



State of Rhode Island and Providence Plantations
Department of State | Office of the Secretary of State
Nellie M. Gorbea, Secretary of State

Rules and Regulations Filing Form

1. Agency Name and Address

Behavioral Healthcare, Developmental Disabilities and Hospitals, Department of

Barry Hall, 14 Harrington Rd., Cranston, RI 02920

2. Title of Rule

Rules and Regulations Licensing Procedure and Process for Facilities and Programs Licensed by the Department of Behavioral Healthcare, Developmental Disabilities and Hospitals

3. Statutory Source of Authority

RIGL section 40.1-24-1 et. seq., RIGL section 40.1-24.5-1 et seq., RIGL section 40.1-8.5 et seq., and RIGL section 40.1-1-13(11) et seq.

4. Concise Explanatory Statement - §42-35-2.3

The purpose of the proposed amendments to the Regulations is to further define and establish prevailing standards for the licensure of agencies, facilities, programs, and organizations that provide services for adults with developmental disabilities or mental health services for adults who are not in the custody of the Department of Children, Youth, and Families (DCYF) and/or substance abuse services for children and adults. Since the close of the public comment period which was extended to July 6, 2011, BHDDH has made technical revisions to fix typographical errors and formatting.

5. Type of Filing

Emergency Rules	
<p>A1. Emergency 120-day initial - §42-35-3(b)</p> <p><input type="checkbox"/> Adoption</p> <p><input type="checkbox"/> Amendment of ERLID:</p> <p><input type="checkbox"/> Repeal of ERLID:</p> <p>Brief Statement of Reason for Finding Imminent Peril §42-35-3(b)(2):</p>	<p>A2. Emergency 90-day renewal - §42-35-3(b)</p> <p><input type="checkbox"/> Adoption</p> <p><input type="checkbox"/> Amendment</p> <p>Indicate ERLID of 120-day initial:</p>

Final Rules			
<p><input checked="" type="checkbox"/> B1. Amendment</p> <p>Supersedes ERLID: 3090</p>	<p><input type="checkbox"/> B2. Adoption</p> <p>Repeals ERLID:</p>	<p><input type="checkbox"/> B3. Repeal</p> <p>Expires ERLID:</p>	<p><input type="checkbox"/> C. Technical Revision</p>
<p>If B1 or C, please indicate new, amended, deleted, or revised sections: Revised: Title Page, Preface, Sections 1.19, 1.20, 1.33, 3.3, 3.3.1-3.3.6, 18.3, 18; New: Sections 4.1.1-4.1.5, 6.4, 6.5; Deleted: Sections 1.43, 1.47; Renumbered Sections 1.44, 1.45, 1.46, 1.48, 1.49</p>			

6. Notice and Hearing Information

Date of Public Notice - §42-35-3(a)(1):06/01/2011
 Date of Public Hearing - §42-35-3(a)(2):07/01/2011
 End of Comment Period:07/05/2011

7. Agency Additional Information - Web Page

<http://www.bhddh.ri.gov>

8. Certification

I hereby certify that the attached rules and regulations were adopted in accordance with the Administrative Procedures Act (42-35) and that they are true copies of this Department, attest,

 Name

 Title

 Notary Public

Subscribed and sworn before me
 this _____ day of _____, _____

