Authorization Objectives

- Recognize what is an authorization
- Identify the steps/stages for obtaining an authorization
- Identify where you can obtain the necessary forms
What is an authorization?
What is an authorization?

- Agent of the state
- Delegated the authority
- Valid in local health department’s territory (a.k.a. county or district)
Authorization Areas

- Food, Lodging, & Institutions*
- On-Site Wastewater*
- Pools
- Child Care Centers
- Child Lead Prevention
- Tattoos
- Migrant Housing*
- Private Drinking Water Wells

*Migrant Housing is included with FLI & OSWW
Getting your authorization!

First things First!
Register with the RS Board!

Proposed Revisions to RS Board Laws and Rules (send comments before Feb. 28)

The mission of the NC State Board of Sanitarian Examiners is to assure that the services performed by Registered Sanitarians are ethical, legal, and provide appropriate protection of the public health. The Board's activities include licensing, enforcement of state laws, and regulation of the practice of midwifery. A certificate of proficiency in midwifery is awarded to those who have qualified by education, examination, or experience. The Board also considers requests for continuing education credit, approves applications for registration, considers exam grades, issues certificates of registration, and performs routine business of the Board. The examination is offered three times a year, once each in the West, the Piedmont, and the East part of North Carolina.

webmaster@rsboard.com
Steps to your authorization

Delegation of authority

Training Stage

LHD Employee
Training Stage

- Attend all of CIT
- Successfully complete CIT
  - 100% attendance
  - 80% or higher on all exams
  - Turn in all required homework/practice inspections
Steps to your authorization

Delegation of authority

Practice Stage

Training Stage

LHD Employee
• Each authorization you will be required to perform an identified number of practice inspections.
• Submit practice inspections to your Regional Specialist.
• Complete the authorization checklist and request for delegation form, and submit to the Office of Education & Training (OET).
Authorization procedures checklists

On-Site Wastewater Authorization Procedures
Original Set
(Please make all copies and discard all previous forms)
Authorization Procedures Revised June 24, 2004

Child Care Centers Authorization Procedures
Original Set
(Please make all copies and discard all previous forms)
Authorization Procedures Revised May 31, 2004

Food, Lodging & Institutions Authorization Procedures
Original Set
(Please make all copies and discard all previous forms)
Authorization Procedures Revised June 24, 2004

Public Swimming Pools Authorization Procedures
Original Set
(Please make all copies and discard all previous forms)
Authorization Procedures Revised June 24, 2004

Tattoo Program Authorization Procedures
Original Set
(Please make all copies and discard all previous forms)
Authorization Procedures Revised November 30, 2001

Childhood Lead Poisoning Prevention Authorization Procedures
Original Set
(Please make all copies and discard all previous forms)
Authorization Procedures Revised January 10, 2001
## Application for Delegation of Authority Form

### N. C. Department of Health and Human Services
**Environmental Health Section**

**Application for Delegation of Authority**

- Initial Authorization
- Re-authorization
- Previous Identification Card attached or returned to

**Registration Number** ________________________ **Date of Employment:** ________________________

**Name:** ________________________ **Date of Birth:** ________________________

**Position Title:** ________________________ **Email Address:** ________________________

**County of Employment:** ________________________

**County of Previous Employment:** ________________________ **Date Left:** ________________________

**Previous Authorization:**

<table>
<thead>
<tr>
<th>CCC</th>
<th>FLI</th>
<th>OSW</th>
<th>TATTOO</th>
</tr>
</thead>
<tbody>
<tr>
<td>CLPP</td>
<td>MH</td>
<td>POOLS</td>
<td>WELLS</td>
</tr>
</tbody>
</table>

**Initial Applicant Training: Location:** ________________________ **Dates:** ________________________

**Type of Authorization Requested:**

<table>
<thead>
<tr>
<th>CCC</th>
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</tr>
</thead>
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</tr>
</tbody>
</table>

### Statement of Applicant

I hereby request that I be authorized to enforce state laws and rules.

**Date:** ________________________ **Signature:** ________________________

### Statement of Supervisor

I hereby certify that the applicant has successfully completed the Preliminary Duties and Field Practice and Review. The applicant is ready to be considered for authorization.

**Date:** ________________________ **Signature:** ________________________

### Instructions

**Purpose:** To request authority to be delegated to an environmental health specialist to administer and enforce state environmental health laws and rules.

**Preparation:** This form shall be completed by the applicant when all Preliminary Activities and Field Practice and Review have been completed or when the applicant changes the county of employment. Each item preceded by a blank space must be initialed and dated by the applicant when the activity has been completed.

**Distribution:**

1. Original to: Education & Training, Environmental Health Section
   1032 Mail Service Center, Raleigh, NC 27699-1032, (Courier 52-01-00)
2. Copy: Local health department files.

**Disposition:** This form may be destroyed in accordance with Standard 6, Personnel Records, Records Disposition Schedule published by the North Carolina Division of Archives and History.

**Additional Forms:** This form may be copied as needed.

- DPH/EHS 1050 (REVISED 2/23/12)
- A.D.B.
Visit our [website](#) to access the authorization forms:

You and your supervisor are responsible to complete them as directed.
Steps to your authorization

Delegation of authority

- Evaluation Stage
- Practice Stage
- Training Stage

LHD Employee
Evaluation Stage

Regional specialist will...

- Give you a field evaluation
- Give you a written exam
  - 70% or higher
Steps to your authorization

- Training Stage
- Practice Stage
- Evaluation Stage
- Reward Stage

Delegation of authority

LHD Employee
Reward Stage

Upon successful completion…

- Given the Delegation of Authority in the requested area
- Mailed an ID card indicating you are an agent of the state
Don't forget about your authorization manual!
Questions