or attempting to obtain, money or anything of value from a patient, EMS Agency, or educational institution;
- (12) adjudication of mental incompetence;
- (13) lack of competence to practice with a reasonable degree of skill and safety for patients, including a failure to perform a

- (14) prescribed procedure, failure to perform a prescribed procedure competently, or performance of a procedure that is not within the scope of practice of credentialed EMS personnel or EMS instructors;
  - (15) performing as a credentialed EMS personnel in any EMS System in which the individual is not affiliated and authorized to function;
  - (16) performing or authorizing the performance of procedures, or administration of medications detrimental to a student or individual;
  - (17) delay or failure to respond when on-duty and dispatched to a call for EMS assistance;
  - (18) testing positive, whether for-cause or at random, through urine, blood, or breath sampling, for any substance, legal or illegal, that is likely to impair the physical or psychological ability of the credentialed EMS personnel to perform all required or expected functions while on duty;
  - (19) failure to comply with G.S. 143-518 regarding the use or disclosure of records or data associated with EMS Systems, Specialty Care Transport Programs, Alternative Practice Settings, or patients;
  - (20) refusing to consent to any criminal history check required by G.S. 131E-159;
  - (21) abandoning or neglecting a patient who is in need of care, without making arrangements for the continuation of such care;
  - (22) falsifying a patient's record or any controlled substance records;
  - (23) harassing, abusing, or intimidating a patient, EMS personnel, other allied healthcare personnel, student, educational institution staff, members of the public, or OEMS staff, either physically, verbally, or in writing;
  - (24) engaging in any activities of a sexual nature with a patient, including kissing, fondling, or touching while responsible for the care of that individual;
  - (25) any criminal arrests that involve charges that have been determined by the Department to indicate a necessity to seek action in order to further protect the public pending adjudication by a court;
  - (26) altering, destroying, or attempting to destroy evidence needed for a complaint investigation being conducted by the OEMS;
  - (27) significant failure to comply with a condition to the issuance of an encumbered EMS credential with limited and restricted practices for persons in the chemical addiction or abuse treatment program;
  - (28) unauthorized possession of lethal or non-lethal weapons, chemical irritants to include mace, pepper (oleoresin capsicum) spray and tear gas, or explosives while in the performance of providing emergency medical services;
  - (29) significant failure to comply to provide EMS care records to the licensed EMS provider for submission to the OEMS as required by Rule .0204 of this Subchapter;
  - (30) continuing to provide EMS care after local suspension of practice privileges by the local EMS System, Medical Director, or Alternative Practice Setting;
  - (31) representing or allowing others to represent that the credentialed EMS personnel has a credential that the credentialed EMS personnel does not in fact have;
  - (32) diversion of any medication requiring medical oversight for credentialed EMS personnel;
  - (33) filing a knowingly false complaint against an individual, EMS Agency, or educational institution; or
  - (34) failure to comply with educational requirements defined in Sections .0500 and .0600 of this Subchapter.
- (c) Pursuant to the provisions of G.S. 131E-159(h), the OEMS shall not issue an EMS credential for any person listed on the North Carolina Department of Public Safety, Sex Offender and Public Protection Registry, or who was convicted of an offense that would have required registration if committed at a time when the registration would have been required by law.
- (d) Pursuant to the provisions of G.S. 50-13.12, upon notification by the court, the OEMS shall revoke an individual's EMS credential until the Department has been notified by the court that evidence has been obtained of compliance with a child support order. The provisions of G.S. 50-13.12 supersede the requirements of Paragraph (f) of this Rule.
- (e) When a person who is credentialed to practice as an EMS professional is also credentialed in another jurisdiction and the other jurisdiction takes disciplinary action against the person, the Department shall summarily impose the same or lesser disciplinary action upon receipt of the other jurisdiction's action. The EMS professional may request a hearing before the EMS Disciplinary Committee. At the hearing the issues shall be limited to:
- (1) whether the person against whom action was taken by the other jurisdiction and the Department are the same person;
  - (2) whether the conduct found by the other jurisdiction also violates the rules of the N.C. Medical Care Commission; and
  - (3) whether the sanction imposed by the other jurisdiction is lawful under North Carolina law.
- (f) The OEMS shall provide written notification of the amendment, denial, suspension, or revocation. This notice shall be given personally or by certified mail, and shall set forth:
- (1) the factual allegations;
  - (2) the statutes or rules alleged to have been violated; and
  - (3) notice of the individual's right to a contested hearing, set forth in Rule .1509 of this Section, on the revocation of the credential.
- (g) The OEMS shall provide written notification to the EMS professional within five business days after information has been

entered into the National Practitioner Data Bank and the Healthcare Integrity and Protection Integrity Data Bank.  
 (h) The EMS System Administrator, Primary Agency Contact, Medical Director, Educational Institution Program Coordinator, or Medical Advisor shall notify the OEMS of any violation listed in Paragraph (b) of this Rule within 30 days of discovery of the violation or upon completion of the internal agency or EMS system investigation.

*History Note: Authority G.S. 131E-159; 143-508(d)(10); 143-519;  
 Eff. January 1, 2013;  
 Readopted Eff. January 1, 2017;  
 Amended Eff. April 1, 2024; July 1, 2021.*

**TITLE 15A - DEPARTMENT OF ENVIRONMENTAL QUALITY**

**15A NCAC 18A .1001 DEFINITIONS**

The following definitions shall apply throughout this Section:

- (1) "Basecamp" means the permanent base of operations of the summer camp served by permanent connection to a public electrical service provider.
- (2) "Bathing facility" means any facility designed to wash the whole body, including a shower facility.
- (3) "Camp food service kitchen" means the interior of a camp kitchen facility at the basecamp, of permanent construction, operated and staffed by the camp employees, used to prepare food for camp attendees, employees, and guests. This term does not include an educational kitchen.
- (4) "Clean" means that an object or surface has been made free of garbage, solid waste, soil, dust, hair, dander, food, bodily fluids and secretions, and feces.
- (5) "Closed" means that a summer camp is not offering food or lodging to the public.
- (6) "Community water supply" means a community water system as defined at G.S. 130A-313(10).
- (7) "Cookout" means an organized activity staffed and operated by the summer camp at the basecamp involving outdoor cooking and dining.
- (8) "Cross-connection" means as defined in 15A NCAC 18C .0102(c)(8).
- (9) "DCDEE" means the Division of Child Development and Early Education of the North Carolina Department of Health and Human Services.
- (10) "Department" means the North Carolina Department of Health and Human Services.
- (11) "Educational kitchen" means a kitchen facility at base camp that can be operated by campers

- (12) "Employee" means as defined in Part 1-2 of the Food Code incorporated by reference at 15A NCAC 18A .2650 as amended by 15A NCAC 18A 2651.
- (13) "Equipment" means as defined in Part 1-2 of the Food Code incorporated by reference at 15A NCAC 18A .2650 as amended by 15A NCAC 18A .2651. "Equipment" also includes washing machines and dryers.
- (14) "Evaluation" means an in-person visit from the regulatory authority to a summer camp for the purpose of assessing whether the summer camp will be issued a permit, or have a suspension lifted, pursuant to Rule .1004 of this Section. An evaluation does not result in a letter grade being issued.
- (15) "Garbage" means as defined at G.S. 130A-290(7).
- (16) "Good repair" means in a working safe condition. But for food service equipment and utensils, good repair means as defined at 15A NCAC 18A .2651(8).
- (17) "Inspection" means an in-person visit from the regulatory authority to an open summer camp with an active permit for the purpose of assessing the camp's sanitation pursuant to Rule .1008 of this Section. An inspection results in a letter grade being issued.
- (18) "Linen" means fabric items such as bedding, towels, cloth hampers, cloth napkins, tablecloths, wiping cloths, and work garments including cloth gloves.
- (19) "Litter" means refuse as defined in 130A-290(28).
- (20) "Local health department" means as defined in G.S. 130A-2(5).
- (21) "Non-community water supply" means a noncommunity water system as defined at G.S. 130A-313(10).
- (22) "Open" means that a summer camp is offering food or lodging to the public.
- (23) "Permanent sleeping quarters" means those buildings, cabins, platform tents, covered wagons, or teepees provided by the camp that remain in a fixed location during the camp operation session and provide overnight lodging accommodations for camp participants.
- (24) "Pest" means as defined at G.S. 143-460(26a).
- (25) "Pest harborage" means any condition that provides water or food and shelter for pests.
- (26) "Poisonous or toxic materials" means as defined in Part 1-2 of the Food Code incorporated by reference at 15A NCAC 18A .2650 as amended by 15A NCAC 18A .2651.
- (27) "Potable water" means water that is safe for human consumption.

- (28) "Public electrical service provider" means an entity that furnishes electricity for pay.
- (29) "Refuse" means as defined at G.S. 130A-290(28).
- (30) "Regulatory authority" means the Department or authorized agent of the Department.
- (31) "Responsible person" means the administrator, operator, owner, or other person in charge of the operation of the summer camp.
- (32) "Rubbish" means refuse as defined in 130A-290(28).
- (33) "Sanitarian" means the same as "Registered Environmental Health Specialist" as defined at G.S. 90A-51(4).
- (34) "Sanitize" means as defined in Part 4-7 of the Food Code incorporated by reference at 15A NCAC 18A .2650 as amended by 15A NCAC 18A .2654.
- (35) "Sewage and other liquid waste" means sewage as defined in G.S. 130A-334(13).
- (36) "Solid waste" means as defined at G.S. 130A-290(35).
- (37) "Summer camp" means those camp establishments which prepare or serve food for pay or provide overnight lodging accommodations for pay, for groups of children or adults engaged in organized recreational or educational programs. This definition does not include:
  - (a) those day camps required to obtain a license through DCDEE;
  - (b) Campgrounds or other facilities that only rent property or campsites for camping;
  - (c) Resident camps, Children's Foster Care Camps, and Residential Therapeutic (Habilitative) Camps as defined in 15A NCAC 18A .3601; or
  - (d) Primitive experience camps as defined in 15A NCAC 18A .3501.
- (38) "Summer camp premises" means the physical facilities of the summer camp, the contents of those facilities, and the contiguous land or property under the control of the permit holder or responsible person. This term does not include a camp food service kitchen facility.
- (39) "Supplemental cooking rooms" means as defined in 15A NCAC 18A .2651(20).
- (40) "Swimming pool" means a public swimming pool as defined in Section .2500 of this Subchapter.
- (41) "Time/Temperature Control for Safety Food" or "TCS Food" means as defined in Part 1-2 of the Food Code incorporated by reference at 15A NCAC 18A .2650 as amended by 15A NCAC 18A .2651.
- (42) "Toilet facility" means water closets or privies.
- (43) "Vermin" means "Pest" as defined at G.S. 143-460(26a).

- (44) "Warewashing" means as defined in Part 1-2 of the Food Code incorporated by reference at 15A NCAC 18A .2650 as amended by 15A NCAC 18A .2651.
- (45) "Wildlife" means as defined in G.S. 143-460(38).

*History Note: Authority G.S. 130A-4; 130A-248; Eff. February 1, 1976; Readopted Eff. December 5, 1977; Amended Eff. November 1, 2002; September 1, 1990; Readopted Eff. April 1, 2024.*

**15A NCAC 18A .1002 FIELD SANITATION**

- (a) Summer camps may conduct activities away from base camp provided field sanitation standards are maintained in accordance with 15A NCAC 18A .3619.
- (b) Summer camps may conduct cookouts at basecamp provided field sanitation standards are maintained in accordance with 15A NCAC 18A .3619(1) and (4) through (7), except that written procedures are not required.

*History Note: Authority G.S. 130A-4; 130A-248; Eff. February 1, 1976; Readopted Eff. December 5, 1977; Amended Eff. September 1, 1990; Readopted Eff. April 1, 2024.*

**15A NCAC 18A .1003 STANDARDS AND APPROVAL OF PLANS**

- (a) Plans drawn to scale for the proposed construction of summer camp kitchen facilities, lodging facilities, bathing facilities, and toilet facilities shall be submitted to the local health department of the county in which the camp is located. Plans and equipment specifications for construction or remodeling of a camp food service kitchen shall be submitted in accordance with the provisions of Part 8-2 of the Food Code incorporated by reference at 15A NCAC 18A .2650 as amended by 15A NCAC 18A .2658. Construction shall not be started until the plans have been approved by the local health department. The local health department shall approve, disapprove, or mark incomplete plans for summer camps within 30 days of their receipt. If the local health department disapproves plans or marks them incomplete, the local health department shall provide written comments to the submitter informing them of what is missing or incomplete. If the local health department fails to approve, disapprove, or mark incomplete plans within 30 days of their receipt, the plans shall be deemed approved.
- (b) Plans for the proposed construction or remodeling of a public swimming pool at a summer camp shall be submitted in accordance with 15A NCAC 18A .2509.

*History Note: Authority G.S. 130A-4; 130A-248; Eff. February 1, 1976; Readopted Eff. December 5, 1977; Amended Eff. September 1, 1990; Readopted Eff. April 1, 2024.*

**15A NCAC 18A .1004 PERMITS**

(a) No person shall operate a summer camp within the State of North Carolina who does not possess a valid permit from the Department. No summer camp permit shall be issued until an evaluation by the regulatory authority shows that the establishment complies with all rules within this Section.

(b) Summer camps shall complete and submit to the Department an Advanced Notification for Operation at least 45 days prior to the first date of operation each calendar year. The advanced notification form shall be obtained from the Department and shall include the following information:

- (1) type of camp (Summer, Resident, Primitive Experience);
- (2) date notification is submitted;
- (3) dates of operation (a calendar schedule may be attached);
- (4) the name of the camp;
- (5) the physical and billing addresses of the camp;
- (6) the name of the camp responsible person;
- (7) contact information for the responsible person including phone numbers and emails;
- (8) type of water supply;
- (9) type of wastewater system;
- (10) the capacity of the camp including campers and staff;
- (11) the date the water supply will be accessible for sampling and inspection if applicable;
- (12) the dates, prior to the first date of operation, when facilities will be inspected by camp management to ensure that:
  - (A) camp facilities are clean, and in good repair;
  - (B) camp kitchen equipment, including required refrigeration and dishwashing equipment, is clean and operational;
  - (C) camp buildings and permanent sleeping quarters are free of all bats and other vermin, wildlife, and pest harborages; and
  - (D) the camp is free from conditions which represent a threat to the public health;
- (13) list of any public swimming pools, wading pools, or water recreation attractions at the camp; and
- (14) the name, signature, and title of the person completing the form.

(c) Upon transfer of ownership of an existing summer camp, the regulatory authority shall complete an evaluation of the facility. If the establishment satisfies all the requirements of this Section, a permit shall be issued. If the establishment does not satisfy all the requirements of this Section, a permit shall not be issued. If the regulatory authority determines that the noncompliant items are related to construction or equipment items that do not represent a threat to the public health, a transitional permit may be issued. The transitional permit shall expire 180 days after the date of issuance, unless suspended or revoked before that date, and shall not be renewed. Upon expiration of the transitional permit, the permit holder or responsible person shall have

corrected the noncompliant items and obtained a summer camp permit, or the summer camp shall be closed.

(d) The regulatory authority shall impose conditions on the issuance of a summer camp permit or transitional permit, if necessary, to ensure that the summer camp remains in compliance with the rules of this Section. Conditions may be specified for one or more of the following areas:

- (1) The number of persons served;
- (2) The categories of food served;
- (3) Time schedules in completing minor construction items;
- (4) Modification or maintenance of water supplies, water use fixtures and sanitary sewage systems;
- (5) Use of facilities for more than one purpose;
- (6) Continuation of contractual arrangements upon which basis the permit was issued;
- (7) Submission and approval of plans for renovation; and
- (8) Any other conditions necessary for the summer camp to remain in compliance with the Rules of this Section.

(e) A summer camp permit or transitional permit shall be immediately revoked in accordance with G.S. 130A-23(d) for failure of the facility to maintain a minimum grade of C. A permit or transitional permit may otherwise be suspended or revoked in accordance with G.S. 130A-23. If a permit or transitional permit has been suspended, the suspension shall be lifted if the regulatory authority has evaluated the establishment and found that the violations causing the suspension have been corrected. If a permit or transitional permit has been revoked, a new permit shall be issued only after the regulatory authority has evaluated the establishment and found it to comply with all applicable rules. These evaluations shall be scheduled and conducted within 15 days after the request is made by the summer camp's permit holder or responsible person.

*History Note: Authority G.S. 130A-4; 130A-248; Eff. February 1, 1976; Readopted Eff. December 5, 1977; Amended Eff. April 1, 1992; September 1, 1990; March 1, 1988; Readopted Eff. April 1, 2024.*

**15A NCAC 18A .1006 INSPECTIONS AND REINSPECTIONS**

Upon request from the permit holder or responsible person for a reinspection for the purpose of raising the alphabetical grade of their summer camp, the regulatory authority shall make an unannounced inspection within 15 calendar days from the date of the request. If the camp is closed for the 15 calendar days following the request, the permit holder or responsible person shall inform the regulatory authority when the camp will open, and the regulatory authority shall make an unannounced inspection within 15 calendar days of when the camp opens.

*History Note: Authority G.S. 130A-4; 130A-248; Eff. February 1, 1976; Readopted Eff. December 5, 1977; Readopted Eff. April 1, 2024.*

**15A NCAC 18A .1007 INSPECTION FORMS**

*History Note: Authority G.S. 130A-248; Eff. February 1, 1976; Readopted Eff. December 5, 1977; Amended Eff. September 1, 1990; June 30, 1980; Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. July 20, 2019; Repealed Eff. April 1, 2024.*

**15A NCAC 18A .1008 GRADING**

(a) The grading of summer camps shall be based on a system of scoring wherein summer camps receiving a score of at least 90 percent shall receive Grade A, summer camps receiving a score of at least 80 percent and less than 90 percent shall receive Grade B, and summer camps receiving a score of at least 70 percent and less than 80 percent shall receive Grade C. Permits shall be immediately revoked in accordance with G.S. 130A-23(d) for summer camps receiving a score of less than 70 percent.

(b) The grading of summer camps shall include the grading of the summer camp premises and the camp food service kitchen, if applicable, using an inspection form provided by the Department. The form shall include the following information:

- (1) name and mailing address of the summer camp;
- (2) name of summer camp permit holder;
- (3) summer camp permit status and score given;
- (4) length of season;
- (5) number of residents;
- (6) standards of construction and operation referenced in Paragraph (c) and (d) of this Rule;
- (7) an explanation for all points deducted;
- (8) signature of the regulatory authority; and
- (9) date of the inspection.

(c) The grading of the summer camps premises shall be based on the standards of operation and construction as set forth in Rules .1002, .1010, .1011, .1013 through .1016, and .1017(f) through .1028 of this Section as follows:

- (1) Violation of Rule .1010 of this Section related to summer camp site free of actual or potential health hazards shall equal no more than three points.
- (2) Violation of Rule .1011(a), (b), or (c) of this Section related to water supply approved and no cross connections shall equal no more than four points.
- (3) Violation of Rule .1011(d) of this Section related to hot water facilities provided, hot and cold water under pressure shall equal no more than two points.
- (4) Violation of Rule .1013 of this Section related to sewage and liquid waste disposal shall equal no more than four points.
- (5) Violation of Rule .1025 of this Section related to solid waste storage and cleaning facilities shall equal no more than three points.
- (6) Violation of Rule .1024(1) or (2) of this Section related to camp building floors, walls, and ceilings properly constructed, clean, and in

good repair shall equal no more than four points.

- (7) Violation of Rule .1024(3) of this Section related to lighting and ventilation adequate, clean, and in good repair shall equal no more than two points.
- (8) Violation of Rule .1016 of this Section related to lodging facilities and permanent sleeping quarters provided by the camp, properly arranged, clean, and in good repair shall equal no more than three points.
- (9) Violation of Rule .1016 of this Section related to separate storage and handling of clean and dirty linen in lodging facilities provided by the camp shall equal no more than two points.
- (10) Violation of Rule .1014(a) through (d) of this Section related to toilet, handwashing, or bathing facilities shall equal no more than four points.
- (11) Violation of Rule .1014(e) of this Section related to laundry areas and equipment clean and in good repair; soiled laundry handled and stored separately from clean laundry shall equal no more than two points.
- (12) Violation of Rule .1015 of this Section related to drinking water facilities shall equal no more than one point.
- (13) Violation of Rule .1026(b) or .1028(a) of this Section related to storage, handling, and use of pesticides, poisonous or toxic materials, and hazardous materials shall equal no more than three points.
- (14) Violation of Rule .1026(a) or (e) of this Section related to measures to exclude flies, rodents and other vermin from entry into food service areas and permanent sleeping quarters and measures to prevent pest harborages on the premises shall equal no more than three points.
- (15) Violation of Rule .1026(c) and .1028(b) of this Section related to clean camp premises, protective railings, and fences in good repair, shall equal no more than three points.
- (16) Violation of Rule .1017(f) or (g), or .1026(d) of this Section related to sanitation standards, lighting protected, and live animals not present in educational kitchen facilities shall equal no more than two points.
- (17) Violation of Rule .1002 of this Section related to field sanitation standards maintained for cookouts or activities involving food preparation or service away from base camp, and written procedures when required, shall equal no more than three points.
- (18) Violation of Rule .1023 of this Section related to the storage and handling of ice outside of a camp food service kitchen shall equal no more than two points.

(d) The grading of a camp food service kitchen shall be based solely on the standards of operation and construction set forth in Rule .1017(a) through .1017(e) of this Section as follows:

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| <p>(1) Violation of Chapter 2 of the Food Code incorporated by reference at 15A NCAC 18A .2650 as amended by 15A NCAC 18A .2652 related to person in charge present; performance of PIC duties shall equal no more than one point.</p> <p>(2) Violation of Chapter 2 of the Food Code incorporated by reference at 15A NCAC 18A .2650 as amended by 15A NCAC 18A .2652 related to management awareness, policy present; proper use of reporting, restriction, and exclusion; procedures for responding to vomiting and diarrheal events shall equal no more than two points.</p> <p>(3) Violation of Chapter 2 or 3 of the Food Code incorporated by reference at 15A NCAC 18A .2650 as amended by 15A NCAC 18A .2652 and .2653 related to proper employee eating, tasting, drinking, or tobacco use; no discharge from eyes, nose, and mouth shall equal no more than one point.</p> <p>(4) Violation of Chapter 2 of the Food Code incorporated by reference at 15A NCAC 18A .2650 as amended by 15A NCAC 18A .2652 related to hands clean and properly washed shall equal no more than three points.</p> <p>(5) Violation of Chapter 3 of the Food Code incorporated by reference at 15A NCAC 18A .2650 as amended by 15A NCAC 18A .2653 related to no bare hand contact with ready-to-eat food or approved alternate method properly followed shall equal no more than two points.</p> <p>(6) Violation of Chapters 5 or 6 of the Food Code incorporated by reference at 15A NCAC 18A .2650 as amended by 15A NCAC 18A .2655 and .2656 related to handwashing facilities supplied and accessible shall equal no more than one point.</p> <p>(7) Violation of .1017(d) or Chapter 3 or 5 of the Food Code incorporated by reference at 15A NCAC 18A .2650 as amended by 15A NCAC 18A .2653 and .2655 related to food obtained from an approved source; food received at proper temperature; food in good condition, safe, unadulterated; required records available, shellstock tags, parasite destruction; water and ice from approved source shall equal no more than three points.</p> <p>(8) Violation of Chapter 3 of the Food Code incorporated by reference at 15A NCAC 18A .2650 as amended by 15A NCAC 18A .2653 related to food separated and protected; disposition of returned, previously served, reconditioned, and unsafe food shall equal no more than two points.</p> | <p>(9) Violation of Chapter 4 of the Food Code incorporated by reference at 15A NCAC 18A .2650 as amended by 15A NCAC 18A .2654 related to food-contact surfaces cleaned and sanitized shall equal no more than two points.</p> <p>(10) Violation of Chapter 3 of the Food Code incorporated by reference at 15A NCAC 18A .2650 as amended by 15A NCAC 18A .2653 related to cooking time and temperatures; pasteurized eggs used where required shall equal no more than two points.</p> <p>(11) Violation of Chapter 3 of the Food Code incorporated by reference at 15A NCAC 18A .2650 as amended by 15A NCAC 18A .2653 related to reheating procedures for hot holding shall equal no more than two points.</p> <p>(12) Violation of Chapter 3 of the Food Code incorporated by reference at 15A NCAC 18A .2650 as amended by 15A NCAC 18A .2653 related to cooling time and temperatures; proper cooling methods shall equal no more than two points.</p> <p>(13) Violation of Chapter 3 of the Food Code incorporated by reference at 15A NCAC 18A .2650 as amended by 15A NCAC 18A .2653 related to hot holding temperatures shall equal no more than two points.</p> <p>(14) Violation of Chapter 3 of the Food Code incorporated by reference at 15A NCAC 18A .2650 as amended by 15A NCAC 18A .2653 related to cold holding temperatures shall equal no more than two points.</p> <p>(15) Violation of Chapter 3 of the Food Code incorporated by reference at 15A NCAC 18A .2650 as amended by 15A NCAC 18A .2653 related to date marking and disposition shall equal no more than two points.</p> <p>(16) Violation of Chapter 3 of the Food Code incorporated by reference at 15A NCAC 18A .2650 as amended by 15A NCAC 18A .2653 related to time as a public health control procedures and records shall equal no more than two points.</p> <p>(17) Violation of Chapter 3 of the Food Code incorporated by reference at 15A NCAC 18A .2650 as amended by 15A NCAC 18A .2653 related to consumer advisory provided for raw or undercooked foods; pasteurized foods used and prohibited foods not offered shall equal no more than two points.</p> <p>(18) Violation of Chapter 3 or 7 of the Food Code incorporated by reference at 15A NCAC 18A .2650 as amended by 15A NCAC 18A .2653 and .2657 related to food additives approved and properly used; toxic substances properly identified, stored, and used shall equal no more than two points.</p> <p>(19) Violation of Chapters 3 and 4 of the Food Code incorporated by reference at 15A NCAC 18A</p> |
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- .2650 as amended by 15A NCAC 18A .2653 and .2654 related to adequate equipment for temperature control; plant food properly cooked for hot holding; approved thawing methods used shall equal no more than two points.
- (20) Violation of Chapter 4 of the Food Code incorporated by reference at 15A NCAC 18A .2650 as amended by 15A NCAC 18A .2654 related to thermometers provided and accurate shall equal no more than one point.
- (21) Violation of Chapter 3 of the Food Code incorporated by reference at 15A NCAC 18A .2650 as amended by 15A NCAC 18A .2653 related to food being properly labeled or in the original container shall equal no more than one point.
- (22) Violation of Chapters 2 and 6 of the Food Code incorporated by reference at 15A NCAC 18A .2650 as amended by 15A NCAC 18A .2652 and .2656 related to insects and rodents not present and no unauthorized animals shall equal no more than one point.
- (23) Violation of Chapters 2, 3, 4, 6, or 7 of the Food Code incorporated by reference at 15A NCAC 18A .2650 as amended by 15A NCAC 18A .2652, .2653, .2654, .2656, and .2657 related to contamination prevented during food preparation, storage, and display, personal cleanliness, wiping cloths properly used and stored, and washing fruits and vegetables shall equal no more than two points.
- (24) Violation of Chapters 3 and 4 of the Food Code incorporated by reference at 15A NCAC 18A .2650 as amended by 15A NCAC 18A .2653 and .2654 related to in-use utensils properly stored; utensils, equipment, and linens properly stored, dried and handled; single-use and single-service articles properly stored and used; gloves used properly shall equal no more than two points.
- (25) Violation of Chapters 3 and 4 of the Food Code incorporated by reference at 15A NCAC 18A .2650 as amended by 15A NCAC 18A .2653 and .2654 related to equipment, food and non-food contact surfaces approved, cleanable, properly designed, constructed and used; warewashing facilities installed, maintained, used, and test strips shall equal no more than one point.
- (26) Violation of Chapter 4 of the Food Code incorporated by reference at 15A NCAC 18A .2650 as amended by 15A NCAC 18A .2654 related to non-food contact surfaces clean shall equal no more than one point.
- (27) Violation of Chapters 5 and 6 of the Food Code incorporated by reference at 15A NCAC 18A .2650 as amended by 15A NCAC 18A .2655 and .2656 related to hot and cold water available and adequate pressure; plumbing installed and proper backflow devices; sewage and wastewater properly disposed; toilet facilities properly constructed, supplied, and cleaned; garbage and refuse properly disposed and facilities maintained shall equal no more than two points.
- (28) Violation of .1017(e) or Chapters 4 or 6 of the Food Code incorporated by reference at 15A NCAC 18A .2650 as amended by 15A NCAC 18A .2654 and .2656 related to physical facilities installed, maintained, and clean shall equal no more than one point.
- (29) Violation of Rule .1017(c) regarding lighting intensity, or Chapters 4 and 6 of the Food Code incorporated by reference at 15A NCAC 18A .2650 as amended by 15A NCAC 18A .2654 and .2656 related to meets ventilation and lighting requirements and designated areas used shall equal no more than one point.
- (e) The inspection form shall be used to document points assessed for violations of the rules of this Section as set forth in Paragraph (c) and (d) of this Rule.
- (f) In filling out the inspection form, points shall be deducted only once for a single occurrence or condition existing within the summer camp. Deductions shall be based on actual violations of the rules of this Section observed during the inspection. The regulatory authority shall take zero, one-half, or a full deduction of points depending upon the severity or the recurring nature of the violation.
- (g) Water stains on walls or ceilings are not violations unless microbial growth is present.
- (h) The posted grade card shall be black on a white background on a form provided by the Department. The alphabetical and numerical rating shall be 1.5 inches in height. No other public displays representing sanitation level of the establishment may be posted by the summer camp unless approved by the regulatory authority.

*History Note: Authority G.S. 130A-4; 130A-248; Eff. February 1, 1976; Readopted Eff. December 5, 1977; Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. July 20, 2019; Amended Eff. April 1, 2024.*

**15A NCAC 18A .1009 STANDARDS**

*History Note: Authority G.S. 130A-248; Eff. February 1, 1976; Readopted Eff. December 5, 1977; Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. July 20, 2019; Repealed Eff. April 1, 2024.*

**15A NCAC 18A .1011 WATER SUPPLY**

(a) Water supplies shall meet the requirements in 15A NCAC 18A .1700 or 15A NCAC 18C, as applicable.

(b) For summer camps that use a non-community water supply, a sample of water shall be collected by the Department once a year and submitted to the North Carolina State Laboratory of Public Health or other laboratory certified by the North Carolina State Laboratory of Public Health under 10A NCAC 42C .0102 to perform bacteriological examinations. If the summer camp has been closed for more than 180 consecutive days during any 365-day period, the regulatory authority shall collect these samples at least 30 days and not more than 60 days prior to the camp's scheduled opening date. Failure of the regulatory authority to collect these samples at least 30 days prior to the camps scheduled opening shall not impede the opening of the camp.

(c) A summer camp's water supply plumbing shall not include cross-connections.

(d) Summer camps shall provide hot water heating facilities. Hot and cold running water under pressure shall be provided to food preparation areas, bathing facilities, and any other areas in which water is required for cleaning.

*History Note: Authority G.S. 130A-4; 130A-248; Eff. February 1, 1976; Readopted Eff. December 5, 1977; Amended Eff. September 1, 1990; July 1, 1986; Readopted Eff. April 1, 2024.*

**15A NCAC 18A .1012 RECREATIONAL WATERS**

When public swimming pools are provided by a summer camp, they shall meet the requirements of Section .2500 of this Subchapter.

*History Note: Authority G.S. 130A-4; 130A-248; Eff. February 1, 1976; Readopted Eff. December 5, 1977; Amended Eff. September 1, 1990; Readopted Eff. April 1, 2024.*

**15A NCAC 18A .1014 TOILET: HANDWASHING: LAUNDRY: AND BATHING FACILITIES**

(a) All summer camps shall be provided with toilet, handwashing, and bathing facilities which are available for use by employees and campers during all hours the camp is open. Toilets for campers shall be located so that the campers do not pass through a camp food service kitchen to enter the toilet rooms. Toilet facilities shall be provided at a rate of not more than 25 campers and staff per toilet seat. Toilet facilities shall be provided within 500 feet of permanent sleeping quarters and within 500 feet of every camp kitchen facility. Urinals may substitute for no more than two-thirds of toilets. The toilet facility ratio and distance requirements of this Paragraph do not apply to any structure used in the operation of the summer camp before the effective date of this Rule.

(b) Handwashing facilities with running potable water, soap, and individual towels or hand-drying devices shall be provided and located in or immediately adjacent to all flush toilet facilities. All camp kitchen facilities at basecamp shall contain at least one sink that can be used for handwashing supplied with hot and cold running water through mixing faucets, soap, and individual towels or hand-drying devices.

(c) Bathing facilities shall be provided with hot and cold potable water. Bathing facilities shall not be required for day camps where neither campers nor staff stay at the camp overnight.

(d) All toilet, handwashing, and bathing fixtures shall be kept clean and in good repair.

(e) Laundry areas and equipment, if provided, shall be kept clean and in good repair. Soiled laundry shall be handled and stored separately from clean laundry.

*History Note: Authority G.S. 130A-4; 130A-248; Eff. February 1, 1976; Readopted Eff. December 5, 1977; Amended Eff. September 1, 1990; Readopted Eff. April 1, 2024.*

**15A NCAC 18A .1017 FOOD SERVICE FACILITIES**

(a) Summer camps that prepare or serve food for pay shall include at least one camp food service kitchen and a covered dining hall. A camp food service kitchen shall comply with the Food Code incorporated by reference at 15A NCAC 18A .2650 as amended by 15A NCAC 18A .2651-.2658 with the following exceptions:

- (1) Any TCS food required to be maintained at or below 41 degrees Fahrenheit by the provisions set forth in Part 3-501 of the Food Code incorporated by reference at 15A NCAC 18A .2650 as amended by 15A NCAC 18A .2653 may also be maintained between 41 degrees Fahrenheit and 45 degrees Fahrenheit in refrigeration equipment that is not capable of maintaining the food at 41 degrees Fahrenheit or less if:
  - (A) The equipment is in place and in use in the camp food service kitchen on or before the effective date of this Rule;
  - (B) On or before April 1, 2026, the equipment is upgraded or replaced to maintain food at a temperature of 5 degrees Celsius or 41 degrees Fahrenheit or less; and
  - (C) Any food required to be datemarked in accordance with Part 3-501.17 of the Food Code incorporated by reference at 15A NCAC 18A .2650 as amended by 15A NCAC 18A .2653 is clearly marked to indicate the date or day by which the food shall be consumed on the premises, sold, or discarded when held at a temperature between 41 degrees Fahrenheit and 45 degrees Fahrenheit for a maximum of 4 days. The day of preparation shall be counted as Day 1;
- (2) The provisions of Part 8-405 of the Food Code incorporated by reference at 15A NCAC 18A .2650 as amended by 15A NCAC 18A .2658 shall not apply to camp food service kitchens;
- (3) The lighting intensity requirements set forth in Part 6-303.11 of the Food Code incorporated by

reference at 15A NCAC 18A .2650 as amended by 15A NCAC 18A .2656 shall not apply;

- (4) Nothing in these Rules shall prohibit family style service where patrons elect to participate in the family dining-table type of service;
- (5) For all equipment, except warewashing equipment, non-commercial equipment in good repair shall be allowed in a camp food service kitchen;
- (6) When only single-service eating and drinking utensils are used, a sink with at least two-compartments meeting the requirements set forth in Chapter 4 of the Food Code incorporated by reference at 15A NCAC 18A .2650 as amended by 15A NCAC 18A .2654 shall be acceptable as the camp food service kitchen warewashing sink;
- (7) The provisions of Part 2-102 of the Food Code incorporated by reference at 15A NCAC 18A .2650 as amended by 15A NCAC 18A .2652 shall not apply; and
- (8) The following provisions of the Food Code incorporated by reference at 15A NCAC 18A .2650 as amended by 15A NCAC 18A .2651 - .2658 shall be effective for summer camps beginning April 1, 2025:
  - (A) Part 2-103.11 Person In Charge;
  - (B) Part 2-201 Responsibilities of Permit Holder, Person in Charge, Food Employees, and Conditional Employees;
  - (C) Part 4-302.13(B) Temperature Measuring Devices, Mechanical Warewashing; and
  - (D) Part 2-501.11 Clean-up of Vomiting and Diarrheal Events.

(b) After April 1, 2026, all TCS food in camp food service kitchens shall be held in accordance with the provisions of Part 3-501 of the Food Code incorporated by reference at 15A NCAC 18A .2650 as amended by 15A NCAC 18A .2653 with no allowance for cold holding above 41 degrees Fahrenheit.

(c) Camp food service kitchens shall be illuminated by natural or artificial means.

(d) If camp food service is provided by contract with an outside person or operated by an outside company, the responsibility for compliance with food service sanitation requirements remains with the permit holder. The permit holder shall confirm that all food provided by an outside person or company complies with the requirements of Part 3-201.11 of the Food Code incorporated by reference at 15A NCAC 18A .2650 as amended by 15A NCAC 18A .2653.

(e) Supplemental cooking rooms shall be allowed in summer camps. Supplemental cooking rooms shall comply with the standards set forth in 15A NCAC 18A .2664 except that the lighting intensity requirements in Item (7) of that Rule shall not apply.

(f) Educational kitchens may be operated with non-commercial utensils and equipment. Notwithstanding the provisions set forth

in this Section, field sanitation standards set forth in 15A NCAC 18A .3619 shall be met in educational kitchens.

(g) The lighting in any educational kitchen, food preparation area, or food storage area shall comply with Part 6-202.11 of the Food Code incorporated by reference at 15A NCAC 18A .2650 as amended by 15A NCAC 18A .2656.

*History Note: Authority G.S. 130A-4; 130A-248; Eff. February 1, 1976; Readopted Eff. December 5, 1977; Amended Eff. September 1, 1990; Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. July 20, 2019; Amended Eff. April 1, 2024.*

- 15A NCAC 18A .1018 FOOD SERVICE UTENSILS AND EQUIPMENT**
- 15A NCAC 18A .1019 FOOD SUPPLIES**
- 15A NCAC 18A .1020 SHELLFISH**
- 15A NCAC 18A .1021 MILK AND MILK PRODUCTS**
- 15A NCAC 18A .1022 FOOD PROTECTION**

*History Note: Authority G.S. 130A-248; Eff. February 1, 1976; Readopted Eff. December 5, 1977; Amended Eff. October 1, 1993; September 1, 1990; July 1, 1984; Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. July 20, 2019; Repealed Eff. April 1, 2024.*

**15A NCAC 18A .1027 FOOD SERVICE EMPLOYEES**

*History Note: Authority G.S. 130A-248; Eff. February 1, 1976; Readopted Eff. December 5, 1977; Amended Eff. September 1, 1990; Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. July 20, 2019; Repealed Eff. April 1, 2024.*

**15A NCAC 18A .1601 DEFINITIONS**

The following definitions shall apply throughout this Section:

- (1) "Administrator" means the person designated by the licensee to be responsible for the daily operation of the residential care facility.
- (2) "Bed linens" means bed sheets, pillowcases, mattress covers, blankets, and duvet covers.
- (3) "Clean" means that an object or surface has been made free of garbage, solid waste, soil, dust, hair, dander, food, bodily fluids and secretions, and feces.
- (4) "Department" means the North Carolina Department of Health and Human Services.
- (5) "Disinfectant" means a disinfectant as defined at 40 C.F.R. 158.2203 that has been registered with the United States Environmental Protection Agency in accordance with 40 C.F.R. 152, which are hereby incorporated by reference, including any subsequent

amendments or editions, and are available free of charge at <https://www.ecfr.gov/>.

- (6) "Good repair" means as defined at 15A NCAC 18A .2651(8). Items that are in good repair shall operate in accordance with the manufacturer's instructions.
- (7) "Licensing agency" means the North Carolina Department of Health and Human Services, Division of Health Service Regulation.
- (8) "Linen" means bath towels, hand drying towels, bed linens, and pillows.
- (9) "Non-community water supply" means as defined in G.S. 130A-313(10).
- (10) "Pest" means as defined in G.S. 143-460(26a).
- (11) "Pest harborage" means any condition that provides water or food and shelter for pests.
- (12) "Regulatory authority" means the Department or authorized agent of the Department.
- (13) "Resident" means a person, other than the administrator, his or her immediate family, and residential care facility employees, who is residing in a residential care facility.
- (14) "Residential care facility" means an establishment providing room or board and for which a license or certificate for payment is obtained from the Department, but does not include a child day care facility or an institution as defined in 15A NCAC 18A .1301.
- (15) "Solid waste" means as defined in G.S. 130A-290(35).
- (16) "Time/Temperature Control for Safety Food" or "TCS Food" means as defined in Part 1-2 of the Food Code incorporated by reference at 15A NCAC 18A .2650 as amended by 15A NCAC 18A .2651.

*History Note: Authority G.S. 130A-4; 130A-235; Eff. February 1, 1976; Readopted Eff. December 5, 1977; Amended Eff. July 1, 1993; September 1, 1990; March 1, 1988; July 1, 1984; Temporary Amendment Eff. May 5, 1998; Temporary Amendment Expired January 26, 1999; Amended Eff. November 1, 2002; Readopted Eff. April 1, 2024.*

**15A NCAC 18A .1602 APPROVAL OF PLANS**

*History Note: Authority G.S. 130A-235; Eff. February 1, 1976; Readopted Eff. December 5, 1977; Amended Eff. September 1, 1990; Repealed Eff. April 1, 2024.*

**15A NCAC 18A .1603 INSPECTIONS**

(a) The regulatory authority shall inspect residential care facilities at least once a year prior to the expiration of the residential care facility's license issued by the licensing agency. The Department

shall provide a copy of the inspection form to the administrator of the facility.

(b) The inspection of institutions shall be documented on an inspection form provided by the Department. The form shall include at least the following information:

- (1) name and address of the residential care facility;
- (2) name of licensee;
- (3) an explanation for all demerits incurred during the inspection;
- (4) classification in accordance with Rule .1606 of this Section;
- (5) the date on which the inspection is conducted; and
- (6) the signature of the regulatory authority.

*History Note: Authority G.S. 130A-4; 130A-235; Eff. February 1, 1976; Readopted Eff. December 5, 1977; Amended Eff. July 1, 1993; Readopted Eff. April 1, 2024.*

**15A NCAC 18A .1604 REINSPECTIONS: VISITS**

The regulatory authority may reinspect or visit residential care facilities at any time to ensure compliance with these Rules. When the administrator requests an inspection of their facility to improve a classification the regulatory authority shall make an unannounced inspection within 30 days.

*History Note: Authority G.S. 130A-4; 130A-235; Eff. February 1, 1976; Readopted Eff. December 5, 1977; Amended Eff. September 1, 1990; Readopted Eff. April 1, 2024.*

**15A NCAC 18A .1605 INSPECTION FORMS**

*History Note: Authority G.S. 130A-235; Eff. February 1, 1976; Readopted Eff. December 5, 1977; Amended Eff. September 1, 1990; June 30, 1980; Repealed Eff. April 1, 2024.*

**15A NCAC 18A .1606 SCORING SYSTEM**

(a) Residential care facility sanitation scores shall be based upon the standards of construction and operation set out in Rules .1607 through .1621 of this Section.

(b) The score of the facility shall be classified as follows:

- (1) "Approved" if the demerit score is less than 40 and no six-demerit item is violated; and
- (2) "Disapproved" if the demerit score is 40 or greater, or if any six-demerit item is violated.

(c) The sanitation score is the total amount determined by adding demerits for each item found not to be in compliance with the rules of this Section. The demerit value of each item is determined as follows:

- (1) Violation of Rule .1607 of this Section regarding the cleanliness of floors and carpet

- shall equal two demerits and repair of floors and carpet shall equal one demerit.
- (2) Violation of Rule .1608 of this Section regarding the cleanliness of walls, ceilings, and attachments shall equal two demerits and repair of walls, ceilings, and attachments shall equal one demerit.
- (3) Violation of Rule .1609(a) of this Section regarding the illumination of required spaces shall equal two demerits.
- (4) Violation of Rule .1609(b) of this Section regarding the cleanliness and state of repair of windows, fixtures, and ventilation equipment shall equal two demerits.
- (5) Violation of Rule .1610(a) of this Section regarding the availability of toileting, handwashing, and bathing facilities shall equal five demerits.
- (6) Violation of Rule .1610(a) of this Section regarding the cleanliness and state of repair of toileting, handwashing, and bathing facilities shall equal four demerits.
- (7) Violation of Rule .1610(b) of this Section regarding the handwashing sink design shall equal four demerits.
- (8) Violation of Rule .1610(b) of this Section regarding the supply and storage provisions in bathrooms shall equal four demerits.
- (9) Violation of Rule .1611(a) of this Section regarding the water supply shall equal six demerits.
- (10) Violation of Rule .1611(c) of this Section regarding cross-connections shall equal five demerits.
- (11) Violation of Rule .1611(d) of this Section regarding the pressure availability and temperature of water at fixtures shall equal four demerits.
- (12) Violation of Rule .1613 of this Section regarding liquid waste disposal shall equal six demerits.
- (13) Violation of Rule .1614(a) of this Section regarding the locations of storage waste disposal shall equal two demerits.
- (14) Violation of Rule .1614(b) of this Section regarding the covering, cleanliness, and state of repair of solid waste containers shall equal two demerits.
- (15) Violation of Rule .1614(c) of this Section regarding solid waste disposal frequency shall equal two demerits.
- (16) Violation of Rule .1615(a) of this Section regarding pest presence shall equal three demerits.
- (17) Violation of Rule .1615(a) of this Section regarding the prevention of harborage conditions shall equal two demerits.
- (18) Violation of Rule .1615(a) of this Section regarding the state of repair of outdoor furniture shall equal two demerits.
- (19) Violation of Rule .1616 of this Section regarding the storage of substances shall equal four demerits.
- (20) Violation of Rule .1617(a) of this Section regarding the cleanliness of furnishings shall equal two demerits.
- (21) Violation of Rule .1617(a) of this Section regarding the state of repair of furnishings shall equal two demerits.
- (22) Violation of Rule .1617(b) of this Section regarding the provisions and state of repair of bed linens shall equal four demerits.
- (23) Violation of Rule .1617(b) of this Section regarding the cleanliness and cleaning frequency of bed linens shall equal four demerits.
- (24) Violation of Rule .1617(c) of this Section regarding the storage of clean linen shall equal three demerits.
- (25) Violation of Rule .1617(d) of this Section regarding the cleanliness and state of repair of laundry areas and equipment shall equal three demerits.
- (26) Violation of Rule .1618(a) of this Section regarding the state of repair of food utensils and equipment, except temperature holding equipment, shall equal three demerits.
- (27) Violation of Rule .1618(b) of this Section regarding the cleanliness of food utensils and equipment shall equal four demerits.
- (28) Violation of Rule .1618(b) of this Section regarding the cleanliness of the non-food contact sides of equipment shall equal two demerits.
- (29) Violation of Rule .1618(c) of this Section regarding the storage of equipment and utensils shall equal two demerits.
- (30) Violation of Rule .1618(d) of this Section regarding the provisions for ware washing shall equal five demerits.
- (31) Violation of Rule .1618(e) of this Section regarding the cleanliness of food storage areas shall equal three demerits.
- (32) Violation of Rule .1619 of this Section regarding the safety and approved sources of foods shall equal five demerits.
- (33) Violation of Rule .1620(a) of this Section regarding the time and temperature control of food shall equal five demerits.
- (34) Violation of Rule .1620(b) of this Section regarding the prohibitions of live pets shall equal no more than three demerits.
- (35) Violation of Rule .1620(c) of this Section regarding the provisions and state of repair of temperature holding equipment shall equal five demerits.

- (36) Violation of Rule .1620(c) of this Section regarding the availability of accurate temperature indicating devices shall equal no more than two demerits.
- (37) Violation of Rule .1620(d) of this Section regarding the storage of food shall equal four demerits,
- (38) Violation of Rule .1621(a) of this Section regarding handwashing methods shall equal four demerits.
- (39) Violation of Rule .1621(b) of this Section regarding when to wash hands shall equal four demerits.
- (40) Violation of Rule .1621(c) of this Section regarding restricting or excluding employees shall equal five demerits.
- (41) Violation of Rule .1621(d) of this Section regarding cleaning supplies and written procedures for responding to vomiting or diarrheal events shall equal two demerits.

*History Note: Authority G.S. 130A-4; 130A-235; Eff. February 1, 1976; Readopted Eff. December 5, 1977; Amended Eff. July 1, 1993; January 1, 1978; Readopted Eff. April 1, 2024.*

**15A NCAC 18A .1607 FLOORS**

All floors shall be kept clean and in good repair.

*History Note: Authority G.S. 130A-4; 130A-235; Eff. February 1, 1976; Readopted Eff. December 5, 1977; Readopted Eff. April 1, 2024.*

**15A NCAC 18A .1608 WALLS AND CEILINGS**

- (a) The interior walls and ceilings, including doors, window, and window trim, shall be kept clean and in good repair.
- (b) Wall and ceiling attachments, such as light fixtures, fans, and vent covers, shall be kept clean and in good repair.

*History Note: Authority G.S. 130A-4; 130A-235; Eff. February 1, 1976; Readopted Eff. December 5, 1977; Readopted Eff. April 1, 2024.*

**15A NCAC 18A .1609 LIGHTING AND VENTILATION**

- (a) All rooms shall be illuminated by natural or artificial means.
- (b) Ventilation equipment shall be kept clean and in good repair.

*History Note: Authority G.S. 130A-4; 130A-235; Eff. February 1, 1976; Readopted Eff. December 5, 1977; Amended Eff. July 1, 1993; October 1, 1985; July 1, 1984; Readopted Eff. April 1, 2024.*

**15A NCAC 18A .1610 TOILET: HANDWASHING: AND BATHING FACILITIES**

- (a) All residential care facilities shall provide toilet, handwashing, and bathing facilities that are available for use by residents and employees. These facilities shall be kept clean and in good repair.
- (b) All hand sinks and baths shall be supplied with hot and cold running water through mixing devices. The residential care facility shall provide each resident with soap and individual hand-drying towels. These hand-drying towels will be stored separately after being used.

*History Note: Authority G.S. 130A-4; 130A-235; Eff. February 1, 1976; Readopted Eff. December 5, 1977; Readopted Eff. April 1, 2024.*

**15A NCAC 18A .1611 WATER SUPPLY**

- (a) Water supplies at residential care facilities shall meet the requirements in 15A NCAC 18C or 15A NCAC 18A .1700, as applicable. For facilities licensed by the licensing agency before this Rule's effective date, a well that does not meet the setback to building foundation requirements found in 15A NCAC 18A .1720 shall be approved if water sampling in accordance with Paragraph (b) of this Rule indicates the water is safe for human consumption.
- (b) In residential care facilities that use a non-community water supply, a sample of water shall be collected by the Department once a year and submitted to the North Carolina State Laboratory of Public Health or other laboratory certified by the North Carolina State Laboratory of Public Health under 10A NCAC 41C .0102 to perform bacteriological examinations.
- (c) A residential care facility's water supply plumbing shall not include cross-connections as set out in 15A NCAC 18C .0102(c)(8).
- (d) Residential care facilities shall provide water heating facilities. Hot and cold running water under pressure shall be provided to carry out all operations. Hot water shall be provided at temperatures between 105 degrees Fahrenheit and 116 degrees Fahrenheit at handwashing and bathing facilities.

*History Note: Authority G.S. 95-225; 130A-4; 130A-5(3); 130A-230; 130A-235; 130A-236; 130A-248; 130A-257; Eff. February 1, 1976; Readopted Eff. December 5, 1977; Amended Eff. September 1, 1990; July 1, 1984; Temporary Amendment Eff. May 5, 1998; Temporary Amendment Expired January 26, 1999; Temporary Amendment Eff. January 1, 1999; Amended Eff. August 1, 2000; Readopted Eff. April 1, 2024.*

**15A NCAC 18A .1612 DRINKING WATER FACILITIES: ICE HANDLING**

*History Note: Authority G.S. 130A-235; Eff. February 1, 1976; Readopted Eff. December 5, 1977; Amended Eff. September 1, 1990; Repealed Eff. April 1, 2024.*

**15A NCAC 18A .1613 LIQUID WASTES**

All sewage originating from the residential care facility shall be disposed by using a publicly operated sewage treatment plant or in a sewage disposal system that meets the requirements of Section .1900 of this Subchapter.

*History Note: Authority G.S. 130A-4; 130A-235;  
Eff. February 1, 1976;  
Amended Eff. July 1, 1977;  
Readopted Eff. December 5, 1977;  
Amended Eff. July 1, 1984;  
Readopted Eff. April 1, 2024.*

**15A NCAC 18A .1614 SOLID WASTES**

- (a) All solid wastes shall be kept in leak-proof, non-absorbent containers. Waste containers shall be kept clean and in good repair.
- (b) Outside waste containers shall be kept covered with tight-fitting lids when not in use.
- (c) All solid wastes shall be removed from the premises at a frequency that prevents pest harborages.

*History Note: Authority G.S. 130A-4; 130A-235;  
Eff. February 1, 1976;  
Readopted Eff. December 5, 1977;  
Amended Eff. September 1, 1990;  
Readopted Eff. April 1, 2024.*

**15A NCAC 18A .1615 PEST CONTROL AND OUTDOOR PREMISES**

- (a) Pests shall not be present in a residential care facility. Openings to the outside of a residential care facility building or buildings shall be equipped with doors that are flush with the door frame when closed, closed windows, window screening on windows that can be opened, or controlled air currents to prevent pests from entering the building or buildings. The external premises of a residential care facility shall be kept clean, and free of litter and pest harborage. Outdoor furniture and playgrounds shall be kept in good repair.
- (b) Only those pesticides that are registered in accordance with 40 C.F.R. 152 and G.S. 143-442 shall be used at a residential care facility.

*History Note: Authority G.S. 130A-4; 130A-235;  
Eff. February 1, 1976;  
Readopted Eff. December 5, 1977;  
Amended Eff. July 1, 1984;  
Readopted Eff. April 1, 2024.*

**15A NCAC 18A .1616 CHEMICAL AND MEDICATION STORAGE**

Toxic substances, which include corrosive agents, pesticides, bleaches, detergents, cleansers, polishes, and any substance which may be hazardous to a person if ingested, inhaled, or not handled in accordance with the manufacturer's instructions, and all medications, shall be stored and used in accordance with the manufacturer's instructions.

*History Note: Authority G.S. 130A-4; 130A-235;*

*Eff. February 1, 1976;  
Readopted Eff. December 5, 1977;  
Amended Eff. September 1, 1990;  
Readopted Eff. April 1, 2024.*

**15A NCAC 18A .1617 BEDS: LINEN: LAUNDRY: FURNITURE**

- (a) Furnishings, including furniture, curtains, draperies, and blinds, shall be kept clean and in good repair. Mattresses shall be kept clean, dry, and in good repair.
- (b) Clean bed linen in good repair shall be provided for each resident and shall be changed when no longer clean.
- (c) Clean linen shall be stored and handled in a manner to protect from contamination and separate from linen that is not clean.
- (d) Laundry areas and equipment shall be kept clean and in good repair.

*History Note: Authority G.S. 130A-4; 130A-235;  
Eff. February 1, 1976;  
Readopted Eff. December 5, 1977;  
Amended Eff. September 1, 1990;  
Readopted Eff. April 1, 2024.*

**15A NCAC 18A .1618 FOOD SERVICE UTENSILS AND EQUIPMENT**

- (a) All food service equipment and utensils shall be kept clean and in good repair.
- (b) All food contact surfaces of utensils and equipment shall be cleaned after each use.
- (c) Utensils and equipment shall be handled and stored in a manner as to protect from contamination.
- (d) Residential care facilities shall provide a kitchen sink for cleaning food service equipment and utensils.
- (e) Food storage areas shall be kept clean and free of pests.

*History Note: Authority G.S. 130A-4; 130A-235;  
Eff. February 1, 1976;  
Readopted Eff. December 5, 1977;  
Amended Eff. September 1, 1990;  
Readopted Eff. April 1, 2024.*

**15A NCAC 18A .1619 FOOD**

All food provided by a residential care facility for consumption by residents shall comply with Parts 3-1 and 3-2 of the Food Code incorporated by reference at 15A NCAC 18A .2650 as amended by 15A NCAC 18A .2653.

*History Note: Authority G.S. 130A-4; 130A-235;  
Eff. February 1, 1976;  
Readopted Eff. December 5, 1977;  
Amended Eff. September 1, 1990;  
Readopted Eff. April 1, 2024.*

**15A NCAC 18A .1620 FOOD PROTECTION**

- (a) All TCS food shall be maintained at temperatures required by Part 3-501.16 of the Food Code, incorporated by reference at 15A NCAC 18A .2650 as amended by 15A NCAC 18A .2653, during storage, preparation, transportation, display, and service of the TCS food. Time as a public health control as set forth in Part 3-

501.19 of the Food Code incorporated by reference at 15A NCAC 18A .2650 as amended by 15A NCAC 18A .2653, may be used, except that written procedures shall not be required.

(b) Live animals shall not be allowed in any room or area in which food is prepared or stored. Live animals shall be permitted in a residential care facility's dining areas if the live animal does not come into physical contact with residential care facility employees engaged in the preparation or handling of food, serving dishes, utensils, tableware, linens, unwrapped single service and single use articles, or food contact surfaces.

(c) Equipment shall be provided and maintained to keep all food at required temperatures during storage and transport. Cold holding equipment shall be provided with an indicating thermometer that is accurate to  $\pm 3$  degrees Fahrenheit or  $\pm 1.5$  degrees Celsius.

(d) All food shall be stored as required by Parts 3-302.11, 3-302.12, 3-305.11, and 3-305.12 of the Food Code, incorporated by reference at 15A NCAC 18A .2650 as amended by 15A NCAC 18A .2653.

*History Note: Authority G.S. 130A-4; 130A-235; Eff. February 1, 1976; Readopted Eff. December 5, 1977; Amended Eff. October 1, 1993; September 1, 1990; Readopted Eff. April 1, 2024.*

**15A NCAC 18A .1621 EMPLOYEES**

(a) Residential care facility employees shall wash their hands as required by Paragraph (b) of this Rule using the handwashing method required for food employees in Part 2-301.12 of the Food Code incorporated by reference at 15A NCAC 18A .2650 as amended by 15A NCAC 18A .2652.

(b) Residential care facility employees shall wash their hands immediately:

- (1) before beginning work;
- (2) before preparing food;
- (3) after each visit to the toilet;
- (4) before and after resident contact;
- (5) after coughing, sneezing, or using a handkerchief or disposable tissue; and
- (6) after using tobacco, eating, or drinking.

(c) Residential care facility employees shall comply with the requirements for exclusion from work and restriction due to communicable disease or illness required for food employees as set forth in Parts 2-201.12 and 2-201.13 of the Food Code incorporated by reference at 15A NCAC 18A .2650 as amended by 15A NCAC 18A .2652.

(d) The residential care facility shall have gloves, personal protective equipment, disinfectant, individual disposable towels, and a coagulating agent on-site for employees to use and a written procedure for employees to follow when responding to vomitus or fecal matter on facility surfaces. The procedure shall specify the actions that employees shall take to minimize the exposure of employees, residents, guests, food, and additional surfaces to vomitus or fecal matter.

*History Note: Authority G.S. 130A-4; 130A-235; Eff. February 1, 1976; Readopted Eff. December 5, 1977;*

*Amended Eff. September 1, 1990; Readopted Eff. April 1, 2024.*

**15A NCAC 18A .2518 CIRCULATION SYSTEM**

(a) Public swimming pools shall be equipped with a water circulation system.

(b) The water circulation system shall circulate and filter the entire volume of public swimming pool water four times or more in 24 hours. The water circulation system shall be operated 24 hours per day at no more than the maximum velocity allowed under Paragraph (d) of this Rule during the operating dates set out in the permit.

(c) The water circulation system piping shall be designed and installed so that the flow from the public swimming pool shall be from main drains or the surface overflow system. If both main drains and a surface overflow system are used, the water circulation system piping shall be designed such that the flow of water from the public swimming pool is simultaneous from the surface overflow system and the main drains. Skimmer piping constructed after May 1, 2010 shall be sized to handle 100 percent of the flow rate determined by the Registered Design Professional in the pool design. Perimeter overflow system piping constructed after May 1, 2010 shall be sized to handle 100 percent of the flow rate determined by the Registered Design Professional in the pool design. Main drain piping constructed after May 1, 2010 shall be sized to handle 100 percent of the flow rate determined by the Registered Design Professional in the pool design.

(d) Piping shall be designed to carry water at a maximum velocity not to exceed six feet per second for suction piping and not to exceed 10 feet per second for discharge piping, except for copper pipe where the velocity shall not exceed eight feet per second for discharge piping. Piping shall comply with NSF/ANSI Standard 14 Plastics Piping System Components and Related Materials, incorporated by reference, including any subsequent amendments or editions, and available at <http://webstore.ansi.org/> at a cost of one hundred sixty-five dollars (\$165.00), and be free of visible water leaks. Public swimming pools constructed after the effective date of this Rule shall use plastic pipe made of a minimum of Schedule 40 PVC. Flexible pipe shall not be used, except that flexible PVC hoses that meet the requirements of NSF/ANSI/CAN Standard 50 Equipment and Chemicals for Swimming Pools, Spas, Hot Tubs, and Other Recreational Water Facilities, incorporated by reference, including any subsequent amendments or editions, and available at <http://webstore.ansi.org/> at a cost of five hundred eighty dollars (\$580.00)(hereinafter referred to as "NSF Standard 50"), may be used when affixed to spa shells and rigid pipes do not provide the necessary angles to connect water circulation system components. Exposed pipes and valves shall be identified by a color code with a legend or labels.

(e) The water circulation system shall have a strainer with a basket to prevent hair, lint, and other debris from reaching the pump. The owner of the public swimming pool shall keep a spare strainer basket onsite at the public swimming pool. Strainers shall be designed for use in pools with openings not more than 1/4 inch (6.4 mm) in size that provide a free flow area at least four times the cross-section area of the pump suction line and are accessible for daily cleaning.

(f) A swimming pool shall have a vacuum cleaning system to remove debris and foreign material that settles to the bottom of

the swimming pool. Integral vacuum ports shall be located on the pool wall at least six inches and no greater than 18 inches below the water level. Skimmer vacuums may be used when connected to two or fewer skimmers that are isolated from the remaining water circulation system piping. Integral vacuum cleaning systems shall have valves and protective caps. Integral vacuum ports constructed after May 1, 2010 shall have self-closing caps designed to be opened with a tool. Portable vacuum equipment may be used to meet the requirements of this Rule.

(g) A flow meter, reading in gallons per minute, shall be installed in accordance with the manufacturer's instructions. The flow meter shall measure flows between the minimum circulation turnover rate required in Paragraph (b) of this Rule and the maximum velocity permitted under Paragraph (d) of this Rule and shall be accurate within 10 percent of true flow.

(h) A public swimming pool shall have a pump or pumps with capacity to recirculate the public swimming pool water four times or more in 24 hours. The pump or pumps shall not need to be primed, shall be self-priming, or shall utilize an automated priming device labeled for use in public pools by the manufacturer. Any single speed pump shall be capable of maintaining required water turnover based on headloss calculations provided by a professional engineer licensed under G.S. Chapter 89C, the measurements of a flow meter installed in accordance with the manufacturer's instructions, or an assumed total dynamic head of 65 feet of water. Any variable speed pump or single speed pump utilizing a variable frequency drive shall be capable of maintaining water turnover as required by Paragraph (b) of this Rule based on a pump performance curve provided by the manufacturer and shall maintain the flow rate determined by the Registered Designed Professional in the pool design. Pumps shall be certified by NSF International as meeting NSF Standard 50 or verified by an independent third-party testing laboratory to meet provisions of NSF Standard 50 applicable to pumps. Verification conducted by an independent third-party testing laboratory shall include testing and quality control inspections.

(i) All public swimming pools shall be equipped with water return inlets. The water return inlets shall meet the following requirements:

- (1) The water return inlets shall produce a uniform circulation of water and maintain a uniform disinfectant residual throughout the pool;
- (2) There shall be at least one water return inlet per 20 gallons per minute of return water flow with a minimum of four water return inlets for any swimming pool;
- (3) Water return inlets shall be located so that no part of the swimming pool is more than 25 feet of horizontal distance from the nearest water return inlet; and
- (4) Water return inlets shall be replaced when damaged or missing.

(j) Drains shall not be required in public swimming pools when an alternate method to drain the pool is provided. Public swimming pools constructed without main drains shall be designed with water return inlets positioned to return water uniformly throughout the public swimming pool. Public swimming pools constructed with main drains shall have the main

drains installed in accordance with the manufacturer's instructions and meet the following requirements:

- (1) Public swimming pools with main drains shall be provided with one or more unblockable drains or two or more main drains located at the deepest section of the pool on a horizontal plane and connected by symmetrical "T" piping. Except when unblockable drains are used, piping between main drains shall be sized and configured such that blocking any one drain will not result in flow through the remaining drain covers exceeding the manufacturer's flow rating while handling 100 percent of the pump's maximum flow. Dual main drains connected by "T" piping shall be spaced not more than 30 feet apart, and not more than 15 feet away from the side walls of the pool. Main Drains shall be separated by at least three feet measured from the centers of the drain covers or installed with one main drain on a horizontal plane and one main drain on a vertical plane. Main drains with two or more outlets with a common suction line shall not be equipped with valves that allow the outlets to be isolated. Public swimming pools constructed prior to May 1, 2010 with a single drain or multiple drains closer than three feet apart shall protect against bather entrapment with an unblockable drain cover or a secondary method of preventing bather entrapment in accordance with Rule .2539 of this Section.
- (2) Drain outlets shall comply with the ANSI/APSP/ICC-16 2017 American National Standard for Suction Outlet Fittings Assemblies (SOFA) for Use in Pools, Spas, and Hot Tubs, which is hereby incorporated by reference, including any subsequent amendments or editions, and available at <https://webstore.ansi.org/> at a cost of one hundred sixty-five dollars (\$165.00).
- (3) Public swimming pool drains shall comply with ANSI/PHTA/ICC-7 2020 American National Standard for Suction Entrapment Avoidance in Swimming Pools, Wading Pools, Spas, Hot Tubs and Catch Basins, which is hereby incorporated by reference, including any subsequent amendments or editions, and available at [https://webstore.ansi.org](https://webstore.ansi.org/) at a cost of one hundred and sixty-five dollars (\$165.00)(hereinafter referred to as "ANSI/PHTA/ICC-7").
- (k) Public swimming pools shall have a surface overflow system that is an integral part of the water circulation system and that consists of a built-in-place perimeter overflow system, a pre-fabricated perimeter overflow system, or recessed automatic surface skimmers. The surface overflow system shall comply with the following:
  - (1) When a public swimming pool uses a built-in-place perimeter overflow system or a pre-fabricated perimeter overflow system, the

public swimming pool may be designed with the operating water level, perimeter overflow system, and deck at the same elevation. The perimeter overflow system shall:

- (A) Be capable of handling 100 percent of the flow rate determined by the Registered Design Professional in the pool design without flooding the overflow troughs;
  - (B) Be capable of handling a water surge equal to one gallon per square foot, or 41 liters per square meter, of swimming pool water surface area. A surge tank may be used to meet this requirement;
  - (C) Be capable of maintaining the water level of the swimming pool above the level of the overflow rim of the perimeter overflow system, except for time intervals of no more than 20 minutes when water is transferred between a surge tank and the public swimming pool;
  - (D) Be constructed so the dimensional tolerance of the overflow rim shall not exceed ¼ inch (6.4 mm) as measured between the highest point and the lowest point of the overflow rim;
  - (E) Be capable of providing continuous and automatic skimming of the water during quiescence;
  - (F) Be constructed so that the overflow troughs are installed continuously around the perimeter of the public swimming pool, except at steps, recessed ladders, and stairs, or except when used in combination with recessed automatic surface skimmers; and
  - (G) Provide a hand-hold on the exposed surfaces of the overflow trough.
- (2) When a public swimming pool uses recessed automatic surface skimmers, the recessed automatic surface skimmers shall be designed and constructed in accordance with NSF Standard 50 requirements for water circulation system components for swimming pools, spas, or hot tubs and be installed as follows:
- (A) The rate of water flowing through any one recessed automatic surface skimmer shall be no less than 20 gallons per minute and no more than the maximum flow the skimmer is certified to handle under NSF Standard 50;
  - (B) There shall be at least one recessed automatic surface skimmer for each 400 square feet of water surface area

of the swimming pool or fraction thereof;

- (C) When two or more recessed automatic surface skimmers are required, they shall be located to enable skimming of the entire swimming pool water surface;
- (D) Skimmers shall not protrude into the water of the public swimming pool. Pools using recessed automatic surface skimmers without a perimeter overflow system shall be installed so that the operating water level of the pool is no more than nine inches below the level of the finished deck.

(l) Where flooded suction on the pump is not possible to prevent cavitation and loss of prime, skimmers shall have a device or other protection to prevent air entrainment in the suction line. Skimmer equalizer lines shall be in compliance with ANSI/PHTA/ICC-7 or disabled. Skimmer equalizer lines shall be disabled by plugging the line under the skimmer basket and where the equalizer pipe exits the pool shell.

(m) Nothing in this Section shall preclude the use of a surface overflow system that combines both a perimeter overflow system and a recessed automatic surface skimmer or skimmers that meet the requirements of this Rule.

*History Note: Authority G.S. 130A-282; Eff. May 1, 1991; Amended Eff. May 1, 2010; February 1, 2004; April 1, 1999; January 1, 1996; July 1, 1992; Readopted Eff. November 1, 2024.*

**15A NCAC 18A .2539 SUCTION HAZARD REDUCTION**

(a) At all public wading pools that use a single main drain for circulation of water, signs shall be posted stating, "WARNING: To prevent serious injury do not allow children in wading pool if drain cover is broken or missing." Signs shall be in letters at least one-half inch in height and shall be posted where they are visible to people entering the wading pool. Submerged suction outlets shall be prohibited in wading pools in accordance with ANSI/PHTA/ICC-7 2020 American National Standard for Suction Entrapment Avoidance in Swimming Pools, Wading Pools, Spas, Hot Tubs, and Catch Basins, which is incorporated by reference, including any subsequent amendments or editions, and available at <https://webstore.ansi.org/> at a cost of one hundred and sixty five dollars (\$165.00)(hereinafter referred to as "ANSI/PHTA/ICC-7").

(b) All submerged suction outlets in public swimming pools other than vacuum ports shall be protected by a cover in compliance with ANSI/APSP/ICC-16 2017 (PA 2021) American National Standard for Suction Outlet Fitting Assemblies (SOFA) for Use in Pools, Spas, and Hot Tubs, which is hereby incorporated by reference, including any subsequent amendments or editions, and available at <https://webstore.ansi.org/> at a cost of one hundred and sixty five dollars (\$165.00)(hereinafter referred to as "ANSI/APSP/ICC-16"). All submerged suction fittings shall be installed in accordance with the manufacturer's instructions.

(c) Public swimming pools that have a single main drain or single submerged suction outlet other than an unblockable drain, or that have multiple outlets in the same plane separated by less than three feet, measured from the centers of the covers, shall have one or more secondary methods of preventing bather entrapment. Secondary methods of preventing bather entrapment include:

- (1) A safety vacuum release system which ceases operation of the water pump, reverses the circulation flow, or otherwise provides a vacuum release at the suction outlet when a blockage has been detected, and that has been tested by a third party and found to conform with ANSI/PHTA/ICC-7. The operator of the public swimming pool shall test an installed safety vacuum release system using the methodology and at the frequency recommended by the manufacturer, and the test dates and results shall be recorded in the written records required by Rule .2535(11) of this Section. Safety vacuum release systems installed or replaced after the effective date of this Rule shall have a shut off valve for testing the device, if recommended by the manufacturer;
- (2) A suction-limiting vent system with an atmospheric opening inaccessible to the public;
- (3) A gravity drainage system that utilizes a surge tank;
- (4) An automatic pump shut-off system;
- (5) Disabling the submerged suction outlet; or
- (6) Any other system that complies with ANSI/PHTA/ICC-7.

(d) Owners of all public swimming pools shall provide documentation to the Department, as part of the application for an operation permit under Rule .2510(c) of this Section, to verify suction outlet safety compliance. This documentation shall include:

- (1) Documentation of the maximum possible flow rate for each [pump] with a submerged suction outlet. This shall be the pump's maximum flow shown on the manufacturer's pump performance curve except where flow reductions are justified with total dynamic head measurements or calculations. Flow reduction measurement documentation shall include photographs taken within two hours of backwashing or replacing the filter with all valves in the fully open position that show the levels of all the gauges used in the public swimming pool. All systems using a flow reduction to comply with this rule shall have a flow meter installed in accordance with manufacturer's instructions confirming that the water flow does not exceed the gallon per minute flow rating of the drain covers or a sealed statement from a Registered Design Professional showing calculations used to justify the reduction;

- (2) Documentation that drain covers are in compliance with ANSI/APSP/ICC-16 and the manufacturer's instructions. This includes documentation that each drain cover on a single or dual drain submerged suction outlet is rated to meet or exceed the pump's maximum flow or the measured flow of the water through the submerged suction outlets. Drain covers on a submerged suction system with three or more suction outlets shall together be rated to meet or exceed the pump's maximum flow with one drain completely blocked, unless the combined flow of all unblockable drains meet or exceed the pump's maximum flow or the measured flow of the water; and

- (3) Documentation that drain sumps meet the dimensional requirements specified in the drain cover manufacturer's installation instructions.

(e) Operators of all public swimming pools shall inspect pools daily to ensure the drain covers are not missing, broken, or cracked and are securely attached. The operator shall close the public swimming pool until missing, broken, or cracked suction fittings are replaced and loose suction fittings are resecured.

*History Note: Authority G.S. 130A-282; Temporary Adoption Eff. June 1, 1994 for a period of 180 days or until the permanent rule becomes effective, whichever is sooner; Eff. October 1, 1994; Amended Eff. May 1, 2010; January 1, 2006; February 1, 2004; April 1, 1999; Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. July 20, 2019; Amended Eff. November 1, 2024.*

**TITLE 21 - OCCUPATIONAL LICENSING BOARDS AND COMMISSIONS**

**CHAPTER 02 – BOARD OF ARCHITECTURE AND REGISTERED INTERIOR DESIGNERS**

**21 NCAC 02 .0108 FEES**

The fees required by the Board are set forth below:

Initial License to Practice Architecture:	
By Exam	\$55.00
By Reciprocity	\$155.00
Architecture Firm License	\$100.00

Annual License to Practice Architecture Renewal:	
Individual	\$55.00
Firm	\$125.00

Late Renewal Penalty for Individual Architects and Firms:	
Up-to-30 days	\$55.00
30 days to 1 year	\$110.00

Reinstatement of Expired License:	
Individual Architect	\$260.00

Architecture Firm	\$300.00
Initial Registration to Practice Interior Design:	
For NCIDQ Certified Individual	\$155.00
Firm Registration	\$100.00
Addition of Interior Design Firm Registration for Currently Licensed Architecture Firms	\$50.00
Annual Registration to Practice Interior Design Renewal:	
Individual	\$55.00
Firm	\$125.00
Late Renewal Penalty for Interior Designers and Interior Design Firms:	
Up-to-30 days	\$55.00
30 days to 1 year	\$110.00
Reinstatement of Expired Registration	
Interior Designer Individual	\$260.00
Interior Design Firm	\$300.00

All fees paid to the Board are non-refundable.

*History Note: Authority G.S. 55B-10; 83A-4; 83A-11; Eff. February 1, 1976; Readopted Eff. September 29, 1977; Amended Eff. July 1, 2014; December 1, 2010; June 1, 1995; December 1, 1992; May 1, 1991; May 1, 1989; July 1, 1987; Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. January 13, 2015; Amended Eff. November 1, 2017; Temporary Amendment Eff. November 30, 2021; Amended Eff. April 1, 2024; June 1, 2022.*

**21 NCAC 02 .0201 ARCHITECT, REGISTERED INTERIOR DESIGNER, FIRM OR PARTNERSHIP CONTACT INFORMATION AS ON FILE WITH THE BOARD**

(a) Every individual licensee and registrant shall keep the Board advised of his or her preferred current contact information. Current contact information includes a physical mailing address, email, phone numbers, and the name of the firm or partnership where he or she is employed. Every individual licensee and registrant shall notify the Board in writing of all changes to contact information within 30 days of such changes.

(b) The licensee or registrant shall give notice in writing to the Board of the following within 30 days of the following adverse actions:

- (1) the filing of any criminal charges against the licensee or registrant and, if so, the jurisdiction, charge, and case number of each such charge;
- (2) any conviction of, or plea of nolo contendere by, the licensee or registrant for a felony or misdemeanor under any laws and, and, if so, the jurisdiction, charge, case number, and date of each such criminal conviction;
- (3) the filing of any disciplinary action, charges, or contested case proceeding against the licensee or registrant before any court, board, agency, or

professional organization for unprofessional conduct, dishonest or fraudulent practice, or incompetent practice and, if so, the jurisdiction, charge, and case number of each such pending action;

(4) the finding by any court, board, agency, or professional organization that the licensee or registrant is guilty of unprofessional conduct, dishonest or fraudulent practice, or incompetent practice and, if so, the jurisdiction, charge, case number, and date of such adverse action;

(5) any denial, limitation, reprimand, suspension, or revocation taken against the licensee or registrant's credentials, to include a statement providing the reason for the adverse action; the date and jurisdiction in which the adverse action occurred; the terms of the adverse action imposed;

(6) whether the terms of the adverse action have been satisfied; and

(7) whether any liens or judgments have been filed or entered against the licensee or registrant and, if so, the jurisdiction, date, and parties involved with such lien or judgment.

(c) Each firm or partnership shall, within 30 days, notify the Board of all changes in ownership, association, contact information, email, or physical address. Upon the dissolution of a firm, the architect or registered interior designer in responsible control of the firm at the time of dissolution shall notify the Board within 30 days concerning such dissolution and of the succeeding status and addresses of the architects and registered interior designers employed by the firm.

(d) Each licensed or registered firm shall give notice in writing to the Board of the following within 30 days of the following adverse actions:

(1) the filing of any criminal charges against the firm or any of its owners and, if so, the jurisdiction, charge, and case number of each such charge;

(2) any conviction of, or plea of nolo contendere by, the firm or any of its owners for a felony or misdemeanor under any laws and, and, if so, the jurisdiction, charge, case number, and date of each such criminal conviction;

(3) the filing of any disciplinary action, charges, or controversy against the firm or any of its owners before any court, board, agency, or professional organization for unprofessional conduct, dishonest or fraudulent practice, or incompetent practice and, if so, the jurisdiction, charge, and case number of each such pending action;

(4) the finding by any court, board, agency, or professional organization that the firm or any of its owners is guilty of unprofessional conduct, dishonest or fraudulent practice, or incompetent practice and, if so, the jurisdiction, charge, case number, and date of such adverse action;

- (5) any denial, limitation, reprimand, suspension, or revocation taken against the firm's credentials or that of any of its owners, to include a statement providing the reason for the adverse action; the date and jurisdiction in which the adverse action occurred; the terms of the adverse action imposed; and whether the terms of the adverse action have been satisfied; and
- (6) whether any liens or judgments have been filed or entered against the firm or any of its owners and, if so, the jurisdiction, date, and parties involved with such lien or judgment.

- (3) having obtained advice, a licensee or registrant shall not design a project in violation of laws and rules.
- (3) In practicing architecture or interior design, the licensee or registrant shall act with reasonable care and competence and shall apply the technical knowledge and skill which is ordinarily applied by architects or interior designers of good standing.
- (4) Responsible Control. "Responsible Control" means responsibility for exercising the ultimate authority over, and possessing the knowledge and ability to oversee, delegate, and integrate the design and technical decisions related to the preparation of the project's instruments of service and the project's implementation in conformance with the standard of care. Instruments of service are defined as the collection of documents, drawings, specifications, calculations, and other tangible materials produced by design professionals during the various stages of a project. Standard of care is defined as the care usually exercised by one in the profession, on the same type of project, at the same time and in the same place, under similar circumstances and conditions. No architect or registered interior designer shall affix his or her seal and signature to contract documents developed by others not under the architect's or registered interior designer's responsible control.

*History Note: Authority G.S. 83A-5; 83A-6; Eff. February 1, 1976; Readopted Eff. September 29, 1977; Amended Eff. November 1, 2010; June 1, 1995; Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. January 13, 2015; Temporary Amendment Eff. November 30, 2021; Amended Eff. April 1, 2024; June 1, 2022.*

**21 NCAC 02 .0203      RULES OF PROFESSIONAL CONDUCT**

All persons licensed or registered under the provisions of Chapter 83A of the North Carolina General Statutes are charged with having knowledge of the rules of this Chapter and are deemed to be familiar with their provisions and to understand them. Each licensed or registered person and entity shall sign a statement on the renewal notice affirming understanding of the laws and rules.

- (1) Licensees and registrants shall conduct their practice in order to safeguard life, health and property as provided in G.S. 83A-12. The licensee or registrant shall always recognize the primary obligation to protect the public in the performance of the professional duties. If the licensee or registrant's professional judgment is overruled under circumstances where the licensee or registrant, in their professional judgment, believes health, safety, and welfare of the public are endangered, the licensee or registrant shall inform the employer, the client, the contractor, other affected parties, and any appropriate regulatory agency of the possible consequences of the situation.
- (2) In designing a project, the licensee or registrant shall consider all applicable federal, State and municipal building laws and rules. A licensee or registrant shall undertake to perform professional services only when they, together with those whom the licensee or registrant may engage as consultants, are qualified by education, training and experience in the specific technical areas involved. While a licensee or registrant may rely on the advice of other professionals such as attorneys, engineers, or other qualified persons as to the intent and meaning of such laws and rules, once

- (5) An architect or registered interior designer shall not deliberately make a false statement or deliberately fail to disclose a fact requested in connection with their application for license or registration renewal.
- (6) An architect or registered interior designer shall not assist in the application for licensure or registration of a person known by the architect or registered interior designer to be unqualified with respect to education, training, experience, or character.
- (7) An architect or registered interior designer shall issue public statements only in an unbiased and truthful manner and:
  - (a) shall be objective and truthful in all professional reports, statements, or testimony. The architect or registered interior designer shall include all relevant and pertinent information in such reports, statements or testimony;
  - (b) when serving as an expert or technical witness before any court, commission, or other tribunal, shall express an opinion only when it is founded upon knowledge of the facts at issue, upon a background of technical competence in the subject matter, and of the

- accuracy and propriety of the individual's testimony;
  - (c) shall issue no statements, criticisms, or arguments on architectural or interior design matters connected with public policy which are inspired or paid for by an interested party, or parties, unless the architect or registered interior designer has prefaced the comment by explicitly identifying their name, by disclosing the identities of the party or parties on whose behalf the architect or registered interior designer is speaking, and by revealing the existence of any pecuniary interest the architect or registered interior designer may have in the matters; and
  - (d) shall not attempt to harm the professional reputation, prospects, practice, or employment of another architect or registered interior designer, nor indiscriminately criticize another architect's or registered interior designer's work. Indiscriminate criticism is a statement without basis or cause or that is not objective and truthful or that fails to include all factual information. If the architect or registered interior designer believes that another architect or registered interior designer is in violation of G.S. 83A or the Rules of this Chapter, such information shall be presented to the North Carolina Board of Architecture and Registered Interior Designers in writing.
- (8) An architect or registered interior designer shall avoid conflicts of interest and:
- (a) shall inform the employer or client, and any reviewing agency, of any business association, interests, or circumstances that attempts to influence the judgment or the quality of services of the architect or registered interior designer. If, in the course of their work on a project, an architect or registered interior designer becomes aware of a decision taken by their employer or client, against their advice, which violates applicable State or municipal building laws or federal regulations and which will, in their judgment, affect adversely the safety to the public of the finished project, the architect or registered interior designer shall:
    - (i) report the decision to the local building inspector or other public official charged with the enforcement of the applicable State or municipal building laws and regulations;
    - (ii) refuse to consent to the decision;
    - (iii) in circumstances where the architect or registered interior designer reasonably believes that other such decisions will be taken notwithstanding his or her objection, terminate their services with reference to the project; and
    - (iv) in the case of termination in accordance with clause in Sub-Item (a)(iii) of this Rule, the architect or registered interior designer shall have no liability to his or her client or employer on account of such termination.
  - (b) shall not accept compensation, financial or otherwise, from more than one party for services on the same project, or for services pertaining to the same project, unless the circumstances are disclosed to, and agreed to, in writing, by all interested parties;
  - (c) shall not solicit or accept financial or other valuable considerations from material, furniture, fixtures, or equipment suppliers for specifying their products unless disclosed to the client;
  - (d) shall not pay or offer to pay, a commission, political contribution, gift, or other consideration in order to secure work. Gifts of nominal value including entertainment and hospitality are permitted;
  - (e) when in public service as a member, advisor, or employee of a governmental body or department, shall not participate in considerations or actions with respect to services provided by the licensee or registrant or the licensee's or registrant's firm in private architectural or registered interior design practices;
  - (f) shall not engage in any false, deceptive, fraudulent, or misleading advertising;
  - (g) shall not attempt to supplant another architect or registered interior designer on a specific project after becoming



- business venture by any person or firm which the licensee or registrant knows, or has reason to believe, is engaging in business or professional practices of a fraudulent or dishonest nature or is not licensed or registered;
- (b) if the licensee or registrant has knowledge or reason to believe that another person or firm may be in violation of the rules of this Chapter or of the North Carolina Architectural and Registered Interior Design Practice Act (G.S. 83A), they shall present such information to the Board in writing and shall cooperate with the Board in furnishing further information or assistance as may be required by the Board.
- (c) An architect or registered interior designer shall cooperate with the Board in connection with any inquiry it shall make. Cooperation includes responding to all inquiries from the Board or its representative and claiming correspondence from the U. S. Postal Service, or other delivery service, sent to the licensee or registrant from the Board in a timely manner. The Board shall utilize electronic mail as its primary method of communication with licensees and registrants. "Timely" is defined as within the time specified in the correspondence, or if no time is specified, within 15 business days of receipt.
- (11) An architect or registered interior designer who has received a reprimand or civil penalty or whose professional license or registration is revoked, suspended, denied, refused renewal, refused reinstatement, put on probation, restricted, or surrendered as a result of disciplinary action by another jurisdiction is subject to discipline by the Board if the licensee's or registrant's action constitutes a violation of G.S. 83A or the rules of this Chapter adopted by the Board.
- (12) In addition to the grounds stated in G.S. 83A-14 and G.S. 83A-15(3), the following acts or omissions may be deemed to be "unprofessional conduct" and to be cause for the levy of a civil penalty or for denial, suspension, or revocation of a license or registration or firm certificate of licensure or registration to practice architecture or registered interior design:
- (a) An architect or registered interior designer shall not, in the conduct of their professional practice, knowingly violate any State or federal criminal law. A criminal conviction shall be deemed prima facie evidence of knowingly violating the law.
- (b) Evasion of professional duties.
- (i) An architect or registered interior designer shall not, through employment by contractors whether or not the contractors are licensed under G.S. 87, or by another individual or entity not holding an individual or firm registration from the Board, enable the employer to offer or perform architectural services or registered interior design services. In design/build arrangements, the architect or registered interior designer shall not be an employee of a person or firm not holding a license to practice architecture or registered interior design in North Carolina.
- (ii) An architect or registered interior designer shall not furnish limited services in such manner as to enable owners, draftsmen, or others to evade the public health and safety requirements of Chapter 83A, G.S. 133-2, G.S. 153A, G.S. 153A-357, G.S. 160A-412, or G.S. 160A-417.
- (iii) When building plans are begun or contracted for by persons not licensed or registered and qualified, an architect or registered interior designer shall not take over, review, revise, or sign or seal such drawings or revisions thereof for such persons or do any act to enable either persons or the project owners to evade the requirements of Chapter 83A, G.S. 133-2, G.S. 153A-357, or G.S. 160A-417.
- (c) It is unprofessional conduct for an architect or registered interior designer to be found by a court to have infringed upon the copyrighted works of other architects, registered interior designers or other design professionals.

- (13) An architect, registered interior designer or firm shall not maintain or represent by sign, listing, or other manner that they have a physical presence in North Carolina unless such office employs a licensed architect or registered interior designer who is a resident in North Carolina whose principal place of business takes place in that office. This item does not apply to on-site project offices during construction of a project.
- (14) An architect or registered interior designer shall not knowingly continue to offer or render architectural or registered interior design services as set forth in G.S. 83A after their license or registration expires, is placed on delinquent status, is revoked, or suspended for failure to renew.
- (15) Architects or registered interior designers preparing plans for building permits shall submit plans that are complete and buildable. Such plans shall conform with the State Building Code and local plan submission requirements. Professional judgment shall be exercised to reflect sufficient documentation necessary for plan approval. Provided, however, this Rule does not alter any standard of liability applicable to licensees or registrants.

- an architect if the architect has reviewed and adopted in whole or in part such portions and has integrated them into his or her work.
- (2) A registered interior designer may seal those portions of the professional work that were prepared by or under the responsible control of persons who are registered interior designers in this State if the registered interior designer has reviewed in whole or in part such portions and has either coordinated their preparation or integrated them into their work
- (3) Individual Architect Seal Design shall be as follows:
  - (A) The seal may be a rubber stamp, embossed seal, computer-generated seal, or other facsimile that becomes a permanent addition to original paper drawings or sets of specifications for use in this State. For the purposes of this Rule, the term "for use in this State" means drawings and sets of specifications prepared for bidding, procurement, permitting, or for construction. For purposes of this Rule, "original" means the version of drawings and sets of specifications from which all paper copies can be made.
  - (B) The standard design of the seal shall be two concentric circles in which "North Carolina" and the name of the licensee are placed within the outermost circle and in which the license number of the licensee and "Licensed Architect" placed within the innermost circle. The size shall be 1 ½ to 1 ¾ inches in diameter.
  - (C) The original, handwritten signature of the individual named on the seal shall be considered part of the individual seal and shall appear across the face of each original seal imprint along with the date of affixation. The use of signature reproductions such as rubber stamps, computer generated, or other facsimiles on paper copies are not permitted in lieu of actual handwritten and hand dated signatures.
- (4) Architecture Firm Seal Design shall be as follows:
  - (A) The seal may be a rubber stamp, embossed seal, computer-generated seal, or other facsimile that becomes a permanent addition to paper drawings or sets of specifications.
  - (B) The design of the firm seal shall be two concentric circles in which the architectural firm's approved name

*History Note: Authority G.S. 83A-6; 83A-14; 83A-15; 83A-16; Eff. February 1, 1976; Readopted Eff. September 29, 1977; Amended Eff. May 1, 1989; November 1, 1979; Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. January 13, 2015; Temporary Amendment Eff. November 30, 2021; Amended Eff. April 1, 2024; June 1, 2022.*

**21 NCAC 02 .0206 REQUIREMENT FOR AND USE OF PROFESSIONAL SEAL BY AN ARCHITECT OR REGISTERED INTERIOR DESIGNER**

(a) An architect shall seal his or her work whether or not the work is for an exempt project as defined in G.S. 83A-13. An architect shall not sign nor seal drawings, specifications, reports, or other professional work that were not prepared by the architect or under his or her responsible control. Documents shall be sealed as follows:

- (1) An architect may seal those portions of the professional work that:
  - (A) were prepared by or under the responsible control of persons who are licensed architects in this State if the architect has reviewed in whole or in part such portions and has either coordinated their preparation or integrated them into his or her work; and
  - (B) are not required by law to be prepared by or under the responsible control of

shall be between the inner and outer circles and the firm's license number is placed within the innermost circle. The size shall be 1 ½ to 1 ¾ inches in diameter. For a Professional Corporation the words "Architectural Corporation, North Carolina" shall be along the inside perimeter of the inner circle. For a Professional Limited Liability Company, the words "Architectural Company" shall be along the inside perimeter of the inner circle.

(5) Individual Registered Interior Designer Seal Design shall be as follows:

(A) The seal may be a rubber stamp, embossed seal, computer-generated seal, or other facsimile that becomes a permanent addition to original paper drawings or sets of specifications for use in this State. For the purposes of this Rule, the term "for use in this State" means drawings and sets of specifications prepared for bidding, procurement, permitting, or for construction. For purposes of this Rule, "original" means the version of drawings and sets of specifications from which all paper copies can be made.

(B) The standard design of the seal shall be two concentric ovals in which "North Carolina" and the name of the registrant are placed within the outermost oval and in which the registration number of the registrant and "Registered Interior Designer" be placed within the innermost oval. The dimensions shall be two inches tall by 2.75 inches wide.

(C) The original, handwritten signature of the individual named on the seal shall be considered part of the individual seal and shall appear across the face of each original seal imprint along with the date of affixation. The use of signature reproductions such as rubber stamps, computer generated, or other facsimiles on paper are not permitted in lieu of actual handwritten and hand dated signatures.

(6) Registered Interior Design Firm Seal Design shall be as follows:

(A) The seal may be a rubber stamp, embossed seal, computer-generated seal, or other facsimile that becomes a permanent addition to drawings or sets of specifications.

(B) The design of the seal shall be two concentric ovals in which the registered interior design firm's approved name shall be between the inner and outer ovals and the firm's registration number is placed within the innermost oval. The size shall be 2 to 2 ¾ inches in diameter. For a Corporation the words "Registered Interior Design Corporation, North Carolina" shall be along the inside perimeter of the inner circle. For a Limited Liability Company, the words "Registered Interior Design Company" shall be along the inside perimeter of the inner oval.

(7) Architects and registered interior designers shall affix their seal on one original of all their drawings and sets of specifications prepared by them for use in this State as follows:

(A) on the cover sheet of each design and on each drawing prepared by the architect or registered interior designer for the design;

(B) on the index page identifying each set of specifications; and

(C) on the index page of all other technical submissions. For the purposes of this Rule, "technical submissions" refer to plans, drawings, specifications, studies, addenda, and other technical reports prepared in the course of practicing architecture or registered interior design.

(8) Presentation documents, such as renderings created by an architect or registered interior designer used to communicate conceptual information, shall not be sealed or signed.

(9) Documents considered incomplete by the architect or registered interior designer may be released for interim review without the architect's or registered interior designers seal or signature affixed, but shall be dated, bear the architect's or registered interior designer's name, and be marked or designated as follows "Incomplete - for interim review only and not intended for bidding, procurement, permit, or construction purposes."

(10) Those sheets or pages prepared by licensed professional consultants, such as structural, mechanical or electrical engineers, retained by the architect or registered interior designer shall bear the seal and registration or license number of the consultant responsible therefore and shall not be sealed by the architect or registered interior designer.

(11) The use of the prescribed seal on paper is an individual act whereby the architect or registered interior designer must personally

sign over the imprint of the seal. By sealing documents for use in this State, an architect or registered interior designer is representing that he or she is in responsible control over the content of such documents and has applied the required professional standard of care. The architect or registered interior designer is responsible for security of the seal when not in use.

(12) Use of Firm Seal. The use of the firm seal does not replace the statutory requirement for an architect's or registered interior designer's individual seal as required in Rule .0203(4) of this Chapter. The firm seal must be affixed in addition to the individual seal on the cover sheet. A firm shall designate a principle or other authorized individual to be responsible for the security of the firm seal.

(b) Prototypical building design documents prepared by architects or registered interior designers who are licensed or registered in this State or in their state of origin may be sealed by a succeeding licensed architect or registered interior designer in North Carolina provided:

- (1) the seal of the original architect or registered interior designer appears on the documents to authenticate authorship;
- (2) the words "Prototypical Design Documents/Not for Construction" appear on each sheet of the documents by the original architect or registered interior designer;
- (3) the succeeding North Carolina architect or registered interior designer identifies all modifications to the standard design documents;
- (4) the succeeding North Carolina architect or registered interior designer assumes responsibility for the adequacy of the design for the specific application in North Carolina and for the design conforming with applicable building codes, local conditions, site condition; and
- (5) the succeeding North Carolina architect or registered interior designer affixes his or her seal to the prototypical design documents with a statement as follows: "These documents have been examined by the undersigned. I have determined that they comply with existing local North Carolina codes, and I assume responsibility for the adequacy of the design for the specific application in North Carolina."

(c) Post construction record drawings prepared by an architect or registered interior designer, but based upon representations of contractors, are not plans that are for "bidding, procurement, permit, or construction purposes" and therefore shall not be sealed by the architect or registered interior designer. Post construction record drawings shall bear the name of the architect or registered interior designer and include language that states "these drawings are post construction record drawings and are based in part upon

the representations of others and are not for bidding, procurement, permit, or construction purposes."

(d) Documents to be electronically transmitted beyond the direct control of the licensee or registrant that are signed using a digital signature, shall contain the authentication procedure in a secure mode and a list of the hardware, software, and parameters used to prepare the document(s). Secure mode means that the authentication procedure has protective measures to prevent alteration or overriding of the authentication procedure. The term "digital signature" shall be an electronic authentication process that is attached to or logically associated with an electronic document. Unlocked copies of sealed construction documents may be provided to entities to allow for electronic usage where document content is not effectively being altered, such as when presented for plan review approval stamps or contractor material takeoffs. An effective alteration means a change that may impact health, safety, or welfare, such as a change to egress or a change to window placement. The digital signature shall be:

- (1) Unique to the person using it;
- (2) Capable of verification;
- (3) Under the sole control of the person using it; and
- (4) Linked to a document in such a manner that the digital signature is invalidated if any data in the document is changed.

(e) Documents for use in this State, that are transmitted electronically beyond the direct control of the licensee or registrant shall have the computer-generated image of the seal removed from the original file, unless signed with a digital signature as defined in this Rule. After removal of the image of the seal the electronic media shall have the following inserted in lieu of the signature and date: "This document was originally issued and sealed by (name of sealer), (license or registration number), on (date of sealing). This medium shall not be considered a certified document." Hardcopy documents containing the original seal, signature and date of the licensee or registrant may be duplicated by photocopy or electronic scanning processes and distributed either in hardcopy or electronic medium. The scanned digital files of certified documents are not subject to the requirements of this Paragraph. The electronic transmission beyond the direct control of the licensee or registrant of Computer Aided Design (CAD), vector, or other files subject to easy editing are subject to the requirements of this Paragraph. A file subject to "easy editing" is one consisting of separate elements that can be individually modified or deleted. Documents that are excepted from certification by a statement meeting the following requirements are not subject to the requirements of this Paragraph:

- (1) "Preliminary - Do not use for construction";
- (2) "Progress Drawings - Do not use for construction";
- (3) "Final Drawing - Not released for construction";
- (4) "Final Drawing - For Review Purposes Only";
- (5) "Not a Certified Document – This document was originally issued and sealed by (name of licensee or registrant), (license or registration number), on (date of sealing). This document shall not be considered a certified document";

- (6) "Not a Certified Document as to the Original Document but Only as to the Revisions - This document originally issued and sealed by (name of licensee or registrant), (license or registration number), on (date of sealing). This document is only certified as to the revisions".

*History Note: Authority G.S. 83A-6; 83A-10; 83A-12; Eff. February 1, 1976; Readopted Eff. September 29, 1977; Amended Eff. December 1, 2010; July 1, 2006; October 1, 1995; July 1, 1993; May 1, 1989; October 1, 1985; Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. January 13, 2015; Amended Eff. April 1, 2024; June 1, 2022; November 1, 2017.*

**21 NCAC 02 .0210 INCOMPETENCE**

- (a) No person shall be permitted to practice architecture or registered interior design if such person is found by a licensed physician or court of law to be impaired in his or her ability to practice the profession because of physical or mental disability.  
 (b) No person shall be permitted to practice architecture or registered interior design if such person is found insane or incompetent by a court of law.

*History Note: Authority G.S. 83A-6; 83A-14; 83A-15; Eff. February 1, 1976; Readopted Eff. September 29, 1977; Amended Eff. July 1, 2006; June 1, 1995; May 1, 1989; November 1, 1979; Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. January 13, 2015; Temporary Amendment Eff. November 30, 2021; Temporary Amendment Expired Eff. September 11, 2022; Amended Eff. April 1, 2024.*

**21 NCAC 02 .0213 INDIVIDUAL LICENSES AND REGISTRATIONS**

(a) Renewal. The license to practice architecture or interior design registration must be renewed on or before the first day in July each year. Continued practice after such date shall constitute unlawful practice as set forth in G.S. 83A-12 and may be grounds for disciplinary action. No less than 30 days prior to the renewal date, the Board shall send a notice of renewal to each individual licensee or registrant via electronic mail. The licensee or registrant shall submit to the Board the completed license or registration renewal documentation, along with the annual license or registration renewal fee. The Board shall not accept incomplete renewal documentation. If the accompanying payment in the amount of the renewal fee is dishonored by the licensee or registrant's drawee bank for any reason, the Board shall suspend the license or registration until the renewal fees and check charges are paid. When the annual renewal has been completed according to the provisions of G.S. 83A-11, as well as Section .0900 of this Chapter, the Executive Director shall approve renewal of the license or registration for the current renewal year. Renewal fees are non-refundable. All applications for renewal of individual licensure or registration shall contain the following:

- (1) the licensee's or registrant's name, mailing address, physical address, email address, and phone number;
- (2) whether the licensee or registrant has satisfied the continuing education requirements set forth in Rule .0903 of this Chapter;
- (3) since issuance of the individual's licensure or registration or the individual's last renewal, whichever is later:
  - (A) whether the licensee or registrant has had a credential denied, limited, reprimanded, suspended, or revoked and, if so, a statement providing the reason for the adverse action; the date and jurisdiction in which the adverse action occurred; the terms of the adverse action imposed; and whether the terms of the adverse action have been satisfied;
  - (B) whether the licensee or registrant has been convicted of a felony or misdemeanor under any laws and, and, if so, the jurisdiction, charge, case number, and date of each such criminal conviction;
  - (C) whether any criminal charges have been filed or are pending against the licensee or registrant and, if so, the jurisdiction, charge, and case number of each such charge;
  - (D) whether any court, board, agency, or professional organization has found the licensee or registrant guilty of unprofessional conduct, dishonest or fraudulent practice, or incompetent practice and, if so, the jurisdiction, charge, case number, and date of such adverse action;
  - (E) whether any disciplinary action, charges, or controversy is pending against the licensee or registrant before any court, board, agency, or professional organization for unprofessional conduct, dishonest or fraudulent practice, or incompetent practice and, if so, the jurisdiction, charge, and case number of each such pending action; or
  - (F) whether any liens or judgments have been filed or entered against the licensee or registrant and, if so, the jurisdiction, date, and parties to such lien or judgment.

(b) Late Renewal. If the Board has not received the annual renewal fee and completed renewal documentation on or before the first day of July, each year the license or registration shall expire and be placed on delinquent status. For the purpose of this Rule, "delinquent status" means an administrative suspension and is not considered discipline. The license or registration may be

renewed at any time within one year of being deemed delinquent, upon the return of the completed renewal documentation, the annual renewal fee, and the late renewal penalty and demonstration of compliance with Section .0900 of this Chapter.

(c) Reinstatement. After one year from the date of expiration, the Board shall revoke the license or registration for failure to renew. Reinstatement shall occur pursuant to G.S. 83A-11 and Sections .0300 and .0900 of this Chapter.

(d) Any individual who is currently licensed or registered by and in good standing with the Board who is serving in the armed forces of the United States shall not be subject to late fees, suspension, or revocation for failure to renew licensure on or before the first day July each year, provided that the individual has been granted an extension of time to file a tax return as set forth in G.S. 105-249.2.

*History Note: Authority G.S. 83A-6; 83A-11; 93B-15(b); Eff. February 1, 1976; Readopted Eff. September 29, 1977; Amended Eff. December 1, 2010; July 1, 2006; July 1, 1999; May 1, 1989; November 1, 1979; Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. January 13, 2015; Amended Eff. November 1, 2017; Temporary Amendment Eff. November 30, 2021; Amended Eff. April 1, 2024; June 1, 2022.*

**21 NCAC 02 .0214 FIRM PRACTICE OF ARCHITECTURE AND REGISTERED INTERIOR DESIGN**

(a) Prior to offering and rendering architectural or registered interior design services as set forth in G.S. 83A and Rule .0204(a) and Rule .0204(c) of this Chapter, all firms shall submit an application for firm licensure or registration and be granted licensure or registration by the Board. Application for firm licensure or registration to practice of architecture or registered interior design within the State of North Carolina shall be made upon forms provided on the Board web site at [www.ncbarch.org](http://www.ncbarch.org) and include the required application fee as set forth in Rule .0108 of this Chapter. Licensure for firm practice of architecture shall be issued only under the provisions of the Professional Corporation Act, G.S. 55B and G.S 57D-2-02. Registration for firm practice of interior design shall be issued only under the provisions of the Business Corporation G.S. 55 and G.S 57D. All applications for firm licensure or registration shall contain the following:

- (1) the firm's name, mailing address, physical address, email address, and phone number;
- (2) the firm's representative completing the application;
- (3) for all officers, directors and shareholders, if the firm is a professional corporation:
  - (A) the profession;
  - (B) the credential number and jurisdiction in which the credential was issued, if outside of North Carolina;
  - (C) the credential number issued by the Board, if any;

- (D) whether the individual is an officer, director, or shareholder; and
- (E) percentage of stock owned.
- (4) for all members and owners, if the firm is a professional limited liability company:
  - (A) the profession;
  - (B) the credential number and jurisdiction in which the credential was issued, if outside of North Carolina;
  - (C) the credential number issued by the Board, if any;
  - (D) whether the individual is a member or manager; and
  - (E) percentage of membership held.
- (5) the names, position, and ownership interest of any non-licensed shareholder or member of the firm;
- (6) whether the firm is a professional corporation or professional limited liability company;
- (7) whether the firm intends to form a new entity with the North Carolina Secretary of State and, if so, copies of the proposed articles of incorporation or organization;
- (8) whether the firm intends to register with the North Carolina Secretary of State as a foreign entity and, if so, copies of the articles of incorporation or organization filed in the other jurisdiction;
- (9) whether the firm or any of its owners ever has had a credential denied, limited, reprimanded, suspended, or revoked and, if so, a statement providing the reason for the adverse action; the date and jurisdiction in which the adverse action occurred; the terms of the adverse action imposed; and whether the terms of the adverse action have been satisfied;
- (10) whether the firm or any of its owners ever has been convicted of a felony or misdemeanor under any laws and, and, if so, the jurisdiction, charge, case number, and date of each such criminal conviction;
- (11) whether any criminal charges have been filed or are pending against the firm or any of its owners and, if so, the jurisdiction, charge, and case number of each such charge;
- (12) whether any court, board, agency, or professional organization has found the firm or any of its owners guilty of unprofessional conduct, dishonest or fraudulent practice, or incompetent practice and, if so, the jurisdiction, charge, case number, and date of such adverse action;
- (13) whether any disciplinary action, charges, or controversy is pending against the firm or any of its owners before any court, board, agency, or professional organization for unprofessional conduct, dishonest or fraudulent practice, or incompetent practice and, if so, the jurisdiction,

- charge, and case number of each such pending action;
- (14) whether any liens or judgments have been filed or entered against the firm or any of its owners and, if so, the jurisdiction, date, and parties to such lien or judgment;
  - (15) if the firm is a foreign entity, a certification from the person identified in Subparagraph (b)(2) of this Rule that:
    - (A) the information contained in the application is true and correct to the best of his or her knowledge and belief; and
    - (B) he or she has read the statutes and rules set forth in North Carolina General Statutes 55B for corporations, or Chapter 57D for PLLCs, Chapter 83A, and this Chapter.
  - (16) if the firm is an entity desiring to be incorporated or organized in North Carolina, a certification from the incorporator or organizer that the information contained in the application is true and correct to the best of his or her knowledge and belief; and
  - (17) a certification that the incorporator, organizer, officer, or owner of the firm has read and understands the public notice statement on employee misclassification that is set forth in the application and has disclosed any investigations for employee misclassification, and its results, over the preceding 12-month period, as prescribed by G.S. 143-789.
- (b) Architecture firm licensure and interior design firm registration shall be renewed on or before December 31st of each year. If the Board has not received the annual renewal fee as set forth in Rule .0108 of this Chapter and completed application on or before December 31st of each year, the architecture firm license or interior design firm registration shall expire. The Board shall send a notice of renewal to each licensed and registered firm no less than 30 days prior to the renewal date. Renewal documentation shall be accompanied by the renewal fee. If the accompanying draft or check in the amount of the renewal fee is dishonored by the firm's drawee bank for any reason, the Board shall suspend the firm license or registration until the renewal fees and returned check charges are paid. When the annual renewal has been completed according to the provisions of G.S. 83A-11, the Executive Director shall approve renewal for the firm for the current renewal year. Upon completion of the firm annual renewal, the Board may randomly audit the compliance of firm licenses and registrations and require proof in the form of corporate records maintained pursuant to North Carolina General Statute 55B or 57D. Such records shall be maintained for a period of seven years after the renewal is submitted. Renewal fees are non-refundable. All applications for renewal of firm licensure or registration shall contain the following:
- (1) the firm's name, mailing address, physical address, email address, and phone number;
  - (2) the firm's representative completing the application;
  - (3) since issuance of the firm's licensure or registration or the firm's last renewal, whichever is later,
    - (A) whether the firm or any of its owners has had a credential denied, limited, reprimanded, suspended, or revoked and, if so, a statement providing the reason for the adverse action; the date and jurisdiction in which the adverse action occurred; the terms of the adverse action imposed; and whether the terms of the adverse action have been satisfied;
    - (B) whether the firm or any of its owners has been convicted of a felony or misdemeanor under any laws and, and, if so, the jurisdiction, charge, case number, and date of each such criminal conviction;
    - (C) whether any criminal charges have been filed or are pending against the firm or any of its owners and, if so, the jurisdiction, charge, and case number of each such charge;
    - (D) whether any court, board, agency, or professional organization has found the firm or any of its owners guilty of unprofessional conduct, dishonest or fraudulent practice, or incompetent practice and, if so, the jurisdiction, charge, case number, and date of such adverse action;
    - (E) whether any disciplinary action, charges, or controversy is pending against the firm or any of its owners before any court, board, agency, or professional organization for unprofessional conduct, dishonest or fraudulent practice, or incompetent practice and, if so, the jurisdiction, charge, and case number of each such pending action; or
    - (F) whether any liens or judgments have been filed or entered against the firm or any of its owners and, if so, the jurisdiction, date, and parties involved with such lien or judgment;
  - (4) an affirmation from the architectural firm's Chief Executive Officer or person designated by firm resolution as a responsible officer in charge that:
    - (A) the information contained in the renewal application is true and correct to the best of his or her knowledge and belief;
    - (B) ownership of the shares or stock or membership of the firm is in compliance with the rules and laws of North Carolina;

- (C) any officers, directors, shareholders or members and professional employees, who are practicing architecture or registered interior design for said firm in the State of North Carolina, are duly licensed to so practice in this State;
- (D) at least one officer, director, and shareholder or member/owner of the firm is licensed in North Carolina;
- (E) non-licensed individuals do not own no more than one-third of the total stock or ownership; and
- (F) the firm has read and understands the public notice statement on employee misclassification that is set forth in the application and has disclosed any investigations for employee misclassification, and its results, over the preceding 12-month period, as prescribed by G.S. 143-789.

(c) Failure to Renew and Reinstatement. Within one year of the expiration, the firm license or registration may be renewed at any time, upon the return of the completed renewal documents, the annual renewal fee, and the late renewal fees. After one year from the date of expiration for non-payment of the annual renewal fee the licensee or registrant shall seek reinstatement, as allowed by G.S. 83A-11. The Board may reinstate the firms' license or registration, as allowed by G.S. 83A-11.

(d) Seal. Each licensed or registered firm shall adopt a seal pursuant to Rule .0206 of this Chapter.

(e) Every firm, partnership, corporation or limited liability company that performs or offers to perform architectural or registered interior design services in the State of North Carolina shall have a resident Architect or Registered Interior Designer in Responsible Control in each separate office located in North Carolina where architectural or registered interior design services are performed or offered to be performed. Out-of-state office locations where architectural or registered interior design services are performed or offered to be performed for North Carolina projects shall have architects or registered interior designers in responsible control of only the specific projects in North Carolina.

*History Note: Authority G.S. 55B-5; 55B-10; 55B-15; 83A-6; 83A-8; 83A-10; Eff. February 1, 1976; Readopted Eff. September 29, 1977; Amended Eff. July 1, 2014; December 1, 2010; July 1, 1993; May 1, 1989; November 1, 1979; Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. January 13, 2015; Temporary Amendment Eff. November 30, 2021; Amended Eff. April 1, 2024; June 1, 2022.*

**21 NCAC 02 .0215 OUT OF STATE FIRMS**

(a) Architectural and interior design firms from other states shall be granted firm licensure or registration for practice in this State upon receipt by the Board of a completed application as set forth in Rule .0214(a) of this Section, fees as required by Rule .0108 of this Chapter, the submission of a copy of their firm charter, or

other corresponding documents, amended as may be necessary to ensure compliance with all requirements of Chapter 55B, the Professional Corporation Act for architectural firms and Chapter 55, the Business Corporation Act for registered interior design firms. In addition to the other requirements as set out in G.S. 83A-8, out of state interior design firms shall, prior to registration, receive from the Secretary of State of North Carolina a certificate of authority to do business within the state. Architectural firms shall obtain a certificate for filing from the Board prior to submitting application to the Secretary of State for a Certificate of Authority.

(b) Designated Individuals. If an out of state entity offers both architectural and engineering services, then it shall comply with requirements set forth in G.S. 89C. An out of state entity shall have at least one officer, director and shareholder licensed as an architect in this state. Two-thirds of the issued and outstanding shares of the out of state corporations shall be owned by licensed architects or engineers who are licensed to practice their profession in a jurisdiction of the United States. However, the firm shall designate at least one architect who is licensed in the State of North Carolina to be in responsible control for the firm practice of architecture within the State of North Carolina. A registered interior design firm shall designate one registered interior designer to be in responsible control of all interior design work offered and performed by that firm in this State.

(c) Partnerships. An out of state architectural or registered interior design partnership may practice architecture or registered interior design, if every partner in the firm is licensed or registered as an individual in this state under Rule .0213 and the partnership complies with Paragraph (f) of this Rule .

(d) Limited Liability Companies. An out of state Limited Liability Company may practice architecture or registered interior design if the Limited Liability Company complies with G.S. 57D and at least one member and one owner are licensed or registered as an individual under Rule .0213 of this Section and comply with Paragraph (a) of this Rule.

(e) Limited Liability Partnerships. An out of state Limited Liability Partnership may practice architecture or registered interior design, if the Limited Liability Partnership complies with G.S. 59, and at least one partner is licensed or registered as an individual under Rule .0213 of this Section.

(f) Failure to Renew and Reinstatement. If the Board has not received the annual firm renewal fee and completed application as required by Rule .0214(b) of this Section on or before December 31st each year the firm license or registration shall expire and be deemed delinquent. The firm registration may be renewed at any time within one year, upon the return of the completed application, the annual renewal fee and the late renewal fees. After one year from the date of expiration for non-payment of the annual renewal fee, the license or registration shall be automatically revoked. The Board may reinstate the firm's license or registration, as allowed by G.S. 83A-11.

*History Note: Authority G.S. 55B-6; 83A-6; 83A-8; 83A-9; 55B-16; Eff. February 1, 1976; Readopted Eff. September 29, 1977; Amended Eff. December 1, 2010; June 1, 1995; July 1, 1993; May 1, 1989; November 1, 1979;*

*Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. January 13, 2015; Temporary Amendment Eff. November 30, 2021; Amended Eff. April 1, 2024. June 1, 2022.*

**21 NCAC 02 .0302 ARCHITECTURAL LICENSURE BY EXAMINATION**

(a) Those individuals who wish to take the Architectural Registration Exam (ARE) shall contact the National Council of Architecture Registration Boards (NCARB) directly to obtain exam eligibility. Upon completion of all requirements set forth in the NCARB Architecture Experience Program (AXP), a candidate seeking licensure by exam in North Carolina shall direct NCARB to transmit a completed NCARB AXP record to the North Carolina Board of Architecture and Registered Interior Designers.

(b) Upon passing all sections of the NCARB ARE, fulfillment of all NCARB AXP requirements, and completion of the National Architectural Accrediting Board (NAAB) accredited degree, NCARB, as directed by the candidate, will transmit a completed NCARB AXP file to the Board to determine compliance with G.S. 83A-7(a)(1)(a), which shall be deemed satisfied through completion of the requirements set forth in Subparagraphs (1) through (5) of this Paragraph. The Board shall grant licensure by exam to those individuals who:

- (1) are of good moral character as defined in G.S. 83A-1(5);
- (2) are at least 18 years of age;
- (3) have completed a NAAB accredited professional degree in architecture or who have completed a NAAB accredited degree program that is identified as an NCARB endorsed Integrated Path To Architectural Licensure Degree Program;
- (4) have completed the NCARB AXP; and
- (5) submit the Application for Licensure by Exam and fee as required by Rule .0108 of this Chapter.

(c) Retention of credit for purposes of licensure by examination in North Carolina.

- (1) Passing scores received after July 1, 2006 on any part of the ARE remain valid for a period of time established by the exam provider, NCARB.
- (2) Scores received on any part of the ARE prior to July 1, 2006 are invalid.

(d) Practical training pursuant to G.S. 83A-7(a)(2) means practical experience and diversified training as defined by the NCARB AXP.

(e) During the application process, Board members, in order to augment the evidence submitted in an application may interview the applicant regarding qualifications required in Paragraph (b) of this Rule. The Board shall determine whether an interview is needed on a case-by-case basis, based upon information in the application, including any academic or professional discipline.

(f) To complete the ARE, an exam candidate shall receive a passing grade in each division of the ARE. Information regarding NCARB grading methods and procedures can be found on their web site at [www.ncarb.org](http://www.ncarb.org).

(g) A person currently employed under the responsible control of an architect, who holds a Professional Degree from a NAAB accredited program, and who maintains an active NCARB AXP record or has completed the NCARB AXP may use the title "Architectural Intern" or "Intern Architect" in conjunction with his or her current employment.

(h) The fees for examination, or parts thereof, are set and collected by the NCARB. Fee information is available on the NCARB web site [www.ncarb.org](http://www.ncarb.org).

(i) The standards of the National Council of Architecture Registration Boards and its components are hereby incorporated by reference including subsequent amendments and editions, and can be accessed at no charge at [www.ncarb.org](http://www.ncarb.org).

*History Note: Authority G.S. 83A-1; 83A-6; 83A-7; 83A-12; Eff. February 1, 1976; Readopted Eff. September 29, 1977; Amended Eff. March 1, 2016; July 1, 2014; November 1, 2010; July 1, 2006; July 1, 2000; July 1, 1996; June 1, 1995; December 1, 1992; July 1, 1991; Amended Eff. November 1, 2017; Temporary Amendment Eff. November 30, 2021; Amended Eff. April 1, 2024; June 1, 2022.*

**21 NCAC 02 .0303 ARCHITECTURE LICENSURE BY RECIPROCITY**

(a) An individual who holds a current license in good standing from a National Council of Architecture Registration Boards (NCARB) recognized jurisdiction and a Certified Council Certificate issued by NCARB shall qualify for licensure by reciprocity upon receipt of a certified record from NCARB and the Board application for licensure by reciprocity and fee as required by Rule .0108 of this Chapter as provided in G.S. 83A-7(b). Revocation of the certificate by NCARB shall automatically suspend the architect's license to practice in North Carolina until such time as the certificate is reinstated by NCARB.

(b) In order to supplement or clarify the contents of a record or application, the Board may interview the applicant to ensure that the applicant has had sufficient architectural practice experience to be able to practice architecture in this State.

*History Note: Authority G.S. 83A-6; 83A-7; Eff. February 1, 1976; Readopted Eff. September 29, 1977; Amended Eff. July 1, 2014; November 1, 2010; July 1, 2006; July 1, 2000; October 1, 1995; May 1, 1989; October 1, 1984; September 1, 1982; Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. January 13, 2015; Temporary Amendment Eff. November 30, 2021; Amended Eff. April 1, 2024; June 1, 2022.*

**21 NCAC 02 .0306 INTERIOR DESIGNER REGISTRATION**

(a) Those individuals who wish to practice as a registered interior designer in North Carolina shall demonstrate that they have satisfied the educational and professional experience eligibility requirements adopted by the Council for Interior Design Qualification (CIDQ) to sit for the National Council for Interior

Design Qualification Examination (NCIDQ), shall pass the NCIDQ Examination, and submit to the Board an application for registration and fee as required by Rule .0108 of this Chapter. Revocation of the certificate by CIDQ shall automatically suspend the interior designer's registration to practice in North Carolina until such time as the certificate is reinstated by CIDQ.

(b) An architect shall be granted registration to practice interior design so long as they are currently licensed and in good standing in the State of North Carolina and submit the Board application for registration and fee.

(c) In order to supplement or clarify the contents of a record or application, the Board may interview the applicant to ensure that the applicant has had interior design experience to be able to practice registered interior design in this State.

(d) The standards of the CIDQ and its components are hereby incorporated by reference including subsequent amendments and editions and can be accessed at no charge at [www.cidq.org](http://www.cidq.org).

*History Note: Authority G.S. 83A-7;  
Temporary Adoption Eff. November 30, 2021;  
Eff. June 1, 2022;  
Amended Eff. April 1, 2024.*

**21 NCAC 02 .0307 CERTIFICATION AND  
LICENSURE FOR MILITARY PERSONNEL AND  
MILITARY SPOUSES**

(a) Upon receipt of a request for certification or licensure pursuant to G.S. 93B-15.1 from an applicant with military training and experience, the Board shall issue a certificate or license upon submission of the following to the Board:

- (1) an application containing the following information:
  - (A) the applicant's contact information;
  - (B) the social security number of the applicant;
  - (C) the requested designation of licensure or registration;
  - (D) employment history;
  - (E) whether the applicant has ever been certified, licensed, or registered to practice architecture or registered interior design by the Board, by another occupational board in another state/jurisdiction and, if so what credential was held, in what state/jurisdiction, the issuance date and expiration date, and what examinations were taken to obtain said certification, licensure, or registration:
  - (F) whether the applicant has ever had a credential denied, limited, reprimanded, suspended, or revoked;
  - (G) whether the applicant has ever been convicted of, or plead nolo contendere to, a felony or misdemeanor under any laws;
  - (H) whether any criminal charges have been filed or are pending against the applicant;

- (I) whether any court, board, agency, or professional organization has found the applicant guilty of unprofessional conduct, dishonest or fraudulent practice, or incompetent practice;
- (J) whether any charges are pending against the applicant before any court, board, agency, or professional organization for unprofessional conduct, dishonest or fraudulent practice, or incompetent practice;
- (K) the applicant's affirmation that the applicant has read the statutes and rules set forth in North Carolina General Statutes 83A and this Chapter, the information provided by the applicant in the application is true, and that the applicant has read and understands the public notice statement on employee misclassification that is set forth in the application and has disclosed any investigations for employee misclassification, and its results, over the preceding 12-month period, as prescribed by G.S. 143-789:

- (2) written documentation to satisfy conditions set out in G.S. 93B-15.1(a); or
- (3) written documentation to satisfy conditions set out in G.S. 93B-15.1(a2).

(b) Upon receipt of a request for certification or licensure pursuant to G.S. 93B-15.1 from a military spouse, the Board shall issue a certificate or license upon submission of the following to the Board:

- (1) an application containing the following information:
  - (A) the applicant's contact information;
  - (B) the social security number of the applicant;
  - (C) the requested designation of licensure or registration;
  - (D) employment history;
  - (E) whether the applicant has ever been certified, licensed, or registered to practice architecture or registered interior design by the Board, by another occupational Board, or in another state/jurisdiction and, if so what credential was held, in what state/jurisdiction, the issuance date and expiration date, and what examinations were taken to obtain said certification, licensure, or registration:
  - (F) whether the applicant has ever had a credential denied, limited, reprimanded, suspended, or revoked;
  - (G) whether the applicant has ever been convicted of, or plead nolo contendere to, a felony or misdemeanor under any laws;

to, a felony or misdemeanor under any laws;

(H) whether any criminal charges are pending against the applicant;

(I) whether any court, board, agency, or professional organization has found the applicant guilty of unprofessional conduct, dishonest or fraudulent practice, or incompetent practice;

(J) whether any charges are pending against the applicant before any court, board, agency, or professional organization for unprofessional conduct, dishonest or fraudulent practice, or incompetent practice;

(K) a completed NCARB AXP file as set forth in Rule .0302 of this Section; and

(L) the applicant's affirmation that the applicant has read the statutes and rules set forth in North Carolina General Statutes 83A and this Chapter, the information provided by the applicant in the application is true, and that the applicant has read and understands the public notice statement on employee misclassification that is set forth in the application and has disclosed any investigations for employee misclassification, and its results, over the preceding 12-month period, as prescribed by G.S. 143-789(2) written documentation to satisfy conditions set out in G.S. 93B-15.1(b):

(c) Military trained applicants and military spouse applicants may apply for a temporary license by submitting to the Board an application containing the information set forth in Subparagraph (a)(1) of this Rule.

*History Note: Authority G.S. 83A-7; 93B-15.1; Eff. April 1, 2024.*

**21 NCAC 02 .0606 WHO SHALL HEAR CONTESTED CASES**

*History Note: Authority G.S. 83A-6; 150B-11; 150B-38; 150B-40; Eff. February 1, 1976; Readopted Eff. September 29, 1977; Recodified from 21 NCAC 2 .0605; Amended Eff. May 1, 1989; Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. January 13, 2015. Repealed Eff. April 1, 2024.*

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**21 NCAC 08F .0105 CONDITIONING REQUIREMENTS**

(a) **Passing Grades.** A candidate shall pass all sections of the examination with a grade of 75 or higher on each section.

(b) **Military Service.** A candidate who is on active military service shall not have the time on active military service counted against Subparagraph (c)(1) of this Rule unless the candidate applies to take the examination during the active military service, in which case each month a candidate sits shall be counted toward Subparagraph (c)(1) of this Rule.

(c) A candidate is subject to the following conditioning requirements:

- (1) a candidate shall earn a passing grade on all sections of the examination within a 30-month period;
- (2) a candidate may sit for any section of the examination individually and in any order;
- (3) a candidate may retake the same section of the examination as many times during a one-year period as determined by the examination vendors but shall not retake a failed test section until the candidate has been notified of the score of the most recent attempt of that failed section;
- (4) credit awarded by the Board for passage of a section of the examination shall be valid for a 30-month period from the date the passing scores are released by the examination vendors;
- (5) the 30-month period begins on the date the first passing score is released to the candidate and concludes with the sit date of the final passed examination section, regardless of when the score is released by the examination vendors for the final passed section. A candidate, after earning credit for the initial passed section, must complete the remaining test sections of the examination by the last day of the 30-month period. If all four sections of the examination are not passed within the 30-month period, credit for any test section passed outside of the 30-month period shall expire; and
- (6) notwithstanding Subparagraphs (c)(1), (c)(4), and (c)(5) of this Rule, the period of time in which to pass all test sections of the examination may be extended by the Board upon a showing that the credit was lost by reason of circumstances beyond the testing candidate's control.

*History Note: Authority G.S. 93-12(3); 93-12(4); 93-12(5); Eff. February 1, 1976; Readopted Eff. September 26, 1977; Amended Eff. February 1, 2011; January 1, 2006; January 1, 2004; August 1, 1998; April 1, 1994; April 1, 1991; March 1, 1990; Readopted Eff. February 1, 2016; Amended Eff. April 1, 2024; September 1, 2023; January 1, 2020.*

**CHAPTER 08 – BOARD OF CERTIFIED PUBLIC ACCOUNTANT EXAMINERS**

**21 NCAC 08F .0401 WORK EXPERIENCE  
REQUIRED OF CANDIDATES FOR CPA  
CERTIFICATION**

(a) G.S. 93-12(5)(c) sets forth work experience alternatives, one of which is required of candidates applying for CPA certification. In connection with those requirements, the following provisions apply:

- (1) the work experience shall be acquired prior to the date a candidate applies for certification; and
- (2) all experience that is required to be under the direct supervision of a CPA shall be under the direct supervision of a licensed CPA on active status in one of the U.S. states or jurisdictions.

(b) The following provisions apply to all candidates seeking to meet the work experience requirement of G.S. 93-12(5)(c)(3) by working in the field of accounting:

- (1) One year of work experience is 52 weeks of full-time employment. The candidate is employed full-time when the candidate is expected by the employer to work for the employer at least 30 hours each week. Any other work is working part-time.
- (2) All weeks of actual full-time employment are added to all full-time equivalent weeks in order to calculate how much work experience a candidate has acquired. Dividing that number by 52 results in the years of work experience the candidate has acquired.
- (3) Full-time-equivalent weeks are determined by the number of actual part-time hours the candidate has worked. Actual part-time hours do not include hours paid for sick leave, vacation leave, attending continuing education courses, or other time not spent directly performing accounting services. For each calendar week during which the candidate worked actual part-time hours of 30 hours or more, the candidate receives one full-time-equivalent week. The actual part-time hours worked in the remaining calendar weeks are added together and divided by 30. The resulting number is the additional number of full-time-equivalent weeks to which the candidate is entitled.
- (4) The candidate shall submit experience affidavits on a form provided by the Board from all of the relevant employers; provided that when such experience was not acquired while employed with a CPA firm, the candidate shall also submit details of the work experience and supervision on a form provided by the Board. Experience affidavits for part-time work shall contain a record of the actual part-time hours the candidate has worked for each week of part-time employment. Both the experience affidavit and the form for additional detail shall be certified by the employer's office supervisor or an owner of the firm who is a certificate holder.

(c) Rule .0409 of this Section applies to teaching experience acquired pursuant to G.S. 93-12(5)(c)(2) and (4).

*History Note: Authority G.S. 93-12(3); 93-12(5); Eff. February 1, 1976;*  
*Readopted Eff. September 26, 1977;*  
*Temporary Amendment Eff. June 17, 1982 for a period of 120 days to expire on October 12, 1982;*  
*Legislative Objection Lodged Eff. July 20, 1982;*  
*Amended Eff. February 1, 2011; January 1, 2006; August 1, 1998; March 1, 1990; July 1, 1989; December 1, 1988; September 1, 1988;*  
*Readopted Eff. February 1, 2016;*  
*Amended Eff. April 1, 2024; September 1, 2023.*

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**CHAPTER 10 – BOARD OF CHIROPRACTIC  
EXAMINERS**

**21 NCAC 10 .0218 PRECEPTORS**

(a) Chiropractic physicians who supervise students pursuant to G.S. 90-142.1 ("preceptors") shall provide the Board with the following information prior to commencing student supervision on a form available on the Board's website:

- (1) Full name and license number of the preceptor;
- (2) Full name of student;
- (3) Chiropractic college in which student is enrolled;
- (4) Expected date of graduation;
- (5) Contact phone number and email for student;
- (6) Start and end dates of preceptorship;
- (7) Address where preceptorship will take place; and
- (8) Acknowledgement by the preceptor that he/she has read the statutes, rules and guidelines regarding the preceptor role.

- (b) The minimum requirements for a preceptor are as follows:
  - (1) Active license issued by the Board;
  - (2) Licensure by the Board for at least five years prior to submission of request to serve as a preceptor; and
  - (3) No prior suspension of the preceptor's license, active or stayed; and
  - (4) No prior Board discipline of any kind within 10 years of commencing the preceptor-student relationship.

(c) Preceptors shall supervise only one student at a time. Preceptors shall obtain verbal consent from every patient who is treated by the student prior to the student commencing treatment. Preceptors shall document consent in the patient's record.

*History Note: Authority G.S. 90-142.1;*  
*Eff. April 1, 2024.*

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**CHAPTER 25 - INTERPRETER AND  
TRANSLITERATOR BOARD**

**21 NCAC 25 .0501 CONTINUING EDUCATION REQUIREMENTS**

- (a) A licensee shall earn at least two continuing education units ("CEUs") each licensure year. At least 1.0 of those CEUs shall be earned in professional studies.
- (b) A licensee may carry over up to two surplus CEUs earned in one licensure year to the next licensure year to meet the requirements of Paragraph (a) of this Rule. The licensee shall demonstrate that he or she earned the CEU credits sought to be carried over in the licensee's license renewal application packet submitted for the carry over year in order to receive credit therefore. Surplus CEUs shall only be carried forward from the licensure year in which they were earned to the next subsequent licensure year and not beyond.
- (c) A licensee may not earn CEUs while interpreting, whether or not the licensee is compensated for his or her services.
- (d) The Board shall waive the continuing education requirements in this Rule for any individual who is currently licensed by and in good standing with the Board if the individual is serving in the armed forces of the United States and if G.S. 105-249.2 grants the individual an extension of time to file a tax return. The waiver shall be in effect for any period that is disregarded under Section 7508 of the Internal Revenue Code in determining the taxpayer's liability for a federal tax.

*History Note: Authority G.S. 90D-6; 90D-8; 90D-11; 93B-15; Eff. March 21, 2005; Amended Eff. May 1, 2011; August 1, 2007; Readopted Eff. June 1, 2018; Temporary Amendment Eff. June 26, 2020; Temporary Amendment Expired Eff. April 11, 2021; Amended Eff. April 1, 2024; July 1, 2021.*

**21 NCAC 25 .0502 PRORATION OF CONTINUING EDUCATION REQUIREMENTS**

The CEU requirements specified in Rule .0501 of this Chapter shall be prorated as follows during a licensee's initial licensure year:

- (1) If the licensee receives his or her initial license in the months of October, November or December, the licensee shall be required to earned at least 2.0 CEUs by the following October 1. At least 1.0 of those CEUs shall be earned in professional studies.
- (2) If the licensee receives his or her initial license in the months of January, February, or March, the licensee shall be required to earned at least 1.5 CEUs by the following October 1. At least 1.0 of those CEUs shall be earned in professional studies.
- (3) If the licensee receives his or her initial license in the months of April, May, or June, the licensee shall be required to earned at least 1.0 CEUs by the following October 1. At least 0.5 of those CEUs shall be earned in professional studies.
- (4) If the licensee receives his or her initial license in the months of July, August, or September, the licensee shall be required to earned at least

0.5 CEUs by the following October 1. At least 0.5 of those CEUs shall be earned in professional studies

*History Note: Authority G.S. 90D-6; 90D-8; 90D-11; Eff. August 1, 2007; Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. July 22, 2017; Amended Eff April 1, 2024.*

**21 NCAC 25 .0503 FAILURE TO MEET CONTINUING EDUCATION REQUIREMENTS**

(a) A licensee who has not complied with the continuing education requirements in this Section shall be ineligible for license renewal. Any person whose license renewal application is denied on these grounds may reapply for licensure as soon as the person is able to demonstrate that:

- (1) the person has earned at least two CEUs within the 12 months next preceding the date of reapplication; and
- (2) at least 1.0 of those CEUs was earned in professional studies.

(b) Notwithstanding the provisions of Paragraph (a) of this Rule, a licensee who has not complied with the continuing education requirements in this Section shall be eligible for license renewal if:

- (1) the licensee makes a timely application for renewal as defined in 21 NCAC 25 .0204(a), including the payment of the required license fee; and
- (2) the licensee earns the required CEUs by no later than the 31st day of October in the new licensure year.

(c) CEUs earned in the current licensure year and used to cure a deficiency in the prior licensure year shall not be used to meet the CEU requirements of the current year.

*History Note: Authority G.S. 90D-6; 90D-8; 90D-11; Eff. August 1, 2007; Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. July 22, 2017; Amended Eff April 1, 2024.*

**21 NCAC 25 .0505 CEU CREDIT FOR WORKSHPS, CONFERENCES, AND INDEPENDENT STUDY RECOGNIZED BY RID**

(a) A licensee may earn CEUs by attending workshops and conferences recognized by The Registry of Interpreters for the Deaf, Inc. ("RID"). In order to receive CEU credit for attendance at a workshop or conference recognized by RID, the licensee shall submit to the Board a copy of the licensee's RID CEU transcript. RID shall be the sole judge of the number of CEUs earned by attendance at the workshop or conference.

(b) A licensee who is either a certified member of RID or an associate member of RID participating in the Associate Continuing Education Tracking ("ACET") Program may earn CEUs by independently studying instructional materials in any format -- including, but not limited to, videotapes, audiotapes, web sites, DVDs, CDs, and books and other printed materials --

so long as the materials have been recognized by RID. In order to receive CEU credit for such independent study, the licensee shall submit to the Board a copy of the licensee's RID CEU transcript. RID shall be the sole judge of the number of CEUs earned by the completion of any independent study recognized by RID.

(c) If a licensee does not have an RID CEU transcript because the licensee is neither a certified member of RID nor an associate member of RID participating in the ACET Program, the licensee shall receive CEU credit for attendance at the workshop or conference by submitting to the Board a certificate of completion signed by the workshop or conference sponsor, provider, or presenter.

History Note: Authority G.S. 90D-6; 90D-8; 90D-11; Eff. August 1, 2007; Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. July 22, 2017; Amended Eff April 1, 2024.

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CHAPTER 26 – BOARD OF LANDSCAPE ARCHITECTS

21 NCAC 26 .0105 FEES

- (a) The fee for any initial license application shall be one hundred dollars (\$100.00).
(b) Examination fees payable to the Board shall be paid prior to the examination and in accordance with G.S 89A-6.
(c) The initial fee for a license by examination or comity shall be two hundred fifty dollars (\$250.00.)
(d) The initial fee for a corporate certificate of registration shall be two hundred fifty dollars (\$250.00.)
(e) The fee for the annual renewal of any certificate of registration of any person, firm, or corporation shall be one hundred dollars (\$100.00).
(f) Annual renewal fees received after June 30th of each year shall be subject to a late fee of fifty dollars (\$50.00). Lapse of license renewal in excess of one year shall require an application for reinstatement and an application fee of one hundred dollars (\$100.00).
(g) The fee for re-issue of a lost or damaged certificate shall be twenty-five dollars (\$25.00).
(h) If the accompanying payment in the amount of the renewal fee is dishonored by the firm's drawee bank for any reason, the Board shall suspend the firm registration until the renewal fee is paid.

History Note: Authority G.S. 89A-3.1; 89A-5; 89A-6; Eff. February 1, 1976; Readopted Eff. September 30, 1977; Amended Eff. December 1, 1994; June 1, 1991; April 1, 1990; July 1, 1989; Temporary Amendment Eff. October 1, 1997; Temporary Amendment Expired July 12, 1998; Amended Eff. March 1, 2015; August 1, 2000; Readopted Eff. April 1, 2018; Amended Eff. April 1, 2024; January 1, 2022.

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CHAPTER 34 – BOARD OF FUNERAL SERVICE

21 NCAC 34B .0208 PASSING SCORE

- (a) For purposes of G.S. 90-210.25(a)(5), the passing score on all examinations administered by the International Conference of Funeral Service Examining Boards, Inc. shall be such passing score that is established by the International Conference of Funeral Service Examining Boards, Inc. and in effect at the time such examinations are administered.
(b) A score of at least 75 percent on a final examination taken in a pathology course offered through a school that has a mortuary science program accredited by the American Board of Funeral Service Education shall be deemed equivalent to a passing score on the examination of pathology required for licensure as a funeral director, pursuant to G.S. 90-210.25(a)(1)(e)(4).

History Note: Authority G.S. 90-210.23(a); 90-210.25(a)(1),(2),(3); 90-210.25(a)(5); Eff. February 1, 1976; Readopted Eff. September 27, 1977; Amended Eff. November 1, 2004; September 1, 1979; Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. August 19, 2017; Amended Eff. April 1, 2024.

21 NCAC 34B .0211 NATIONAL BOARD CERTIFICATE

- (a) Pursuant to G.S. 90-210.25(a)(5), a National Board Certificate for Arts, certifying the successful completion of the National Board Examination for Arts of the International Conference of Funeral Service Examining Boards Inc., is the equivalent of the Board's entry-level examination in funeral directing.
(b) Pursuant to G.S. 90-210.25(a)(5), a National Board Certificate for Sciences, certifying the successful completion of the National Board Examination for Sciences of the International Conference of Funeral Service Examining Boards Inc., is the equivalent of that portion of the Board's examination on the topics of embalming, restorative arts, chemistry, pathology, microbiology, and anatomy.
(c) National Board Certificates shall be accepted for three years from the date of issue for eligibility toward licenses issued under G.S. 90-210.25(a)(1), (2), or (3).

History Note: Authority G.S. 90-210.23(a); 90-210.25(a)(5); Eff. February 1, 1976; Readopted Eff. September 27, 1977; Amended Eff. February 1, 2009; November 1, 2004; September 1, 1979. Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. August 19, 2017; Amended Eff. April 1, 2024.

21 NCAC 34B .0213 EXPIRATION OF TEST SCORES

History Note: Authority G.S. 90-210.23(a); 90-210.25(a)(1),(2),(3); Eff. February 1, 2009; Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. August 19, 2017;

Repealed Eff. April 1, 2024.

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CHAPTER 52 – BOARD OF PODIATRY EXAMINERS

21 NCAC 52 .0208 CONTINUING EDUCATION

(a) A requirement for issuance of the annual renewal certificate shall be certification to the Board of proof of compliance with the continuing education provisions of G.S. 202.11.

The Board shall notify all podiatrists that 25 hours of continuing education are required annually, including one hour of controlled substances prescribing practices.

(b) General CME policy - 25 hours per year as follows:

- (1) Completion of 25 hours of Continuing Medical Education (CME) is required per year (July 1-June 30) for renewal of licensure. CME credits shall not be carried over from the previous licensure year.
(2) It shall be the responsibility of the individual podiatrist to ascertain in advance if the courses he or she attends have received proper approval from the certifying organizations, and comply with the Standards, Requirements, and Guidelines for Approval of Sponsors of Continuing Education in Podiatric Medicine of the Council on Podiatric Medical Education...
(3) Certificates of completion of courses other than those sponsored by the NC Foot and Ankle Society (NCF&AS) shall be submitted to the Board online using the Board's contracted electronic continuing education tracking system. Completion certificates shall be typed and contain the following information:
(A) Podiatrist's name;
(B) Course name, location, and date;
(C) Number of hours CME completed;
(D) Signature of seminar chairperson; and
(E) Name of certifying or sponsoring agency.
(4) A licensed podiatrist participating in the second or third year of a medical residency or fellowship may submit a letter signed by the podiatric residency or fellowship director stating the podiatrist's name and dates of residency. This shall substitute for the 25-credit hour requirement and CME certificate required by this Rule.

(5) The Board shall retain access to the CME documentation with the individual podiatrist's license renewal information.

(c) Category 1: Minimum requirement 20 hours per year, as follows:

- (1) CME credit shall be granted for attendance at educational seminars offered by the North Carolina Foot & Ankle Society (NCF&AS). The number of qualifying hours of continuing education shall be determined and approved by the Board in advance based on the standards in G.S. 90-202.11. NCF&AS shall submit to the Board a list of individuals who attended its CME events and earned credits.
(2) CME credit shall be granted for attendance at educational seminars offered by other national, state, and podiatric education providers, as certified by the Council on Podiatric Medical Education (CPME) of the American Podiatric Medical Association (APMA). The number of qualifying hours of continuing education shall be determined and approved by the Board.
(3) Lecturers shall be granted one hour of credit for each hour of CPME- or APMA- approved lectures given, but such credit shall be limited to one hour for each discrete topic. A brief summary of the content of each lecture shall be submitted to the Board for approval.
(4) Category 1 is limited to live in person educational seminars offered by NCF&AS or by sponsors pre-approved by CPME: http://www.cpme.org (CPME 700: "Approved Sponsors of Continuing Education in Podiatry"). (APMA or CPME-approved online or journal courses are considered Category 2.)
(5) Since CPME evaluates only CME conducted in the United States, North Carolina-licensed podiatrists practicing outside the United States, or participating in a foreign fellowship or other short-term residency abroad may apply to the Board, to have their continuing medical education credits from their country of practice considered and evaluated by the Board on an individual basis.

(d) Category 2: A maximum of only 5 of the total 25 CME hours per year shall be allowed as follows:

- (1) CME credit shall be allowed for educational programs approved for Category 1 credit by the American Medical Association (AMA) and the American Osteopathic Association (AOA) or their affiliated organizations.
(2) CME credit shall be allowed for courses approved by North Carolina Area Health Education Centers (AHEC).
(3) Online or medical journal courses approved by CPME are permitted.
(4) For courses not pre-approved by AHEC, AOA, or AMA, all requests for CME approval must

contain a timeline and course description and be submitted to the Board for approval.

(e) Waiver for Certified Illness, Medical Condition, Natural Disaster, or Undue Hardship. The Board may waive the continuing education requirement for license renewal in the following cases that preclude a licensed podiatrist from completing his or her CME requirement within the 18-month timeframe from July 1 of the year of the last license or renewal issuance through December 31 of the following year:

- (1) An unexpected illness or medical condition certified by a letter from a licensed physician, nurse practitioner (NP), or physician assistant (PA) regarding the licensee or the licensee's parents, spouse, children and other persons dependent upon the podiatrist for daily living supports; or
- (2) An undue hardship (such as active military service or natural disaster).

In such cases, the Board shall issue a conditional license predicated on the licensee acquiring all of the required continuing education credits in a mutually-agreeable timeframe, but no later than 24 months after December 31 of the year following the latest year of license or renewal issuance. Requests for CME waiver shall be received by the Board before the end of the grace period deadline for license renewal. The Board may require additional information when necessary to confirm the need for exemption to support the licensee's claim. The Board shall notify the licensee of its decision in writing within 45 days of receipt by the Board of all needed documentation.

*History Note:* Authority G.S. 90-202.4(g); 90-202.11; S.L. 2015-241, s. 12F.16(b) and (c);

*Eff. February 1, 1976;*

*Amended Eff. June 1, 2013; October 1, 2012; February 1, 2012; November 1, 2011; June 1, 2011; December 1, 1988;*

*Readopted Eff. March 1, 2016;*

*Amended Eff. April 1, 2024.*

**21 NCAC 52 .0613 FEE SCHEDULE**

The following fees shall apply:

- (1) Application for examination (non-refundable) \$350.00
- (2) Examination (non-refundable) \$100.00
- (3) Re-Examination \$350.00
- (4) License certificate \$100.00
- (5) Annual License Renewal \$200.00
- (6) License Renewal Late Fee (per month, up to 6 months) \$25.00
- (7) Data Processing Fee for Pharmaceutical Verification as set forth in Rule .0210 of this Chapter \$300.00
- (8) Returned check fee as set forth in Rule .0612 of this Section. The returned check fee is \$12.00
- (9) Incorporation for PA/PC/PLLC \$50.00
- (10) Annual Corporate Renewal \$25.00
- (11) Corporate Renewal Late Fee \$10.00

*History Note:* Authority G.S. 90-202.5(a);90-202.6(c); 90-202.9; 90-202.10; 55B-10; 55B-11; 55B-12; 150B-19(5)(e);

*Eff. April 1, 2013;*

*Readopted Eff. September 1, 2016;*

*Amended Eff. April 1, 2024.*

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## RULES REVIEW COMMISSION

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*This Section contains information for the meeting of the Rules Review Commission March 27, 2024 and April 8, 2024 at 1711 New Hope Church Road, RRC Commission Room, Raleigh, NC. Anyone wishing to submit written comment on any rule before the Commission should submit those comments to the RRC staff, the agency, and the individual Commissioners. Specific instructions and addresses may be obtained from the Rules Review Commission at 984-236-1850. Anyone wishing to address the Commission should notify the RRC staff and the agency no later than 5:00 p.m. of the 2<sup>nd</sup> business day before the meeting. Please refer to RRC rules codified in 26 NCAC 05.*

### RULES REVIEW COMMISSION MEMBERS

#### **Appointed by Senate**

Jeanette Doran (Chair)  
Jay R. Hemphill  
Jeff Hyde  
Brandon Leebrick  
Bill Nelson

#### **Appointed by House**

Barbara A. Jackson (1<sup>st</sup> Vice-Chair)  
Randy Overton (2<sup>nd</sup> Vice-Chair)  
Wayne R. Boyles, III  
Jake Parker  
Paul Powell

### COMMISSION COUNSEL

Brian Liebman	984-236-1948
William W. Peaslee	984-236-1939
Seth M. Ascher	984-236-1934
Travis Wiggs	984-236-1929

### RULES REVIEW COMMISSION MEETING DATES

May 29, 2024	July 31, 2024
June 26, 2024	August 28, 2024

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### RULES REVIEW COMMISSION MEETING

#### MINUTES

**March 27, 2024**

The Rules Review Commission met on Wednesday, March 27, 2024, in the Commission Room at 1711 New Hope Church Road, Raleigh, North Carolina, and via WebEx.

Commissioners Wayne R. Boyles III, Jeanette Doran, Jeff Hyde, Bill Nelson, Randy Overton, and Jake Parker were present in the Commission Room. Commissioners Barbara Jackson and Jay Hemphill were present via WebEx.

Staff member Alexander Burgos, Commission Counsel Seth Ascher, Brian Liebman, Bill Peaslee, and Travis Wiggs were present in the room.

The meeting was called to order at 10:00 a.m. with Chair Doran presiding.

The Chair read the notice required by G.S. 138A-15(e) and reminded the Commission members that they have a duty to avoid conflicts of interest and the appearance of conflicts of interest.

The Chair notified the Commissioners that the following item on the agenda would be taken up out of order at the end of the agenda: Permanent rules from the Office of State Budget and Management.

#### **APPROVAL OF MINUTES**

The Chair asked for any discussion, comments, or corrections concerning the minutes of the February 28, 2024, meeting. There were none and the minutes were approved as distributed.

Upon the call of the Chair, the minutes were approved by roll-call vote, ayes 7, noes 0 as follows: Voting in the affirmative: Wayne R. Boyles III, Jay Hemphill, Jeff Hyde, Barbara Jackson, Bill Nelson, Randy Overton, and Jake Parker – 7. Voting in the negative: None.

#### **FOLLOW UP MATTERS**

**Office of State Budget and Management**

Upon the call of the Chair, 09 NCAC 03M .0202 was approved by roll-call vote, ayes 7, noes 0 as follows: Voting in the affirmative: Wayne R. Boyles III, Jay Hemphill, Jeff Hyde, Barbara Jackson, Bill Nelson, Randy Overton, and Jake Parker – 7. Voting in the negative: None.

**Criminal Justice Education and Training Standards Commission**

12 NCAC 09F .0103, .0104, and .0105 – The Commission objected to these Rules at the February special meeting. No action was required by the Commission.

**Board of Examiners in Optometry**

21 NCAC 42D .0102 - At the January 2024 meeting, the Commission found that the revised rule satisfied the RRC's objection at the November 2023 meeting; however, it also determined that the revised rule was a substantial change and will need to be published and reviewed pursuant to G.S. 150B-21.2(g). This Rule will remain on the agenda until it is published. No action was required by the Commission.

**Board of Examiners for Engineers and Surveyors**

21 NCAC 56 .0502 - The Commission extended the period of review for this Rule at the February meeting. No action was required by the Commission.

**Building Code Council**

2024 North Carolina Energy Conservation Code - The Commission extended the period of review for this Rule at the February meeting. No action was required by the Commission.

**Building Code Council**

2024 North Carolina Fuel Gas Code - The Commission extended the period of review for this Rule at the February meeting. No action was required by the Commission.

**Building Code Council**

2024 North Carolina Mechanical Code - 2024 North Carolina Energy Conservation Code - The Commission extended the period of review for this Rule at the February meeting. No action was required by the Commission.

**LOG OF FILINGS (PERMANENT RULES)****State Board of Elections**

Upon the call of the Chair, 08 NCAC 04 .0401, .0402; 17 .0101, .0102, .0103, .0105, .0106, and .0109 were approved by roll-call vote, ayes 7, noes 0 as follows: Voting in the affirmative: Wayne R. Boyles III, Jay Hemphill, Jeff Hyde, Barbara Jackson, Bill Nelson, Randy Overton, and Jake Parker – 7. Voting in the negative: None. The Commission noted a typographical in 08 NCAC 04 .0401 and the revised rule was corrected following the meeting.

Paul Cox, the rulemaking coordinator for the agency, addressed the Commission.

**Medical Care Commission**

Upon the call of the Chair, 10A NCAC 13L .0301, .0302; 13P .0101, .0102, .0201, .0207, .0216, .0217, .0218, .0221, .0224, .0301, .0401, .0402, .0403, .0404, .0407, .0410, .0502, .0503, .0512, .0601, .0602, .0904, .0905, .1505 and .1507 were approved by roll-call vote, ayes 7, noes 0 as follows: Voting in the affirmative: Wayne R. Boyles III, Jay Hemphill, Jeff Hyde, Barbara Jackson, Bill Nelson, Randy Overton, and Jake Parker – 7. Voting in the negative: None.

**Home Inspector Licensure Board**

Upon the call of the Chair, the Commission voted to extend the period of review for 11 NCAC 08 .1101, .1103, .1105, .1107, .1109, .1110, and .1116 by roll-call vote, ayes 7, noes 0 as follows: Voting in the affirmative: Wayne R. Boyles III, Jay Hemphill, Jeff Hyde, Barbara Jackson, Bill Nelson, Randy Overton, and Jake Parker – 7. Voting in the negative: None.

**Commission for Public Health**

Upon the call of the Chair, 15A NCAC 18A .1001, .1002, .1003, .1004, .1006, .1007, .1008, .1009, .1011, .1012, .1014, .1017, .1018, .1019, .1020, .1021, .1022, .1027, .1601, .1602, .1603, .1604, .1605, .1606, .1607, .1608, .1609, .1610, .1611, .1612, .1613, .1614, .1615, .1616, .1617, .1618, .1619, .1620, .1621, .2518, and .2539 were approved by roll-call vote, ayes 7, noes 0 as follows: Voting in the affirmative: Wayne R. Boyles III, Jay Hemphill, Jeff Hyde, Barbara Jackson, Bill Nelson, Randy Overton, and Jake Parker – 7. Voting in the negative: None.

**Board of Architecture and Registered Interior Designers**

Upon the call of the Chair, 21 NCAC 02 .0108, .0201, .0203, .0206, .0210, .0213, .0214, .0215, .0302, .0303, .0306, .0307, and .0606 were approved by roll-call vote, ayes 7, noes 0 as follows: Voting in the affirmative: Wayne R. Boyles III, Jay Hemphill, Jeff Hyde, Barbara Jackson, Bill Nelson, Randy Overton, and Jake Parker – 7. Voting in the negative: None.

**Board of Certified Public Accountant Examiners**

Upon the call of the Chair, 21 NCAC 08F .0105 and .0401 were approved by roll-call vote, ayes 7, noes 0 as follows: Voting in the affirmative: Wayne R. Boyles III, Jay Hemphill, Jeff Hyde, Barbara Jackson, Bill Nelson, Randy Overton, and Jake Parker – 7. Voting in the negative: None.

**Board of Chiropractic Examiners**

Upon the call of the Chair, 21 NCAC 10 .0218 was approved by roll-call vote, ayes 7, noes 0 as follows: Voting in the affirmative: Wayne R. Boyles III, Jay Hemphill, Jeff Hyde, Barbara Jackson, Bill Nelson, Randy Overton, and Jake Parker – 7. Voting in the negative: None.

21 NCAC 10 .0208 was withdrawn at the request of the agency. No action was required by the Commission.

**Board of Dental Examiners**

21 NCAC 16H .0104 was withdrawn at the request of the agency. No action was required by the Commission.

**Interpreter and Transliterator Licensing Board**

Upon the call of the Chair, 21 NCAC 25 .0501, .0502, .0503, and .0505 were approved by roll-call vote, ayes 7, noes 0 as follows: Voting in the affirmative: Wayne R. Boyles III, Jay Hemphill, Jeff Hyde, Barbara Jackson, Bill Nelson, Randy Overton, and Jake Parker – 7. Voting in the negative: None.

**Board of Landscape Architects**

Upon the call of the Chair, 21 NCAC 26 .0105 was approved by roll-call vote, ayes 7, noes 0 as follows: Voting in the affirmative: Wayne R. Boyles III, Jay Hemphill, Jeff Hyde, Barbara Jackson, Bill Nelson, Randy Overton, and Jake Parker – 7. Voting in the negative: None.

**Board of Funeral Service**

Upon the call of the Chair, 21 NCAC 34B .0208, .0211, and .0213 were approved by roll-call vote, ayes 7, noes 0 as follows: Voting in the affirmative: Wayne R. Boyles III, Jay Hemphill, Jeff Hyde, Barbara Jackson, Bill Nelson, Randy Overton, and Jake Parker – 7. Voting in the negative: None.

**Board of Podiatry Examiners**

Upon the call of the Chair, 21 NCAC 52 .0208, and .0613 were approved by roll-call vote, ayes 7, noes 0 as follows: Voting in the affirmative: Wayne R. Boyles III, Jay Hemphill, Jeff Hyde, Barbara Jackson, Bill Nelson, Randy Overton, and Jake Parker – 7. Voting in the negative: None.

**LOG OF FILINGS (TEMPORARY RULES)**

**Coastal Resources Commission**

15A NCAC 07H .0507, .0508, .0509; 07I .0702; 07J .0203, .0204, .0206, .0207, .0208; 07M .0401, .0402, .0403, .0701, .0703, .0704, and .1101 – The Chair announced that these Rules will be taken up at a Special Meeting of the RRC on April 8, 2024, at 10:00 am. No action was taken on these.

**State Board of Education**

Upon the call of the Chair, a motion to approve 16 NCAC 06C .0372, .0601, .0602, .0603, .0604, .0605, .0606, .0607, and .0608 failed by roll call vote, ayes 1, noes 7 as follows. Voting in the affirmative: Wayne R. Boyles, III – 1. Voting in the negative: Jeanette Doran, Jay Hemphill, Jeff Hyde, Barbara Jackson, Bill Nelson, Randy Overton, and Jake Parker – 7.

Upon the call of the Chair, the Commission voted to approve 16 NCAC 06C .0372, .0601, .0603, .0604, .0605, .0606, .0607, and .0608, and to object to 16 NCAC 06C .0602 for failure to meet the standard in G.S. 150B-21.9(a)(2) as articulated in staff's opinion, by roll-call vote, ayes 8, noes 0 as follows: Voting in the affirmative: Wayne R. Boyles III, Jeanette Doran, Jay Hemphill, Jeff Hyde, Barbara Jackson, Bill Nelson, Randy Overton, and Jake Parker – 8. Voting in the negative: None.

Ryan Collins, the Rulemaking Coordinator for the agency, addressed the Commission.

**State Board of Education**

Upon the call of the Chair, 16 NCAC 06E .0201, .0204, .0205, .0206, .0207, .0208, .0209, .0210, and .0215 were approved by roll-call vote, ayes 7, noes 0 as follows: Voting in the affirmative: Wayne R. Boyles III, Jay Hemphill, Jeff Hyde, Barbara Jackson, Bill Nelson, Randy Overton, and Jake Parker – 7. Voting in the negative: None.

**Existing Rule Review**

The Commission voted to exempt subchapters from the decennial review beginning in 2024: 18 NCAC 07B, 07C, 07D, 07E, 07F, 07I, and 07K, and extend the periodic review deadline for 18 NCAC 07J to June 2025 by roll-call vote, ayes 7, noes 0 as follows: Voting in the affirmative: Wayne R. Boyles III, Jay Hemphill, Jeff Hyde, Barbara Jackson, Bill Nelson, Randy Overton, and Jake Parker – 7. Voting in the negative: None.

**COMMISSION BUSINESS**

Staff made a brief presentation to the Commission about potential RRC rule changes.

At 11:11 a.m., upon a motion by Chair Doran and a second by Commissioner Jackson, the Commission voted to call the public meeting of the Rules Review Commission into recess and enter into a closed session pursuant to G.S. 143-318.11(a)(1) to review and approve the general account of the February 28, 2024 closed session which may be withheld from public inspection pursuant to G.S. 143-318.10(e) and to consult with counsel regarding CRC v. RRC pursuant to G.S. 143.11(a)(3), by roll-call vote, ayes 7, noes 0 as follows: Voting in the affirmative: Wayne R. Boyles III, Jay Hemphill, Jeff Hyde, Barbara Jackson, Bill Nelson, Randy Overton, and Jake Parker – 7. Voting in the negative: None.

Commissioners Barbara Jackson and Jay Hemphill did not return to the regular meeting following the closed session.

At 11:38 a.m., upon a motion by the Chair and a second by Commissioner Boyles, the Commission voted to come out of closed session and reconvene the public meeting of the Rules Review Commission by roll-call vote, ayes 5, noes 0 as follows: Voting in the affirmative: Wayne R. Boyles III, Jeff Hyde, Bill Nelson, Randy Overton, and Jake Parker – 5. Voting in the negative: None.

The meeting was adjourned at 11:40 a.m.

The next regularly scheduled meeting of the Commission is Tuesday, April 30, 2024, at 10:00 a.m.

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Alexander Burgos, Paralegal

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Minutes approved by the Rules Review Commission:  
Jeanette Doran, Chair

**RULES REVIEW COMMISSION**

**March 27, 2024**

Rules Review Commission  
Meeting  
Please **Print** Legibly

Name	Agency
Ben Busch	AG's office
Gavin Cleary	AG's office
Paul Barth	GRNC
John Gagnon	OSBM
Rhonda Allen	NCCCIA/ArmedAngelstraining
ANN ELMORE	NC SOS
W. Toole	"
CHRIS MILLIS	NCAAA
Hyrum Hemingway	NC DOT
Catherine Lee	BFS & NCBAA
Tom Mitchell	NC OEMS
Wally Ainsworth	NC OEMS
Buck Winstoel	SBoard of CPA Examiners
Taylor Carpenter	DMR
<del>Chris Gray</del>	NC Brd Arch + R(I)
David Rittinger	NC OSFM
Ryan Collins	NC St. Bd. of Educ.
Paul Cox	NC St. Bd. of Electm
Adam Steele	"
Julie Ventaloro	NC OSBM
Virginia Nicholas	NCDHHS DPH



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**RULES REVIEW COMMISSION**

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**Rules Review Commission Meeting March 27, 2024**  
**Via WebEx**

<b>Name</b>	<b>Agency</b>
Elizabeth Hawley	Treasurer
Christopher Ventaloro	DEQ
Emily Jones	DOT
Angela Willis	DEQ
Karen Holder	DOI
Mike Hejduk	DOI
Dana McGhee	OAH
Ashley Snyder	OAH
Clifton Dowell	stateaffairs.com
Zac Patterson	
Hayworth, Anna	Agriculture
Nadine Pfeiffer	
Tracey Dranttel	
Liz Rasheed	
Ann Webb	commoncause.org
Harry Katt	
Shazia Keller	DHHS
Ellen Roeber	PT BOARD
Terry Chappell	DHHS
Barbara Geiger	NCBOLA
Helen Landi	
Larry Michael	DHHS
Adrienne Spoto	
Bruce Garner	SOS
Laura Rowe	Treasurer
Misty Piekaar	dhhs.nc.gov
Reed Fountain	
Jean Kirk	ncfootandankle.org
Harry Katt	
Elizabeth Pope	NCSW BOARD
Zac Patterson	
Chad Gambill	
Jon Fowlkes	DHHS
Wes Tripp	NCBELS
Dauna Bartley	Brocklerlawfirm.com
Heather Misenheimer	DHHS
Shane Smith	DHHS
Nathan Childs	DOJ
Mary Lucasse	CRC
Dilcy Burton	DOI
Ian Clark	DHHS

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**RULES REVIEW COMMISSION**

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Harvey Morse	wecancarry.com
Tracy Steadman	NCBRE

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**LIST OF APPROVED PERMANENT RULES**  
**March 27, 2024 Meeting**

**ELECTIONS, STATE BOARD OF**

<u>Standards for Certification of Electronic Poll Books</u>	08 NCAC 04 .0401
<u>Procedures for Certification of Electronic Poll Books</u>	08 NCAC 04 .0402
<u>Verification of Photo Identification During In-Person Voting</u>	08 NCAC 17 .0101
<u>Determination of Reasonable Resemblance by Judges of Elec...</u>	08 NCAC 17 .0102
<u>Identification Required of Curbside Voters</u>	08 NCAC 17 .0103
<u>Declaration of Religious Objection to Photograph</u>	08 NCAC 17 .0105
<u>Signage Notifying One-Stop Voters of the Option to Reques...</u>	08 NCAC 17 .0106
<u>Photo Identification for Absentee-by-Mail Ballots</u>	08 NCAC 17 .0109

**STATE BUDGET AND MANAGEMENT, OFFICE OF**

<u>Recipient and Subrecipient Responsibilities</u>	09 NCAC 03M .0202
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**MEDICAL CARE COMMISSION**

<u>Written Policies and Procedures</u>	10A NCAC 13L .0301
<u>Personnel Records</u>	10A NCAC 13L .0302
<u>Abbreviations</u>	10A NCAC 13P .0101
<u>Definitions</u>	10A NCAC 13P .0102
<u>EMS System Requirements</u>	10A NCAC 13P .0201
<u>Ground Ambulance: Vehicle and Equipment Requirements</u>	10A NCAC 13P .0207
<u>Weapons and Explosives Forbidden</u>	10A NCAC 13P .0216
<u>Medical Ambulance/Evacuation Bus: Vehicle and Equipment R...</u>	10A NCAC 13P .0217
<u>Pediatric Specialty Care Ground Ambulance: Vehicle and Eq...</u>	10A NCAC 13P .0218
<u>Patient Transportation Between Hospitals</u>	10A NCAC 13P .0221
<u>Ground Ambulance Vehicle Manufacturing Standards</u>	10A NCAC 13P .0224
<u>Specialty Care Transport Program Criteria</u>	10A NCAC 13P .0301
<u>Components of Medical Oversight for EMS Systems</u>	10A NCAC 13P .0401
<u>Components of Medical Oversight for Specialty Care Transp...</u>	10A NCAC 13P .0402
<u>Responsibilities of the Medical Director for EMS Systems</u>	10A NCAC 13P .0403
<u>Responsibilities of the Medical Director for Specialty Ca...</u>	10A NCAC 13P .0404
<u>Requirements for Emergency Medical Dispatch Priority Refe...</u>	10A NCAC 13P .0407
<u>Components of Medical Oversight for Air Medical Programs</u>	10A NCAC 13P .0410
<u>Initial Credentialing Requirements for EMR, EMT, AEMT, Pa...</u>	10A NCAC 13P .0502
<u>Term of Credentials for EMS Personnel</u>	10A NCAC 13P .0503
<u>Reinstatement of Lapsed EMS Credential</u>	10A NCAC 13P .0512
<u>Continuing Education EMS Educational Program Requirements</u>	10A NCAC 13P .0601
<u>Basic and Advanced EMS Educational Institution Requirements</u>	10A NCAC 13P .0602
<u>Initial Designation Process</u>	10A NCAC 13P .0904
<u>Renewal Designation Process</u>	10A NCAC 13P .0905
<u>EMS Educational Institutions</u>	10A NCAC 13P .1505
<u>EMS Personnel Credentials</u>	10A NCAC 13P .1507

**PUBLIC HEALTH, COMMISSION FOR**

<u>Definitions</u>	15A NCAC 18A .1001
<u>Field Sanitation</u>	15A NCAC 18A .1002
<u>Standards and Approval of Plans</u>	15A NCAC 18A .1003
<u>Permits</u>	15A NCAC 18A .1004
<u>Inspections and Reinspections</u>	15A NCAC 18A .1006
<u>Inspection Forms</u>	15A NCAC 18A .1007
<u>Grading</u>	15A NCAC 18A .1008
<u>Standards</u>	15A NCAC 18A .1009
<u>Water Supply</u>	15A NCAC 18A .1011
<u>Recreational Waters</u>	15A NCAC 18A .1012
<u>Toilet: Handwashing: Laundry: and Bathing Facilities</u>	15A NCAC 18A .1014
<u>Food Service Facilities</u>	15A NCAC 18A .1017
<u>Food Service Utensils and Equipment</u>	15A NCAC 18A .1018
<u>Food Supplies</u>	15A NCAC 18A .1019
<u>Shellfish</u>	15A NCAC 18A .1020
<u>Milk and Milk Products</u>	15A NCAC 18A .1021
<u>Food Protection</u>	15A NCAC 18A .1022
<u>Food Service Employees</u>	15A NCAC 18A .1027
<u>Definitions</u>	15A NCAC 18A .1601
<u>Approval of Plans</u>	15A NCAC 18A .1602
<u>Inspections</u>	15A NCAC 18A .1603
<u>Reinspections: Visits</u>	15A NCAC 18A .1604
<u>Inspection Forms</u>	15A NCAC 18A .1605
<u>Scoring System</u>	15A NCAC 18A .1606
<u>Floors</u>	15A NCAC 18A .1607
<u>Walls and Ceilings</u>	15A NCAC 18A .1608
<u>Lighting and Ventilation</u>	15A NCAC 18A .1609
<u>Toilet: Handwashing: and Bathing Facilities</u>	15A NCAC 18A .1610
<u>Water Supply</u>	15A NCAC 18A .1611
<u>Drinking Water Facilities: Ice Handling</u>	15A NCAC 18A .1612
<u>Liquid Wastes</u>	15A NCAC 18A .1613
<u>Solid Wastes</u>	15A NCAC 18A .1614
<u>Pest Control and Outdoor Premises</u>	15A NCAC 18A .1615
<u>Chemical and Medication Storage</u>	15A NCAC 18A .1616
<u>Beds: Linen: Laundry: Furniture</u>	15A NCAC 18A .1617
<u>Food Service Utensils and Equipment</u>	15A NCAC 18A .1618
<u>Food</u>	15A NCAC 18A .1619
<u>Food Protection</u>	15A NCAC 18A .1620
<u>Employees</u>	15A NCAC 18A .1621
<u>Circulation System</u>	15A NCAC 18A .2518
<u>Suction Hazard Reduction</u>	15A NCAC 18A .2539

**ARCHITECTURE AND REGISTERED INTERIOR DESIGNERS, BOARD OF**

<u>Fees</u>	21 NCAC 02 .0108
<u>Architect, Registered Interior Designer, Firm or Partners...</u>	21 NCAC 02 .0201
<u>Rules of Professional Conduct</u>	21 NCAC 02 .0203

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**RULES REVIEW COMMISSION**

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<u>Requirement for and Use of Professional Seal by an Archi...</u>	21 NCAC 02 .0206
<u>Incompetence</u>	21 NCAC 02 .0210
<u>Individual Licenses and Registrations</u>	21 NCAC 02 .0213
<u>Firm Practice of Architecture and Registered Interior Design</u>	21 NCAC 02 .0214
<u>Out of State Firms</u>	21 NCAC 02 .0215
<u>Architectural Licensure by Examination</u>	21 NCAC 02 .0302
<u>Architecture Licensure by Reciprocity</u>	21 NCAC 02 .0303
<u>Interior Designer Registration</u>	21 NCAC 02 .0306
<u>Certification and Licensure for Military Personnel and Mi...</u>	21 NCAC 02 .0307
<u>Who Shall Hear Contested Cases</u>	21 NCAC 02 .0606

**CERTIFIED PUBLIC ACCOUNTANT EXAMINERS, BOARD OF**

<u>Conditioning Requirements</u>	21 NCAC 08F .0105
<u>Work Experience Required of Candidates for CPA Certification</u>	21 NCAC 08F .0401

**CHIROPRACTIC EXAMINERS, BOARD OF**

<u>Preceptors</u>	21 NCAC 10 .0218
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**INTERPRETER AND TRANSLITERATOR LICENSING BOARD**

<u>Continuing Education Requirements</u>	21 NCAC 25 .0501
<u>Proration of Continuing Education Requirements</u>	21 NCAC 25 .0502
<u>Failure to Meet Continuing Education Requirements</u>	21 NCAC 25 .0503
<u>CEU Credit for Workshops, Conferences, and Independent St...</u>	21 NCAC 25 .0505

**LANDSCAPE ARCHITECTS, BOARD OF**

<u>Fees</u>	21 NCAC 26 .0105
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**FUNERAL SERVICE, BOARD OF**

<u>Passing Score</u>	21 NCAC 34B .0208
<u>National Board Certificate</u>	21 NCAC 34B .0211
<u>Expiration of Text Scores</u>	21 NCAC 34B .0213

**PODIATRY EXAMINERS, BOARD OF**

<u>Continuing Education</u>	21 NCAC 52 .0208
<u>Fee Schedule</u>	21 NCAC 52 .0613

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**LIST OF APPROVED TEMPORARY RULES**  
**March 27, 2024 Meeting**

**EDUCATION, STATE BOARD OF**

<u>Denying a License Application or Suspension or Revocation...</u>	16 NCAC 06C .0372
<u>Reporting Requirements for Suspected Child Abuse by a Loc...</u>	16 NCAC 06C .0373
<u>Investigation Requirements to Determine Reasonable Cause ...</u>	16 NCAC 06C .0374
<u>Voluntary Surrender of an Educator License</u>	16 NCAC 06C .0375
<u>Reinstatement or Issuance of a Suspended, Revoked, or Den...</u>	16 NCAC 06C .0376
<u>Definitions</u>	16 NCAC 06C .0601
<u>Denying or Sanctioning a License</u>	16 NCAC 06C .0603
<u>Investigation of Alleged Misconduct by a Licensed Profess...</u>	16 NCAC 06C .0604

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**RULES REVIEW COMMISSION**

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<u>Disciplinary Sanctions</u>	16 NCAC 06C .0605
<u>Voluntary Surrender of a License</u>	16 NCAC 06C .0606
<u>Reinstatement of or Reconsideration for a License</u>	16 NCAC 06C .0607
<u>Reporting Requirements for PSU Administrators</u>	16 NCAC 06C .0608
<u>Definitions</u>	16 NCAC 06E .0201
<u>Administration of Interscholastic Athletes</u>	16 NCAC 06E .0204
<u>Student Health and Safety Requirements for Interscholasti...</u>	16 NCAC 06E .0205
<u>Athletic Trainers</u>	16 NCAC 06E .0206
<u>Student Participation Rules for Interscholastic Athletics</u>	16 NCAC 06E .0207
<u>Amateur Rules for Interscholastic Athletics</u>	16 NCAC 06E .0208
<u>Penalty Rules for Interscholastic Athletics</u>	16 NCAC 06E .0209
<u>Limitations on Recruiting and Undue Influence</u>	16 NCAC 06E .0210
<u>Appeals</u>	16 NCAC 06E .0215

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**RULES REVIEW COMMISSION SPECIAL MEETING  
MINUTES  
April 8, 2024**

The Rules Review Commission met for a special meeting on Monday, April 8, 2024, in the Commission Room at 1711 New Hope Church Road, Raleigh, North Carolina, and via Webex. The special meeting was called to review temporary rules from follow-up matters from the Coastal Resources Commission.

Commissioners Jeanette Doran, Bill Nelson, and Jake Parker were present in the Commission Room. Commissioners Wayne R. Boyles III, Jay Hemphill, Jeff Hyde, Barbara Jackson, Brandon Leebrick, Randy Overton, and Paul Powell were present via Webex.

Staff member Alexander Burgos, Commission Counsel Seth Ascher, Brian Liebman, Bill Peaslee, and Travis Wiggs were in the Commission room.

The meeting was called to order at 10:00 a.m. with Chair Doran presiding.

The Chair read the notice required by G.S. 138A-15(e) and reminded the Commission members that they have a duty to avoid conflicts of interest and the appearance of conflicts of interest.

**Review of Log of Filings (Temporary Rules)**

Upon the call of the Chair, the Commission voted to adopt staff's recommendation to object to 15A NCAC 07H .0507, .0508, .0509; 07I .0702; 07J .0203, .0204, .0206, .0207, .0208; 07M .0401, .0402, .0403, .0701, .0703, .0704, and .1101 finding that the agency's statement of need did not meet the criteria of G.S. 150B-21.1(a). As part of the same motion, the Commission also voted to adopt the staff's recommendations to object to 15A NCAC 07H .0507, .0508, .0509; 07I .0702; 07J .0203, .0204, .0207, .0208; 07M .0401, .0402, .0403, .0701, .0704, and .1101 pursuant to G.S. 150B-21.9(a). The vote was by roll-call vote, ayes 8, noes 1 as follows: Voting in the affirmative: Wayne R. Boyles III, Jay Hemphill, Jeff Hyde, Brandon Leebrick, Bill Nelson, Randy Overton, Jake Parker, and Paul Powell – 9. Voting in the negative: Barbara Jackson - 1.

Mary Lucasse, with the Department of Justice and representing the agency, addressed the Commission.

Joy Greenwood, the Jockey's Ridge State Park Superintendent, addressed the Commission.

Elizabeth Rasheed with the Southern Environmental Law Center addressed the Commission.

Chris Millis with the North Carolina Home Builders Association addressed the Commission.

Laura Truesdale, representing Cedar Point Developers, LLC, addressed the Commission,

**COMMISSION BUSINESS**

At 11:22 a.m., upon a motion by Chair Doran and a second by Commissioner Jackson, the Commission voted to call the public meeting of the Rules Review Commission into recess and enter into a closed session pursuant to G.S. 143-318.11(a)(1) to consult with counsel regarding CRC v. RRC pursuant to G.S. 143.11(a)(3), by roll-call vote, ayes 9, noes 0 as follows: Voting in the affirmative: Wayne R. Boyles III, Jay Hemphill, Jeff Hyde, Barbara Jackson, Brandon Leebrick, Bill Nelson, Randy Overton, Jake Parker, and Paul Powell – 9. Voting in the negative: None.

Commissioners Wayne R. Boyles, III, and Paul Powell did not return to the regular meeting following the closed session.

At 12:00 p.m., upon a motion by the Chair and a second by Commissioner Jackson, the Commission voted to come out of closed session and reconvene the public meeting of the Rules Review Commission by roll-call vote, ayes 7, noes 0 as follows: Voting in the affirmative: Jay Hemphill, Jeff Hyde, Barbara Jackson, Brandon Leebrick, Bill Nelson, Randy Overton, and Jake Parker– 7. Voting in the negative: None.

The meeting was adjourned at 12:02 p.m.

The next regularly scheduled meeting of the Commission is Tuesday, April 30, 2024, at 10:00 a.m.

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Alexander Burgos, Paralegal

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Minutes approved by the Rules Review Commission:  
Jeanette Doran, Chair



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**RULES REVIEW COMMISSION**

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**Rules Review Commission Special Meeting April 8, 2024**  
**Held Via WebEx**

<b>Name</b>	<b>Agency</b>
Joy Greenwood	ncparks.gov
Ann-Cabell Baum	glenwoodagency.com
Catherine Blum	DEQ
Emily Jones	DOT
Rep. Bobby Hanig	ncleg.net
Missie Harrell	
Rachel Love-Adrick	DEQ
Ashley Snyder	OAH
Mary Lucasse	DOJ
Ray Gronberg	businessnc.com
Tancred Miller	DEQ
Sharon Martin	Commerce
Bonnie Raynor Collins	
Zee Lamb	joelambjr.com
Anna Hayworth	Agriculture
Angela Willis	DEQ
Michael Lopazanski	DEQ
Jonathan Avery	DNCR
Daniel Govoni	DEQ
Jessica Gibson	DEQ
Arthur Harrell	OAH
Colette Walker	
Joy Greenwood	ncparks.gov
Dana McGhee	OAH
William Collins	
Jonathan Avery	DNCR
Jonathan Howell	DEQ
Samuel King	
Jordan Hennesey	
William Collins	
Corinne Saunders	viriniamedia.com
Seavers, Dennis	Barbers
Kasen Wally	DEQ
Bonnie Collins	
Peggy Birkemeier	
Jenny Kelvington	ncleg.gov
Linda McGee	
Linda Jurkowitz	
Kip Tabb	
Amy Spruill	wcpss.net
Jay Wheless	whelesslawfirm.com
Mackenzie Todd	DEQ
Kevin Brinkley	

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**RULES REVIEW COMMISSION**

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Ronald Renaldi	
Helen Landi	
Thomas Blom	
Margaret Miller Growe	tamassee.org
Alyson Flynn, NCCF	nccoast.org
Holley Snider	DEQ
Holly Nettles	
Craig Cho music	
Adam Wagner	newsobserver.com
Kirk Osteen	ncchamber.com
Adriana Horne	wtkr.com
Gregory Bodnar	DEQ
Jason And Megan	
Madison Jalligo	
Jeanne Brook	
Katie For Dare	
Dan Gerlach	
Roberta Thuman	nagsheadnc.gov
Amanda Reeder	911 Board