



**SUBMITTAL TO THE HARMONY HAVEN CHILDREN
AND YOUTH CENTER GOVERNING BOARD
COUNTY OF RIVERSIDE, STATE OF CALIFORNIA**



ITEM: 3.1
(ID # 25152)

MEETING DATE:
Tuesday, June 25, 2024

FROM : Harmony Haven Children & Youth Cntr Gov Brd

SUBJECT: HARMONY HAVEN CHILDREN AND YOUTH CENTER: Receive and File Essential Terms of Agreement Between the California Department Of Social Services and the County Of Riverside for Fiscal Year 23/24 through 26/27 for the licensing of Harmony Haven Children and Youth Center Transitional Care Facility. All Districts. [\$0]

RECOMMENDED MOTION: That the Governing Board:

1. Receive and file the Essential Terms of the Agreement between the California Department of Social Services (CDSS) and the County of Riverside for the operating standards and regulations pertaining to a licensed Transitional Shelter Care Facility (TrSCF), effective March 1, 2024 through March 1, 2027. This Agreement and accompanying operating standards shall apply to the TrSCF license for Harmony Haven Children and Youth Center and shall have the full force and effect of regulations promulgated by the CDSS.

ACTION:

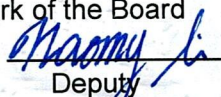

Charity Douglas, DPSS Director

6/4/2024

MINUTES OF THE GOVERNING BOARD

On motion of Director Spiegel, seconded by Director Washington and duly carried, IT WAS ORDERED that the above matter is approved as recommended.

Ayes: Jeffries, Spiegel and Washington
Nays: None
Absent: Perez and Gutierrez
Date: June 25, 2024
xc: HHCYC

Kimberly A. Rector
Clerk of the Board
By: 
Deputy

**SUBMITTAL TO THE HARMONY HAVEN CHILDREN
AND YOUTH CENTER GOVERNING BOARD
COUNTY OF RIVERSIDE, STATE OF CALIFORNIA**

FINANCIAL DATA	Current Fiscal Year:	Next Fiscal Year:	Total Cost:	Ongoing Cost
COST	\$ 0	\$ 0	\$ 0	\$ 0
NET COUNTY COST	\$ 0	\$ 0	\$ 0	\$ 0
SOURCE OF FUNDS: N/A			Budget Adjustment:	N/A
			For Fiscal Year:	

C.E.O. RECOMMENDATION: Approve

BACKGROUND:

Summary

In April 2022, Riverside County, on behalf of its Children Services Division (CSD), submitted a Community Care Licensing application to CDSS to operate a Transitional Shelter Care Facility (TrSCF) known as Harmony Haven Children and Youth Center (HHCYC).

On March 1, 2024, CDSS entered into an Agreement with the County to outline the operating standards and essential terms to operate Harmony Haven Children and Youth Center as a licensed TrSCF. The license is valid for three (03) years through March 1, 2027 and subject to extension with six (06) month increments upon a written request submitted by the County. This agreement was executed in accordance with the Department of Public Social Services delegation of authority authorized by the Board of Supervisors on February 28, 2023 item number 3.30.

According to this Agreement, the County shall comply with all state and federal laws pertaining to the TrSCFs, and the most recent version of the Operating Standards incorporated into this Agreement. During the term of this Agreement, the County will continue its diligent efforts to increase its home-based care and short-term residential therapeutic program capacity and services to support all children and youth in the County's jurisdiction.

The Board of Directors for Harmony Haven Children and Youth herein, is required to receive and file the executed Essential Terms of the Agreement between CDSS and the County and the accompanying Standard Operating Procedures attached to it.

Impact on Residents and Businesses

The Harmony Haven Children and Youth Center will enhance placement services and achieve the department goal of providing safety and professional care to children/youth in a homelike setting while a suitable long-term placement is being secured.

**SUBMITTAL TO THE HARMONY HAVEN CHILDREN
AND YOUTH CENTER GOVERNING BOARD
COUNTY OF RIVERSIDE, STATE OF CALIFORNIA**

ATTACHMENTS (if any, in this order):

Attachment A. Essential Terms of Agreement between CDSS and the County of Riverside.

Attachment B. Transitional Shelter Care Facility Operating Standards.



KIM JOHNSON
DIRECTOR

CALIFORNIA HEALTH & HUMAN SERVICES AGENCY
DEPARTMENT OF SOCIAL SERVICES
744 P Street • Sacramento, CA 95814 • www.cdss.ca.gov



GAVIN NEWSOM
GOVERNOR

ESSENTIAL TERMS OF AGREEMENT BETWEEN THE CALIFORNIA DEPARTMENT OF SOCIAL SERVICES AND THE COUNTY OF RIVERSIDE

This Essential Terms of Agreement is made between the California Department of Social Services ("CDSS") and the County of Riverside ("County"). The CDSS and the County may collectively be referred to as the "Parties."

A. RECITALS

1. Kim Johnson, in her official capacity as Director of the CDSS, has determined that the County has operated and continues to operate, or use for temporary receipt of foster children, an unlicensed transitional shelter care facility ("TrSCF") commonly known as Harmony Haven Children and Youth Center, located at 14763 Manzanita Park Rd, Beaumont, California, in violation of Health and Safety Code sections 1503.5 and 1508. The County does not contest this determination.
2. Health and Safety Code section 1502.3 defines a TrSCF as a community care facility that is a short-term residential care program that meets specified requirements. The County has submitted a complete application to operate a TrSCF in the County. The County's application for a license for a TrSCF was made pursuant to the attached Operating Standards. The CDSS has determined that it can issue a provisional license to the County to operate Harmony Haven Children and Youth Center as a TrSCF.

B. TERMS OF THE AGREEMENT

Therefore, in consideration of the mutual promises set forth below, the CDSS and the County agree as follows:

1. The Parties hereby enter into this Essential Terms of Agreement ("Agreement") and accompanying Operating Standards, which are attached to this Agreement and incorporated by reference. The Parties agree that this Agreement and accompanying Operating Standards shall apply to the TrSCF license for Harmony Haven Children and Youth Center and shall have the full force and effect of regulations promulgated by the CDSS. The CDSS shall have full authority to revoke the County's TrSCF license or suspend childcare operations at the TrSCF for violations of the Operating Standards.
2. The TrSCF license for the County to operate Harmony Haven Children and Youth Center shall be valid for (3) three years from the date the provisional license is issued. The TrSCF license expiration date may be extended upon written request by the County. The County's extension request shall outline the circumstances that necessitate the County's ongoing reliance on Harmony Haven Children and Youth Center as part of its continuum of care. The County's extension request shall be provided to the CDSS no later than thirty calendar days prior to the County's TrSCF

license expiration date. The CDSS will review each extension request to determine whether circumstances justify further extension, which shall be contingent upon appropriate additional steps the County will take to obviate those circumstances during the extension. The CDSS will indicate in writing to the County whether it has granted the extension request. The CDSS and the County agree that the TrSCF license will only be extended in six-month increments in accordance with the Agreement. The terms of this Agreement and the accompanying Operating Standards, including Operating Standards modified or updated pursuant to paragraph 3, will govern each extension to the TrSCF license.

3. The County shall comply with all state and federal laws pertaining to the TrSCFs, and the most recent version of the Operating Standards incorporated into this Agreement. The CDSS reserves the right to modify the existing Operating Standards or issue updated Operating Standards. The modifications or updates to the accompanying Operating Standards may include, but are not limited to, changes to comply with state/federal law, regulations and/or guidance. Where practicable and legally permissible, the CDSS will give the County advance notice of changes to the law, regulations or guidance that will result in modifications or updates to the Operating Standards. In the event the CDSS modifies or updates the Operating Standards, the CDSS will give the County notice of the new version of the Operating Standards. The Parties agree that this Agreement, and the license issued pursuant to it, will be governed by the most recent version of the Operating Standards.
4. It is the expectation of the Parties that the County will continue its diligent efforts to increase its home-based care and short-term residential therapeutic program capacity and services to support children, including children with higher needs, in home-based care sufficiently such as to eliminate the need to extend the license at the end of the three-year term, consistent with the statutory direction of the continuum of care reform as enacted by Assembly Bill 403 (Statutes of 2015, Chapter 773) and subsequent related statutes. It is the expectation of the CDSS that the County will continue to work together with the CDSS to develop and provide services that meet the needs of all dependent children in the County's jurisdiction. Utilization of the TrSCF requires a written, CDSS-approved county plan (County Plan) that sets forth the manner in which the County will use the TrSCF and the County's plan to implement targeted strategies to eliminate the County's need for and/or reliance on shelter-based care. Failure to comply with the County Plan may result in a Corrective Action Plan or other action as determined by the CDSS. The CDSS shall review annually with the County the ongoing need for the TrSCF and County compliance with the County Plan. To facilitate this review, the County shall provide the data specified in the Reporting Requirements section of the licensing standards. After the CDSS grants the license, and in order to further this review, the CDSS will communicate in writing to the County its expectations for the County's child welfare practices for the duration of the license.
5. Nothing in this Agreement shall prevent the County from terminating operation of the TrSCF, or from operating a facility that would not otherwise require licensure, as determined by the CDSS. Further, nothing in the Agreement precludes the County from changing, modifying and/or updating any policies and practices in a manner not

ESSENTIALS TERMS OF AGREEMENT

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inconsistent with the terms specified in this Agreement, the Operating Standards, and any other documents executed in connection with this Agreement.

6. Pursuant to the CDSS Manual of Policy and Procedures Section 23-650.18, the CDSS gives prior approval to the County to negotiate for direct care services to staff the TrSCF.
7. This Agreement is the product of the Parties' mutual negotiation and preparation, and accordingly shall not be deemed to have been prepared or drafted by either party. Any court seeking to interpret this Agreement should construe it as the product of mutual negotiation and preparation.
8. This Agreement may be executed in counterparts, each of which shall be deemed an original, but all of which together will constitute one and the same Agreement. This Agreement may also be executed via facsimile or e-mail and such facsimile or e-mail signature shall be deemed an original.
9. The undersigned warrant that they have authority to agree to the terms of this Agreement on behalf of the respective Parties.

The Parties have executed this Agreement on the dates specified below.

Dated: February 29, 2024

THE COUNTY OF RIVERSIDE

Signature: *Charity Douglas*

Name: Charity Douglas

Title: Director of DPSS

Dated: March 1, 2024

THE CALIFORNIA DEPARTMENT OF SOCIAL SERVICES

Signature: _____

Name: Kevin Gaines

Title: Deputy Director



TRANSITIONAL SHELTER CARE FACILITY OPERATING STANDARDS

Chapter 12 **VERSION 1**

Effective: February 2023

OPERATING STANDARDS
Chapter 12 Transitional Shelter Care Facility

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Article 1. General Requirements and Definitions

86600 GENERAL

- (a) Pursuant to the Essential Terms of Agreement, the licensee shall be governed by the operating standards specified in this chapter and ensure compliance with all applicable laws and regulations.
- (b) The licensee shall not accept for placement nonminor dependents, unless the facility is licensed for that age group and meets the requirements of [Interim Licensing Standards \(ILS\) for Nonminor Dependents in Foster Care Assembly Bill \(AB\) 12](#) [AB 12 ILS, Group Homes, Chapter 5, Subchapter 4, commencing with Section 84001].
 - (1) AB 12 ILS Section 84468.3 shall not apply to transitional shelter care facilities.
- (c) The licensee shall not accept for placement children who are under the age of six years, unless the facility is licensed for that age group and meets the requirements specified in Subchapter 2 of these operating standards, commencing with Section 86872.1.
- (d) The licensee shall not accept for placement parenting minors or nonminor dependents and their children unless the facility is licensed to accept them and meets the requirements specified in Subchapter 2 of these operating standards, commencing with Section 86872.1.

86601 DEFINITIONS

The following general definitions shall apply wherever the terms are used throughout these operating standards except where specifically noted otherwise.

- (a) (1) "Accredited schools, colleges or universities, including correspondence courses offered by the same," means those educational institutions or programs granted public recognition as meeting established standards and requirements of an accrediting agency authorized by the U.S. Secretary of Education.
- (2) "Activities of Daily Living" (ADLs) mean the following six activities:
 - (A) Bathing: Cleaning the body using a tub, shower or sponge bath, including getting a basin of water, managing faucets, getting in and out of tub or shower, and reaching head and body parts for soaping, rinsing and drying.
 - (B) Dressing: Putting on and taking off, fastening and unfastening garments and undergarments and special devices such as back or leg braces, corsets, elastic stockings/garments and artificial limbs or splints.
 - (C) Toileting: Getting on and off a toilet or commode, emptying a commode, managing clothes, wiping and cleaning the body after toileting, and using and emptying a bedpan and urinal.
 - (D) Transferring: Moving from one sitting or lying position to another sitting or lying position (e.g., from bed to or from a wheelchair, or sofa, coming to a standing position and/or repositioning to promote circulation and to prevent skin breakdown).

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- (E) Contenance: Ability to control bowel and bladder as well as to use ostomy and/or catheter receptacles, and to apply diapers and disposable barrier pads.
- (F) Eating: Reaching for, picking up, grasping a utensil and cup; getting food on a utensil; bringing food, utensil, and cup to mouth; manipulating food on plate; and cleaning face and hands as necessary following meal.

HANDBOOK BEGINS HERE

See also the definition of "Client Who Relies Upon Others to Perform All Activities of Daily Living" in Section 86601(c)(13).

HANDBOOK ENDS HERE

- (3) "Administrator" means the licensee, or the adult designated by the licensee to act on their behalf in the overall management of the facility.
 - (4) "Adult" means a person who is 18 years of age or older.
 - (5) "Affiliated with licensee" means members of board of directors, executive director, officers and individuals paid by the transitional shelter care facility licensee as staff, consultant or contractor used to fulfill the plan of operation.
 - (6) "Applicant" means any individual, firm, partnership, association, corporation, county, city, public agency or other government entity that has made application for a community care facility license, or special permit.
 - (7) "Approved schools, colleges or universities, including correspondence courses offered by the same," means those approved/authorized by the U.S. Department of Education, Office of Postsecondary Education or by the California Department of Consumer Affairs, Bureau for Private Postsecondary and Vocational Education, pursuant to Education Code Sections 94900 or 94915.
 - (8) "Assaultive Behavior" means violent, physical actions which are likely to cause immediate physical harm or danger to an individual or others.
 - (A) Verbal Assault is not considered a form of assaultive behavior.
 - (9) "Authorized Representative" means any person or entity authorized by law to act on behalf of any client. Such person or entity may include but not be limited to a minor's parent, a legal guardian, a conservator or a public placement agency.
 - (10) "Automated External Defibrillator" (AED) means a light-weight, portable device used to administer an electric shock through the chest wall to the heart. Built-in computers assess the patient's heart rhythm, determine whether defibrillation (electrical shock) is needed and then administer the shock. Audible and/or visual prompts guide the user through the process.
- (b) (1) "Basic Rate" means the rate charged by a facility to provide basic services. For SSI/SSP

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- recipients, the basic rate means the established nonmedical out-of-home care rate which includes any exempt income allowance but does not include that amount allocated for the recipient's personal and incidental needs.
- (2) "Basic Services" means those services required by applicable law, regulation, and operating standards to be provided by the licensee in order to obtain and maintain a community care facility license.
 - (3) "Behavior Management Consultant", for the purpose of this chapter, means a person who designs and/or implements behavior modification intervention services and meets the requirements specified in California Code of Regulations, Title 17, Section 54342(a)(13)(A)1-7.

HANDBOOK BEGINS HERE

Section 54342(a)(13)(A)1-7 of the California Code of Regulations, Title 17, Division 2, Chapter 3, Subchapter 2 states as follows:

- (1) Individuals vendored as a behavior management consultant prior to, or as of, December 31, 2006, that have not previously completed twelve semester units in applied behavior analysis, shall have until December 31, 2008 to complete twelve semester units in applied behavior analysis and possess a license and experience as specified in 3. through 7. below.
- (2) Individuals vendored as a behavior management consultant on, or after, January 1, 2007, shall, prior to being vendored, have completed twelve semester units in applied behavior analysis and possess a license and experience as specified in 3. through 7. below.
- (3) Possesses a valid license as a psychologist from the Medical Board of California or Psychology Examining Board; or
- (4) Is a Licensed Clinical Social Worker pursuant to Business and Professions Code, Sections 4996 through 4998.7; or
- (5) Is a Licensed Marriage and Family Therapist pursuant to Business and Professions Code, Sections 4980 through 4984.7; or
- (6) Is any other licensed professional whose California licensure permits the design and/or implementation of behavior modification intervention services.
- (7) Have two years experience designing and implementing behavior modification intervention services.

HANDBOOK ENDS HERE

- (c) (1) "Capacity" means the maximum number of persons authorized to be provided care and supervision at any one time in any licensed facility.
- (2) "Care and Supervision" means any one or more of the following activities provided by a person or facility to meet the needs of the clients:

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- (A) Assistance in dressing, grooming, bathing, and other personal hygiene.
 - (B) Assistance with taking medication, as specified in Section 86675.
 - (C) Central storing and/or distribution of medications, as specified in Section 86675.
 - (D) Arrangement of and assistance with medical and dental care.
 - (E) Maintenance of house rules for the protection of clients.
 - (F) Supervision of client schedules and activities.
 - (G) Maintenance and/or supervision of client cash resources or property.
 - (H) Monitoring food intake or special diets.
 - (I) Providing basic services as defined in Section 86601(b)(2).
- (3) "Cash Resources" means:
- (A) Monetary gifts.
 - (B) Tax credits and/or refunds.
 - (C) Earnings from employment or workshops.
 - (D) Personal and incidental need allowances from funding sources including but not limited to SSI/SSP.
 - (E) Allowances paid to children.
 - (F) Any other similar resources as determined by the licensing agency.
- (4) "Certificate holder" means a person who has a current group home or short-term residential therapeutic program administrator certificate issued by the Department regardless of whether the person is employed as an administrator in a group home.
- (5) "Certified administrator" means an administrator who has been issued a group home or short-term residential therapeutic program certificate by the Department and whose certificate is current.
- (6) "Child" means a person who is under 18 placed in a licensed transitional shelter care facility by a regional center, a parent or guardian, or a public child placement agency with or without a court order, and a nonminor dependent as defined in Section 86601(n)(2). "Child" also means a person who is:
- (A) 18-22 as specified in the definition for "child with special health care needs" under subdivision (c)(11) and continues to be provided with care and supervision by the transitional shelter care facility.

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- (7) “Child Abuse Central Index” means the California Department of Justice maintained statewide, multi-jurisdictional, centralized index of child abuse investigation reports. These reports pertain to alleged incidents of physical abuse, sexual abuse, mental/emotional abuse and/or severe neglect. Each child protection agency (police, sheriff, county welfare and probation departments) is required by law to forward to the California Department of Justice a report of every child abuse incident it investigates that is determined to be substantiated.
- (8) “Child Abuse Central Index Clearance” means that the California Department of Justice has conducted a name search of the index and the search did not result in a match or the search resulted in a match but the California Department of Social Services determined after an investigation that the allegation of child abuse or neglect was not substantiated.
- (9) “Child and family team” has the same meaning as “child and family team” as defined in Welfare and Institutions Code section 16501(a)(4).

HANDBOOK BEGINS HERE

Welfare and Institutions Code section 16501(a)(4) provides:

“‘Child and family team’ means a group of individuals who are convened by the placing agency and who are engaged through a variety of team-based processes to identify the strengths and needs of the child or youth and their family, and to help achieve positive outcomes for safety, permanency, and well-being. The child and family team shall have the same meaning as the ‘family and permanency team,’ as described in Section 675a(c)(1)(B)(ii) of Title 42 of the United States Code.”

HANDBOOK ENDS HERE

- (10) “Child with Special Health Care Needs” means a person who is 22 years of age or younger, who meets the requirements of Welfare and Institutions Code section 17710, subdivision (a) and all of the following conditions:
 - (A) Has a medical condition that requires specialized in-home health care and
 - (B) Is one of the following:
 - 1. A child who has been adjudged a dependent of the court under Welfare and Institutions Code section 300.
 - 2. A child who has not been adjudged a dependent of the court under Welfare and Institutions Code section 300, but who is in the custody of the county welfare department.
 - 3. A child with a developmental disability who is receiving services and case management from a regional center.
- (11) "Client" means a child or adult who is receiving care and supervision in a community care facility. Client includes "resident" as used in the Community Care Facility Act.
- (12) "Client Who Relies Upon Others To Perform All Activities of Daily Living" means a client

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who is unable to perform all six activities of daily living without physical assistance.

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See also the definition of "Activities of Daily Living" in Section 86601(a)(2).

HANDBOOK ENDS HERE

- (13) "Close friend" means a person who is attached to another by feelings of personal regard as indicated by both parties involved.
- (14) "Community Care Facility" means any facility, place or building where nonmedical care and supervision, as defined in Section 86601(c)(3) are provided.
- (15) "Community Treatment Facility" means any residential facility that provides mental health treatment services to children in a group setting which has the capacity to provide secure containment. The facility's program components shall be subject to program standards developed and enforced by the State Department of Mental Health pursuant to Section 4094 of the Welfare and Institutions Code.
- (16) "Completed Application" means:
- (A) The applicant has submitted and the licensing agency has received all required materials including: an approved fire clearance, if appropriate, from the State Fire Marshal; and a criminal record clearance on the applicant and any other individuals specified in Section 86619.
 - (B) The licensing agency has completed a site visit to the facility.
- (17) "Conservator" means a person appointed by the Superior Court pursuant to the provisions of Section 1800 et seq. of the Probate Code or Section 5350 of the Welfare and Institutions Code, to care for the person, or estate, or person and estate, of another.
- (18) "Consultant" means a person professionally qualified by training or experience to provide expert information on a particular subject.
- (19) "Control of Property" means the right to enter, occupy, and maintain the operation of the facility property within regulatory requirements. Evidence of control of property may include, but is not limited to the following:
- (A) A Grant Deed showing ownership; or
 - (B) The lease agreement or rental agreement; or
 - (C) A court order or similar document which shows the authority to control the property pending outcome of a probate proceeding or an estate settlement.
- (20) "Conviction" means:

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- (A) A criminal conviction in California; or
 - (B) Any criminal conviction of another state, federal, military or other jurisdiction, which, if committed or attempted in California, would have been punishable as a crime in California.
- (21) "Criminal Record Clearance" means a determination by the department that all prerequisites have been met and an individual does not have a conviction, other than an infraction, meaning a fingerprint-based search of state and federal criminal history information has been completed in accordance with section 1522 of the Health and Safety Code.
- (d) (1) "Day" means calendar day unless otherwise specified.
- (2) "Deficiency" means any failure to comply with any provision of the Community Care Facilities Act (Health and Safety Code, Section 1500 et seq.) and/or regulations and/or operating standards adopted by the Department pursuant to the Act.
- (3) "Dementia" means a deterioration of intellectual function and other cognitive skills, leading to a decline in one's ability to perform activities of daily living.
- (4) "Department" is defined in Health and Safety Code Section 1502(b).

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Health and Safety Code Section 1502(b) provides:

“‘Department’ or ‘state department’ means the State Department of Social Services.”

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- (5) "Developmental Disability" means a disability as defined in Welfare and Institutions Code Section 4512(a).

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Welfare and Institutions Code Section 4512(a) provides:

"Developmental disability" means a disability that originates before an individual attains 18 years of age, continues, or can be expected to continue, indefinitely, and constitutes a substantial disability for that individual. As defined by the Director of Developmental Services, in consultation with the Superintendent of Public Instruction, this term shall include intellectual disability, cerebral palsy, epilepsy, and autism. This term shall also include disabling conditions found to be closely related to intellectual disability or to require treatment similar to that required for individuals with an intellectual disability, but shall not include other handicapping conditions that are solely physical in nature.”

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- (6) "Dietitian" means a person who is a member of or registered by the American Dietetics Association.
- (7) "Director" is defined in Health and Safety Code Section 1502(c).

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Health and Safety Code Section 1502(c) provides:

“‘Director’ means the Director of Social Services.”

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- (8) "Discipline" means a penalty assessed by the facility against a child for their violation of the transitional shelter care facility rules, commitment of illegal actions or damage to property.
- (e) (1) "Early Intervention" means the use of non-physical, de-escalation interventions to control injurious behavior. Techniques include, but are not limited to, suggesting alternative behavior, crisis communication and evasive techniques.
- (2) "Egress-Alert Device" means a wrist band or other device, that may be worn by a client or carried on a client's person that triggers a visual or auditory alarm when the client leaves the facility building or grounds.
- (3) "Emergency Approval to Operate" (LIC 9117 4/93) (EAO) means a temporary approval to operate a facility for no more than 60 days pending the Department's decision on whether to approve or deny a provisional license.
- (4) "Emergency Intervention" means the justified use of early interventions and/or otherwise prohibited manual restraints to protect the child or others from harm.
- (5) "Emergency Intervention Plan" means a written plan which addresses how emergency intervention techniques will be implemented by the licensee in compliance with the requirements specified in Section 86722.
- (6) "Emergency Intervention Staff Training Plan" means a written plan which specifies the training provided to transitional shelter care facility personnel regarding the use of emergency interventions, as specified in Section 86722(g). The emergency intervention staff training plan is a component of the Emergency Intervention Plan.
- (7) "Evaluator" means any person who is a duly authorized officer, employee or agent of the Department, including any officer, employee or agent of a county or other public agency authorized by the Department to license community care facilities.
- (8) "Evidence of Licensee's Death" shall include, but is not limited to, a copy of the death certificate, obituary notice, certification of death from the decedent's mortuary or a letter from the attending physician or coroner's office verifying the licensee's death.
- (9) “Exemption” means an exception to the rebuttable presumption of disqualification for a

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criminal record clearance for a conviction pursuant to Health and Safety Code section 1522.

- (10) "Exception" means a written authorization issued by the licensing agency to use alternative means which meet the intent of a specific regulation(s) and operating standard(s) and which are based on the unique needs or circumstances of a specific client(s) or staff person(s). Exceptions are granted for particular client(s) or staff person(s) and are not transferable or applicable to other client(s), staff person(s), facilities or licensees.

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Health and Safety Code Section 1522(g) provides in part:

“...the department may grant an exemption from disqualification for a license or special permit as specified in paragraph (4) of subdivision (a), or for a license, special permit, or certificate of approval as specified in paragraphs (4),(7), and (8) of subdivision (d), or for employment, residence, or presence in a community care facility as specified in paragraphs (3), (4), and (5) of subdivision (c), if the department has substantial and convincing evidence to support a reasonable belief that the applicant and the person convicted of the crime, if other than the applicant, is rehabilitated and is presently of such good character as to justify issuance of the license or special permit or granting an exemption for purposes of subdivision (c).”

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- (11) "Existing Facility" means any community care facility operating under a valid, unexpired license on the date this chapter becomes effective.
- (f) (1) "Facility Manager" as defined in Health and Safety Code Section 1522.4(a)(1).

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Section 1522.4(a)(1) provides:

“‘Facility manager,’ as used in this section, means a person on the premises with the authority and responsibility necessary to manage and control the day-to-day operation of a community care facility and supervise the clients. The facility manager, licensee, and administrator, or any combination thereof, may be the same person provided he or she meets all applicable requirements. If the administrator is also the facility manager for the same facility, this person shall be limited to the administration and management of only one facility.”

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- (g) (1) “Gender Expression” means a person’s gender-related appearance and behavior whether or not stereotypically associated with the person’s assigned sex at birth.
- (2) “Gender Identity” means a person’s identity based on the individual’s stated gender identity, without regard to whether the self-identified gender accords with the individual’s physical appearance, surgical history, genitalia, legal sex, sex assigned at birth, or name and sex as it

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appears in medical records, and without regard to any contrary statement by any other person, including a family member, conservator, or legal representative.

- (3) "Group Home" means any facility of any capacity which provides 24-hour care and supervision to children in a structured environment, with such services provided at least in part by staff employed by the licensee. The care and supervision provided by a group home shall be nonmedical except as permitted by Welfare and Institutions Code Section 17736(b).

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- (A) Welfare and Institutions Code Section 17736(b) provides in pertinent part:

“Counties, regional centers and foster family agencies shall permit all of the following:

- (1) A foster parent, an assistant caregiver, an on-call assistant, and a respite caregiver meeting the requirements of paragraphs (3), (5), and (6) of subdivision (c) of Section 17731 to provide, in a specialized foster care home, specialized in-home health care to a child, as described in the child’s individualized health care plan.
- (2) The licensee and other personnel meeting the requirements of paragraphs (3), (5), and (6) of subdivision (c) of Section 17731 to provide, in a group home, specialized in-home health care to a child, as described in the child’s individualized health care plan, provided that the child was placed as of November 1, 1993, or placed in a group home for children with special health care needs, as defined in paragraph (22) of subdivision (a) of Section 1502 of the Health and Safety Code.

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- (4) “Guardian” means a person appointed by the Superior Court pursuant to the provisions of Sections 1500 et seq. of the Probate Code to care for the person, or estate, or the person and estate of another.
- (h) (1) "Health Care Professional" means a physician or an individual who is licensed or certified under Division 2 of the Business and Professions Code to perform the necessary client care procedures prescribed by a physician. Such health care professionals include the following: Registered Nurse, Public Health Nurse, Licensed Vocational Nurse, Psychiatric Technician, Physical Therapist, Occupational Therapist and Respiratory Therapist.
- (2) "Health Condition Relocation Order" means written notice by the Department to a licensee requiring the relocation of a client from a CCF because either the licensee is not providing adequate care for a client's health condition as required by the regulations and operating standards or the client cannot be cared for within the limits of the license or the client requires in-patient care in a health facility or has a prohibited health condition.
- (3) “Health-related services” shall include, but not be limited to, medical, dental, vision, mental health, substance use disorder services, and reproductive and sexual health care. This shall include abortion and contraception related services and gender affirming health care and gender affirming mental health care.

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- (4) "Home Economist" means a person who holds a baccalaureate degree in home economics with a specialization in either foods and nutrition or dietetics.
- (i) (1) "Incident Report" means a written report required by the Department to report incidents as specified in Sections 86661.
- (2) "Individualized Health Care Plan" means the written plan developed by an individualized health care plan team and approved by the team physician, or other health care professional designated by the physician to serve on the team, for the provision of specialized in-home health care.
- (3) "Individualized Health Care Plan Team" means those individuals who develop an individualized health care plan for a child with special health care needs. This team must include the child's primary care physician or other health care professional designated by the physician, any involved medical team, the county social worker or regional center caseworker, and any health care professional designated to monitor the specialized in-home health care provided to the child as stated in the child's individualized health care plan. The individualized health care plan team may include, but shall not be limited to, a public health nurse, representatives from the California Children's Services Program or the Child Health and Disability Prevention Program, regional centers, the county mental health department and where reunification is the goal, the parent or parents, if available. In addition, the individualized health care plan team may include the prospective specialized group home licensee who shall not participate in any team determination required by Sections 86665.1(a)(1)(B) and (b)(2).
- (4) "Infant" means a child under two years of age.
- (5) "Inhalation-assistive device" means any equipment that assists a client to breath, including, but not limited to, aerosol delivery devices, nebulizers, humidifiers, incentive spirometry devices, positive airway pressure devices, positive expiratory pressure devices, and intermittent positive pressure breathing (IPPB) machines.
- (6) "Interagency Placement Committee" (IPC) means a committee established by the county, with a membership that includes at least the county placement agency and a licensed mental health professional from the county department of mental health pursuant to Section 4096(c) of the Welfare and Institutions Code.
- (j) (Reserved)
- (k) (Reserved)
- (l) (1) "Law Enforcement" means any officer, sheriff, or marshal of a city, county, state, or federal law enforcement agency.
- (2) "License" means authorization to operate a community care facility and to provide care and supervision. The license is not transferable.
- (3) "Licensed professional" means a person who is licensed in California to provide medical care or therapy. This includes physicians and surgeons, physician assistants, nurse practitioners, registered nurses, licensed vocational nurses, psychiatric technicians, physical therapists,

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occupational therapists and respiratory therapists, who are operating within their scope of practice.

- (4) "Licensee" means the adult, firm, partnership, association, corporation, county, city, public agency, or other governmental entity having the authority and responsibility for the operation of a licensed community care facility.
- (5) "Licensing Agency" means the California Department of Social Services or any state, county or other public agency authorized by the Department to assume specified licensing responsibilities pursuant to Section 1511 of the Health and Safety Code.
- (m) (1) "Manual Restraint" means the use of a hands-on or other physically applied technique to physically limit the freedom of movement of a child. Techniques include, but are not limited to, forced escorts; holding; prone restraints; or other containment techniques, including protective separation.
- (2) "Manual Restraint Plan" means a written plan which addresses how manual restraints will or will not be implemented by the licensee in compliance with the requirements specified in Sections 86722(e) and (f). The manual restraint plan is a component of the emergency intervention plan.
- (3) "Maximum Occupancy" means the total number of persons, determined by the fire authority having jurisdiction, who may safely occupy a facility for a specified purpose.
- (4) "Mechanical Restraint" means any physical device or equipment which restricts the movement of the whole or a portion of a child's body, including, but not limited to, handcuffs, restraining sheets, restraining chairs, leather cuffs and belts or any other similar method.
- (5) "Medical Conditions Requiring Specialized In-Home Health Care" means, provided that care may be safely and adequately administered in the home:
 - (A) A dependency upon one or more of the following: enteral feeding tube, total parenteral feeding, a cardiorespiratory monitor, intravenous therapy, a ventilator, oxygen support, urinary catheterization, renal dialysis, ministrations imposed by tracheostomy, colostomy, ileostomy, ileal conduit, or other medical or surgical procedures or special medication regimens, including injection, and intravenous medication; or
 - (B) Conditions such as AIDS, premature birth, congenital defects, severe seizure disorders, severe asthma, bronchopulmonary dysplasia, and severe gastroesophageal reflux when their condition could rapidly deteriorate causing permanent injury or death.
- (6) "Medical Professional" means an individual who is licensed or certified in California to perform the necessary medical procedures within their scope of practice. This includes, but is not limited to, Medical Doctor (MD), Registered Nurse (RN) and Licensed Vocational Nurse (LVN).
- (7) "Mental Disorder" means any of the disorders set forth in the Diagnostic and Statistical Manual of Mental Disorders (Fifth Edition) of the American Psychiatric Association and a degree of functional impairment which renders a person eligible for the services enumerated under the Lanterman-Petris-Short Act, commencing with Section 5000 of the Welfare and Institutions

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Code.

- (8) "Minor parent program" means a transitional shelter care facility program that serves pregnant minors and minor parents with children younger than six years of age, who are dependents of the court, nondependents, voluntary and/or regional center placements, and reside in the transitional shelter care facility with the minor parent, who is the primary caregiver of the young child.
- (n) (1) "Nonambulatory Person" means a person as defined in Health and Safety Code Section 13131.
- (A) A person who uses postural supports as specified in section 86672(c)(24) is deemed nonambulatory.
- (B) A person is not deemed nonambulatory solely because they are deaf, blind, or prefers to use a mechanical aid.

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Health and Safety Code Section 13131 provides:

"Nonambulatory persons" means persons unable to leave a building unassisted under emergency conditions. It includes any person who is unable, or likely to be unable, to physically and mentally respond to a sensory signal approved by the State Fire Marshal, or an oral instruction relating to fire danger, and persons who depend upon mechanical aids such as crutches, walkers, and wheelchairs. The determination of ambulatory or nonambulatory status of persons with developmental disabilities shall be made by the Director of Social Services or his or her designated representative, in consultation with the Director of Developmental Services or his or her designated representative. The determination of ambulatory or nonambulatory status of all other disabled persons placed after January 1, 1984, who are not developmentally disabled shall be made by the Director of Social Services or his or her designated representative."

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- (2) "Nonminor Dependent" means a foster child, as described in Section 675(8)(B) of Title 42 of the United States Code under the federal Social Security Act and as defined in Welfare and Institutions Code section 11400, subdivision (v).

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Section 11400, subdivision (v) of the Welfare and Institutions Code provides:

"Nonminor dependent" means, on and after January 1, 2012, a foster child, as described in Section 675(8)(B) of Title 42 of the United States Code under the federal Social Security Act who is a current dependent child or ward of the juvenile court, or who is a nonminor under the transition jurisdiction of the juvenile court, as described in Section 450, and who satisfies all of the following criteria:

- (1) The nonminor dependent has attained 18 years of age while under an order of foster care placement by the juvenile court, and is not more than 19 years of age on or after January 1,

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2012, not more than 20 years of age on or after January 1, 2013, or not more than 21 years of age on or after January 1, 2014, and as described in Section 10103.5.

- (2) The nonminor dependent is in foster care under the placement and care responsibility of the county welfare department, county probation department, Indian tribe, consortium of tribes, or tribal organization that entered into an agreement pursuant to Section 10553.1.
- (3) The nonminor dependent has a transitional independent living case plan pursuant to Section 475(8) of the federal Social Security Act (42 U.S.C. Sec. 675(8)), as contained in the federal Fostering Connections to Success and Increasing Adoptions Act of 2008 (Public Law 110-351), as described in Section 11403.”

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- (3) "Nutritionist" means a person who holds a master's degree in food and nutrition, dietetics, or public health nutrition, or who is employed as a nutritionist by a county health department.
- (o) (Reserved)
- (p) (1) "Physician" means a person licensed as a physician and surgeon by the California Board of Medical Examiners or by the California Board of Osteopathic Examiners.
- (2) "Physical Restraining Device" means any physical or mechanical device, material, or equipment attached or adjacent to a child's body which the child cannot remove easily and which restricts the child's freedom of movement. Restraining devices include leg restraints, arm restraints, soft ties or vests, wheel chair safety bars, and full length bedrails.
- (3) "Placement agency" is defined in Health and Safety Code Sections 1536.1(a).

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Health and Safety Code Sections 1536.1(a) provides:

“Placement agency” means a county probation department, county welfare department, county social service department, county mental health department, county public guardian, general acute care hospital discharge planner or coordinator, conservator pursuant to Part 3 (commencing with Section 1800) of Division 4 of the Probate Code, conservator pursuant to Chapter 3 (commencing with Section 5350) of Part 1 of Division 5 of the Welfare and Institutions Code, and regional center for persons with developmental disabilities, that is engaged in finding homes or other places for placement of persons of any age for temporary or permanent care.”

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- (4) "PRN Medication" (pro re nata) means any nonprescription or prescription medication which is to be taken as needed.
- (5) "Protective Separation" means the voluntary or involuntary removal of a child for the purpose of protecting the child from injuring themselves or others.

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- (6) "Protective Separation Room" means an unlocked room specifically designated and designed for the involuntary separation of a child from other children for a limited time period for the purpose of protecting the child from injuring or endangering themselves or others.
- (7) "Provision" or "Provide" means whenever any regulation or operating standard requires that provisions be made for or that there be provided any service, personnel, or other requirement, the licensee shall do so directly or present evidence to the licensing agency that the requirement has been met by some other means.
- (8) "Provisional License" means a license which is temporary, nonrenewable and issued for a period not to exceed twelve months. A provisional license is issued in accordance with the criteria specified in Section 86630.
- (9) "Psychotropic medication(s)" are those medications administered for the purpose of affecting the central nervous system to treat psychiatric disorders or illnesses. These medications include, but are not limited to, anxiolytic agents, antidepressants, mood stabilizers, antipsychotic medications, anti-Parkinson agents, hypnotics, medications for dementia, and psychostimulants.
- (q) (1) "Qualified individual" means a trained professional or licensed clinician responsible for conducting the assessment and determination described in subdivision (g) of Section 4096 of the Welfare and Institutions Code and determining the most effective and appropriate placement for a child, as defined in subdivision (l)(1) of Section 16501 of the Welfare and Institutions Code. In the case of an Indian child as defined in Section 224.1 of the Welfare and Institutions Code, the qualified individual shall have specialized knowledge of, training about, or experience with tribes, as specified in subdivision (l)(1) of Section 16501 of the Welfare and Institutions Code.

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Welfare and Institutions Code subdivision (l)(1) of Section 16501 provides:

"Consistent with Section 675a(c)(1)(D) of Title 42 of the United States Code, 'qualified individual' means a trained professional or licensed clinician responsible for conducting the determination described in subdivision (g) of Section 4096 and determining the most effective and appropriate placement for a child. In the case of an Indian child, as defined in Section 224.1, a person may be designated by the child's tribe as the qualified individual pursuant to this subdivision and as defined in subdivision (c) of Section 224.6. In the absence of that designation, the qualified individual shall have specialized knowledge of, training about, or experience with, tribes and the federal Indian Child Welfare Act of 1978 (25 U.S.C. Sec. 1901 et seq.)."

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- (2) "Qualified Mental Retardation Professional" means a person described in Title 22, Division 5, Chapter 8.5, Section 76830.

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Title 22, Division 5, Chapter 8.5, Section 76830 defines a "qualified mental retardation

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professional" as "a person who has specialized training or one (1) year of experience in treating or working with the developmentally disabled and is one of the following:

- (A) A person with a master's degree in psychology.
- (B) A physician.
- (C) An educator with a degree in education.
- (D) A Social Worker with a bachelor's degree in:
 - (1) Social work from an accredited program; or
 - (2) A field other than social work and at least three (3) years of social work experience under the supervision of a social worker with a master's degree.
- (E) A physical therapist.
- (F) An occupational therapist.
- (G) A speech pathologist.
- (H) An audiologist.
- (I) A registered nurse.
- (J) A recreation therapist.
- (K) A rehabilitation counselor.

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- (r) (1) "Reasonable and Prudent Parent Standard" means the standard characterized by careful and sensible parental decisions that maintain the child's health, safety, and best interest, that an administrator or facility manager, or their responsible designee, shall use when determining whether to allow a child in care to participate in extracurricular, enrichment, and social activities.
- (2) "Rehabilitation" means the effort to reestablish good character since the date of the last conviction, including, but not limited to, education, counseling or therapy, training, stable employment, restitution, remorse, changes in lifestyle, or community service.
- (3) "Relative" means spouse, parent, stepparent, son, daughter, brother, sister, stepbrother, stepsister, half-brother, half-sister, uncle, aunt, niece, nephew, first cousin or any such person denoted by the prefix "grand" or "great" or the spouse of any of the persons specified in this definition, even after the marriage has been terminated by death or dissolution.
- (4) "Responsible person" means that individual or individuals, including a relative, health care surrogate decision maker, or placement agency, who assists the client or prospective client in placement or assumes varying degrees of responsibility for the client's well-being. A

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- responsible person cannot act on behalf of a client unless authorized by law.
- (5) "Runaway" means a child who absents themselves from the facility without permission from facility personnel.
 - (6) "Runaway Plan" means a written plan which addresses how the licensee will respond to runaway situations.
 - (s) (1) "Satellite Home" means a facility which is owned by, contracted with, or otherwise controlled by the licensee of another group home. The primary function of the satellite home is to provide residential services to children who are former clients of the primary group home and/or to children who receive direct services from the primary group home. As specified in section 86608(b), each satellite home is required to independently meet regulations and operating standards applicable to its licensed category.
 - (2) "Serious Bodily Injury" is defined in Welfare and Institutions Code Section 15610.67.
 - (3) "Serious Deficiency" means any deficiency that presents an immediate or substantial threat to the physical health, mental health or safety of the clients of a community care facility.
 - (4) "Sexual Orientation" describes a person's emotional, romantic or sexual attraction to others that may be shaped at an early age.
 - (5) "Simplified Exemption" means an exemption granted on the Department's own motion, as authorized in Health and Safety Code Section 1522.7.
 - (6) "Small Family Home" means any residential facility in the licensee's family residence providing 24-hour a day care for six or fewer children who are mentally disordered, developmentally disabled or physically handicapped and who require special care and supervision as a result of such disabilities.
 - (7) "Social Worker" means a person who has a graduate degree from an accredited school of social work.
 - (8) "Social Work Staff" means at least one social worker or other professional person trained in the behavioral sciences who provides, either through employment or alternative means, those services specified in this chapter.
 - (A) Such alternative means shall include services provided by the social work staff of placement agencies only when such services are within the scope of the duties assigned to the worker by their agency.
 - (9) "Specialized In-Home Health Care" means health care identified by the child's physician as appropriately administered in the facility by a health care professional or by a licensee or staff trained by health care professionals pursuant to the child's individualized health care plan. For a child with special health care needs placed in a group home after November 1, 1993, these services must be provided by a health care professional.
 - (10) "SSI/SSP" means the Supplemental Security Income/State Supplemental Program which is a federal/state program that provides financial assistance to aged, blind and/or disabled residents

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of California.

- (11) "Substantial Compliance" means the absence of any serious deficiencies.
- (12) "Substantiated Complaint" means a complaint which has been investigated by the licensing agency, and as a result, a violation of regulations or operating standards has been found.
- (t) (1) "Transfer Trauma" means the consequences of the stress and emotional shock caused by an abrupt, involuntary relocation of a client or resident from one facility to another.
- (2) "Transgender" means a person whose gender identity differs from the person's assigned or presumed sex at birth.
- (3) "Transitional Care Children" or "Children in Transition" means children as defined in Section 1502.3(c) of the Health and Safety Code who have been placed in a transitional shelter care facility. These children include but are not limited to children who have been placed in the facility from another community care facility and are awaiting placement appropriate to their needs. All children in the facility are to receive the assessments and services as detailed in this subchapter to facilitate successful subsequent placement.
- (4) "Transitional Shelter Care Facility" means a licensed county group care facility whose sole purpose is to provide care in a short-term residential care program for children who have been removed from their homes as a result of abuse or neglect, or both; for children who have been adjudged wards of the court; and, for children who are seriously emotionally disturbed children, as defined in Health and Safety Code Section 1502.3.
 - (A) For purposes of this definition, "county group care facility" is a group home that provides 24-hour nonmedical care for children up to the age of 18 and nonminor dependents, who require personal services, supervision, protection, or assistance essential for sustaining activities of daily living, and that is operated either by the county or a nonprofit agency contracted with the county.

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Health and Safety Code Section 1502.3(c) provides:

"It is for the sole purpose of providing care for children who have been removed from their homes as a result of abuse or neglect, or both; for children who have been adjudged wards of the court; and, for children who are seriously emotionally disturbed children. For purposes of this subdivision, 'abuse or neglect' means the same as defined in Section 300 of the Welfare and Institutions Code. For purposes of this subdivision, 'wards of the court' means the same as defined in Section 602 of the Welfare and Institutions Code. For purposes of this subdivision, 'seriously emotionally disturbed children' means the same as defined in subdivision (a) of Section 5600.3 of the Welfare and Institutions Code."

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- (5) "Transitional Shelter Care Facility Program Statement" means a written plan which identifies the client population, program structure and supervision, and provides specific program information. The transitional shelter care facility program statement must contain all the

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elements required in the plan of operation, as specified in Section 86622.

- (6) "Trauma Informed" means prevention services, program interventions, practices, services, and supports that understand, recognize, and respond to the varying impact and effects of all types of trauma on children, nonminor dependents, and their families, certified parents, Resource Families, and those who have contact with the child welfare system, in accordance with recognized principles of a trauma-informed approach and trauma-specific interventions to address trauma's consequences and facilitate healing, as specified in Section 86678.2.

- (u) (1) "Universal Precautions" means an approach to infection control that treats all human blood and body fluids as if they are infectious. Generally, Universal Precautions consist of regular hand-washing after coming into contact with another person's body fluids (mucous, saliva, urine, etc.) and includes the use of gloves when handling blood or body fluids that contain blood. Specifically, Universal Precautions consist of the following four basic infection guidelines:
 - (A) Hand-washing - Staff should wash their hands:
 - 1. After assisting with incontinent care or wiping a client's nose.
 - 2. Before preparing or eating foods.
 - 3. After using the toilet.
 - 4. Before and after treating or bandaging a cut.
 - 5. After wiping down surfaces, cleaning spills, or any other housekeeping.
 - 6. After being in contact with any body fluids from another person.
 - 7. Even if they wore gloves during contact with body fluids.

 - (B) Gloves - Staff should always wear gloves:
 - 1. When they come into contact with blood or body fluids that contain blood.
 - 2. When they have cuts or scratches on their hands.
 - 3. When assisting with incontinent care or when cleaning up urine, stool, or vomit.
 - 4. When administering first aid for a cut, a bleeding wound, or a bloody nose.
 - 5. Use gloves only one time, for one incident or client.
 - a. Staff must air dry their hands prior to putting on a new pair of gloves.
 - 6. And dispose of used gloves immediately after use.

 - (C) Cleaning with a disinfectant - Staff should clean with a disinfectant:
 - 1. On all surfaces and in the client's room and on an "as needed" basis on any surface

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that has come into contact with blood.

2. Such as a basic bleach solution, made fresh daily by mixing:
 - a. 1/4 cup household liquid chlorine bleach in one gallon of tap water, or one tablespoon bleach in one quart of water.

(D) Proper disposal of infectious materials - Staff should dispose of infectious materials by:

1. Placing it in a plastic trash bag, tying it with a secure tie, and disposing of it out of reach of clients and children.
- (2) "Unlicensed Community Care Facility" means a facility as defined in Health and Safety Code Section 1503.5.

HANDBOOK BEGINS HERE

Health and Safety Code Section 1503.5(a) provides:

"A facility shall be deemed to be an "unlicensed community care facility" and "maintained and operated to provide nonmedical care" if it is unlicensed and not exempt from licensure and any one of the following conditions is satisfied:

- (1) The facility is providing care or supervision, as defined by this chapter or the rules, ~~and~~ regulations, and operating standards adopted pursuant to this chapter.
- (2) The facility is held out as or represented as providing care or supervision, as defined by this chapter or the rules, ~~and~~ regulations, and operating standards adopted pursuant to this chapter.
- (3) The facility accepts or retains residents who demonstrate the need for care or supervision, as defined by this chapter or the rules ~~and~~, regulations, and operating standards adopted pursuant to this chapter.
- (4) The facility represents itself as a licensed community care facility.
- (5) The facility is performing any of the functions of a foster family agency or holding itself out as a foster family agency.
- (6) The facility is performing any of the functions of an adoption agency or holding itself out as performing any of the functions of an adoption agency as specified in paragraph (9) of subdivision (a) of Section 1502 or subdivision (b) of Section 8900.5 of the Family Code."

HANDBOOK ENDS HERE

- (A) [Reserved]
- (B) A facility which is "providing care and supervision" as defined in Section 86601(c)(3) includes, but is not limited to, one in which an individual has been placed by a placement agency or family members for temporary or permanent care.

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- (C) A facility which is "held out as or represented as providing care or supervision" includes, but is not limited to:
 - (1) A facility whose license has been revoked or denied, but the individual continues to provide care for the same or different clients with similar needs.
 - (2) A facility where a change of ownership has occurred and the same clients are retained.
 - (3) A licensed facility that moves to a new location.
 - (4) A facility which advertises as providing care and/or supervision.
- (D) A facility which "accepts or retains residents who demonstrate the need for care or supervision" includes, but is not limited to:
 - (1) A facility with residents requiring care and/or supervision, even though the facility is providing board and room only, or board only, or room only.
 - (2) A facility which houses unemancipated minors, even though the facility is providing board and room only, or board only, or room only.
 - (3) A facility where it is apparent that care and/or supervision are being provided by virtue of the client's needs being met.
- (3) "Urgent Need" means a situation where prohibiting the operation of the facility would be detrimental to a client's physical health, mental health, safety, or welfare. Circumstances constituting urgent need include but are not limited to the following:
 - (A) A change in facility location when clients are in need of services from the same operator at the new location.
 - (B) A change of facility ownership when clients are in need of services from a new operator.
- (v) (Reserved)
- (w) (1) "Waiver" means a nontransferable written authorization issued by the licensing agency to use alternative means which meet the intent of a specific regulation or operating standard and which are based on a facility-wide need or circumstance.
- (x) (Reserved)
- (y) (Reserved)
- (z) (Reserved)

86602 DEFINITIONS – FORMS

The following forms are incorporated by reference:

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- (a) LIC 9165 (4/22), Board of Directors Statement.
- (b) LIC 624-LE (4/17), Law Enforcement Contact Report
- (c) PUB 326 (8/22), Facts You Need to Know, Group Home Board of Directors.

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Article 2. Licensing

86605 LICENSE REQUIRED

- (a) Unless a facility is exempt from licensure as specified in California Code of Regulations, General Licensing Requirements, Title 22, Division 6, Chapter 1, Section 80007, no adult, firm, partnership, association, corporation, county, city, public agency or other governmental entity shall operate, establish, manage, conduct or maintain a community care facility, or hold out, advertise or represent by any means to do so, without first obtaining a current valid license from the licensing agency.

86608 LICENSING OF INTEGRAL FACILITIES

- (a) Upon written application from the licensee, the licensing agency shall have the authority to issue a single license for separate buildings which might otherwise require separate licenses provided that all of the following requirements are met:
- (1) Separate buildings or portions of the facility are integral components of a single program.
 - (2) All components of the program are managed by the same licensee.
 - (3) All components of the program are conducted at a single site with a common address.
- (b) If (a) above does not apply, each separately licensed component of a single program shall be capable of independently meeting the provisions of applicable regulations and operating standards as determined by the licensing agency.

86609 POSTING OF LICENSE

- (a) The current license shall be posted in a prominent, publicly accessible location in the facility.

86610 LIMITATIONS ON LICENSE, CAPACITY, AND AMBULATORY STATUS

- (a) A licensee shall not operate a facility beyond the conditions and limitations specified on the license, including the capacity limitation.
- (1) Subject to Section 86661(s)(1)(C), the facility's license shall include a condition that no individual child may stay in the facility for longer than 72 hours and that the clock commences upon initial entry at the facility. The 72-hour clock shall pause if the child runs away from the facility and shall resume if the child returns within a period of 30 days. The 72-hour clock shall stop and reset to zero if a child who runs away from the facility does not return to the facility within a 30-day period. The 72-hour clock shall stop and reset to zero upon a child's acceptance of placement in an approved or licensed home or facility.
- (b) Facilities or rooms shall only be used for purposes approved by the fire marshal.
- (c) The licensee shall obtain a fire clearance as required by the fire marshal.

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- (d) If the facility admits clients in excess of the maximum occupancy established by the fire authority having jurisdiction, the licensee is operating in violation of its fire clearance. Operation in excess of maximum occupancy constitutes imminent health and safety risks and the licensee shall immediately reduce the census to the maximum occupancy.
- (e) If the facility exceeds the capacity as set forth on the license, the licensee is operating in violation of its license.
 - (1) If over capacity, the facility must do the following:
 - (A) Utilize satisfactory fire and life safety measures that are currently approved by the fire authority having jurisdiction;
 - (B) Provide a sufficient number of staff to meet the care and supervision needs of all children in care;
 - (C) Provide sufficient living space and accommodations to the needs of all children in care; and
 - (D) Submit a written Plan of Correction consistent with the Contingency Plan as described in Section 86622(g) within 24 hours of exceeding licensed capacity, that includes the number by which the facility is over capacity, and explains how the facility will correct the overcapacity.
 - (2) When the facility is operating over capacity and then admits another child, the facility shall transmit an addendum to its Plan of Correction in writing to the Department within 24 hours.
- (f) When the Department determines that children are in imminent danger because the facility is over capacity and has not complied with these standards, the Department shall have the authority to order the licensee to immediately relocate children in excess of the licensed capacity.
- (g) When children must be relocated pursuant to these standards, the licensee shall not obstruct the relocation process and shall cooperate with the Department in the relocation process. Such cooperation shall include, but not be limited to, the following:
 - (1) Identifying and preparing for removal of the medications, Medi-Cal or other medical insurance documents, clothing, safeguarded cash resources, valuables and other belongings of the child;
 - (2) Contacting the authorized representative of the child to assist in transporting the child, if necessary;
 - (3) Contacting other suitable facilities for placement, if necessary; and
 - (4) Providing access to the child's files when required by the Department.

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86610.1 TERM LIMITS FOR CHILDREN WITH SPECIAL HEALTH CARE NEEDS

- (a) The licensee shall comply with the following requirements when providing care and supervision to children with special health care needs:
 - (1) The plan of operation shall include the following:
 - (A) A description of how the licensee will provide or coordinate the provision of pre-admission medical and mental health screenings which identifies each child's needs and the services required to meet such needs and enable timely transitions from the facility.
 - (B) A description of what steps the licensee will take to ensure the provision of pre-admission medical and mental health screenings which identifies each child's needs and the services required to meet such needs and enable timely transitions from the facility.
 - (C) A description of interagency agreements with local agency partners that ensure the availability and coordination of medical and mental health screenings which identifies each child's needs and the services required to meet such needs and enable timely transitions from the facility.
 - (2) The placement is on an emergency basis for the purpose of arranging a subsequent placement in a less restrictive setting, such as with the child's natural parents or relatives, with a resource family or foster family agency, or with another appropriate person or facility.
 - (3) The county social worker, regional center case manager or authorized representative for each child in the facility determines that the transitional shelter care facility can meet the specific needs of their child.
- (b) The licensee shall not accept a child requiring in home health care, other than incidental medical services pursuant to Section 1507 of the Health and Safety Code, unless the child is a child with special health care needs.

86610.2 PROHIBITION OF DUAL LICENSURE FOR TRANSITIONAL SHELTER CARE FACILITIES

- (a) A transitional shelter care licensee shall not hold any day care, other residential or health care facility license for the same premises as the transitional shelter care facility while the facility is providing care and supervision to children with special health care needs.
 - (1) Any transitional shelter care licensee planning to provide care and supervision to a child with special health care needs who holds a license as specified in Section 86610.2(a) shall surrender the license to the licensing agency prior to accepting a child with special health care needs.
 - (2) The provisions specified in Sections 86610.2(a) and (a)(1) shall not apply to existing licensed transitional shelter care facility that meet both of the following:

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- (A) All children with special health care needs were accepted prior to the effective date of this section; and
- (B) No application for a day care, other residential or health facility license was approved for the premises on or after the effective date of this section.

86611 ADVERTISEMENTS AND LICENSE NUMBER

- (a) Licensees shall reveal each facility license number in all advertisements in accordance with Health and Safety Code Section 1514.

86612 FALSE CLAIMS

- (a) No licensee, officer, or employee of a licensee shall make or disseminate any false or misleading statement regarding the facility or any of the services provided by the facility.
- (b) No licensee, officer, or employee of a licensee shall alter a license, or disseminate an altered license.
- (c) If a person is determined to have made, disseminated, participated in making, or caused to be made a false or misleading statement pursuant to Section 86612(a), and that statement has resulted in a group home overpayment being assessed pursuant to the Manual of Policies and Procedures Section 11-402.6 et seq., then such person shall not be eligible for a new license under Division 6 or Division 12 and shall not be eligible to serve as an officer or employee of a new or subsequent licensee under Division 6 or Division 12 until the group home overpayment is fully repaid or otherwise discharged.

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Article 3. Application Procedures

86618 APPLICATION FOR LICENSE

- (a) Any adult, firm, partnership, association, corporation, county, city, public agency or other governmental entity desiring to obtain a license shall file with the licensing agency a verified application on forms furnished by the licensing agency.
- (b) Prior to filing an application, the applicant shall attend an orientation designed for the specific facility type and provided by the licensing agency.
 - (1) The orientation shall cover, but not be limited to, the following areas:
 - (A) Completion of the application for license.
 - (B) Scope of operation subject to regulation by the department.
 - (2) An applicant, who is already licensed for a facility in the same category, shall not be required to attend an orientation if the last orientation attended was for the same facility type and within two (2) years of the next scheduled orientation.
 - (3) An applicant applying for more than one facility license, in the same facility type, shall be required to attend only one orientation.
- (c) The applicant/licensee shall cooperate with the licensing agency in providing verification and/or documentation as requested by the licensing agency.
- (d) The application and supporting documents shall contain the following:
 - (1) Name or proposed name and address of facility.
 - (2) Name, and residence and mailing addresses of applicant.
 - (A) If the applicant is a partnership, the name, and principal business address of each partner.
 - (B) If the applicant is a corporation or association, the name, title and principal business address of each officer, executive director and member of the governing board.
 - (C) If the applicant is a corporation which issues stock, the name and address of each person owning more than 10 percent of stock in such corporation.
 - (D) If the applicant is a corporation or association, a copy of the articles of incorporation, constitution and by-laws.
 - (E) If the applicant is a corporation, each member of the board of directors, executive director, and any officer shall list the name of facilities which they have been licensed to operate, employed by or a member of the board of the directors, executive director or an officer.
 - (3) Name and address of owner of the facility premises if applicant is leasing or renting.

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- (4) Procedures as required pursuant to Section 1524.5 of the Health and Safety Code.
- (5) The category of facility to be operated.
- (6) Maximum number of persons to be served during daytime and nighttime.
- (7) Age range, gender and the categories of persons to be served, including but not limited to persons with developmental disabilities, mental disorders, physically handicapped and/or nonambulatory persons.
- (8) Hours or periods of facility operation.
- (9) Name of administrator, if applicable.
- (10) Information required by Health and Safety Code Section 1520(d).
- (11) Information required by Health and Safety Code Section 1520(e).
- (12) Name, address and telephone number of the city or county fire department, the district providing fire protection services, or the State Fire Marshal's Office having jurisdiction in the area where the facility is located.
- (13) A plan of operation as specified in Section 86622.
- (14) Fingerprint cards as specified in Section 86619.
- (15) Information required by Health and Safety Code Section 1522.1.

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Health and Safety Code Section 1522.1(a) and (d) provides:

“(a) Prior to granting a license to, or otherwise approving, any individual to care for or reside with children, the department shall check the Child Abuse Central Index pursuant to paragraph (4) of subdivision (b) of Section 11170 of the Penal Code. The Department of Justice shall maintain and continually update an index of reports of child abuse by providers and shall inform the department of subsequent reports received from the Child Abuse Central Index pursuant to Section 11170 of the Penal Code and the criminal history. The department shall investigate any reports received from the Child Abuse Central Index. The investigation shall include, but not be limited to, the review of the investigation report and file prepared by the child protective agency which investigated the child abuse report. Licensure or approval shall not be denied based upon a report from the Child Abuse Central Index unless child abuse or severe neglect is substantiated.

[. . .]

(d) If any licensee of a community care facility that is eligible to accept placement of a dependent child or any associated individual, as described in paragraph (1) of subdivision (b) of Section 1522, has lived in another state in the preceding five years, the department shall check that state's child abuse and neglect registry, in addition to the Child Abuse Central Index as specified in subdivision

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(a). The department shall develop and promulgate the process and criteria to be used to review and consider other states' findings of child abuse or neglect.”

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- (16) The bonding affidavit specified in Section 86625(a).
- (17) A health screening report on the applicant as specified in Section 86665(g).
- (18) Such other information as may be required pursuant to Section 1520(h) of the Health and Safety Code.

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Health and Safety Code Section 1520(h) provides:

“Any other information that may be required by the department for the proper administration and enforcement of this chapter.”

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- (e) The application shall be signed by the applicant.
 - (1) If the applicant is a firm, association, corporation, county, city, public agency or other governmental entity, the application shall be signed by the chief executive officer or authorized representative.
- (f) The application shall be filed with the licensing agency which serves the geographical area in which the facility is located.
- (g) Each applicant shall submit the following to the licensing agency:
 - (1) A written plan for training of child care staff, as specified in Section 86665(u), and facility managers, as specified in Section 86665(x).
 - (2) A written plan for activities as specified in Sections 86679(a)(1) through (a)(3).
 - (3) The name and residence and mailing addresses of the facility administrator, a description of the administrator's background and qualifications, and documentation verifying required education and administrator certification.
- (h) Each applicant shall obtain a signed form, LIC 9165, from each member of the board of directors. For a county-operated transitional shelter care facility, the county Board of Supervisors or the Board's designee may sign the form. A copy of each signed LIC 9165 shall be submitted to the Department.
- (i) Subject to Section 86661(s)(1)(C), the application shall provide that no individual child may stay in the facility for longer than 72 hours and that the clock commences upon initial entry at the facility. The 72-hour clock shall pause if the child runs away from the facility, and shall resume if the child returns within a period of 30 days. The 72-hour clock shall stop and reset to zero if a child who runs away from the facility does not return to the facility within a 30-day period. The 72-hour

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clock shall stop and reset to zero upon a child's acceptance of placement in an approved or licensed home or facility.

86619 CRIMINAL RECORD CLEARANCE

- (a) The Department shall conduct a criminal record review of all individuals specified in Health and Safety Code Section 1522(b) and shall have the authority to approve or deny a facility license, or employment, residence, or presence in the facility, based upon the results of such review.

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Section 1522(a)(1) of the Health and Safety Code provides in part:

Before and, as applicable, subsequent to issuing a license or special permit to a person to operate or manage a community care facility, the State Department of Social Services shall secure from an appropriate law enforcement agency a criminal record to determine whether the applicant or any other person specified in subdivision (b) has been convicted of a crime other than an infraction or arrested for any crime specified in Section 290 of the Penal Code, Or for violating Section 245, 273ab, or 273.5 of the Penal Code, subdivision (b) of Section 273a of the Penal Code, or for any crime for which the department is prohibited from granting a criminal record exemption pursuant to subdivision (g).

[...]

Section 1522(b)(1) of the Health and Safety Code provides in part:

- (1) In addition to the applicant, this section shall be applicable to criminal record clearances of the following persons:
- (A) Adults responsible for administration or direct supervision of staff.
 - (B) Any adult, other than a client, residing in the facility, certified family home, resource family home, or tribally approved home.
 - (C) Any person who provides client assistance in dressing, grooming, bathing, or personal hygiene. Any nurse assistant or home health aide meeting the requirements of 1338.5 or 1736.6, respectively, who is not employed, retained or contracted by the licensee, and who has been certified or recertified on or after July 1, 1998, shall be deemed to meet the criminal record clearance requirements of this section. A certified nurse assistant and certified home health aide who will be providing client assistance and who falls under this exemption shall provide one copy of their current certification, prior to providing care, to the community care facility. The facility shall maintain the copy of the certification on file as long as care is being provided by the certified nurse assistant or certified home health aide at the facility or in a certified family home or resource family home of a foster family agency. This paragraph does not restricts the right of the department to exclude a certified nurse assistant or certified home health aide from a licensed community care facility or certified family home or resource family home of a foster family agency pursuant to Section 1558 members of licensed hospice interdisciplinary teams who have a contract with.

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- (D) Any staff person, volunteer, or employee who has contact with the clients.
- (E) Any adult who works in a community care facility that is eligible to accept placement of a dependent child.

[...]

- (G) Additional officers of the governing body of the applicant, or other persons with a financial interest in the applicant, as determined necessary by the department by regulation. The criteria used in the development of these regulations shall be based on the person's capability to exercise substantial influence over the operation of the facility.

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- (b) The following persons are exempt from the requirement to submit fingerprints:
 - (1) A medical professional, as defined by the Department in regulations, who holds a valid license or certification from the individual's governing California medical care regulatory entity and who is not employed, retained, or contracted by the licensee, if all of the following apply:
 - (A) The criminal record of the individual has been cleared as a condition of licensure or certification by the individual's California medical care regulatory entity.
 - (B) The individual is providing time-limited specialized clinical care or services.
 - (C) The individual is providing care or services within the individual's scope of practice.
 - (D) The individual is not a community care facility licensee or an employee of the facility.
 - (2) A third-party repair person, or similar retained contractor, if all of the following apply:
 - (A) The individual is hired for a defined, time-limited job.
 - (B) The individual is not left alone with clients.
 - (C) When clients are present in the room in which the repairperson or contractor is working, a staff person who has a criminal record clearance or exemption is also present.
 - (3) Employees of a licensed home health agency and other members of licensed hospice interdisciplinary teams who have a contract with a client of the facility, and are in the facility at the request of that client or resident's legal decision maker.
 - (A) The exemption shall not apply to a person who is a community care facility licensee or an employee of the facility.
 - (4) Clergy and other spiritual caregivers who are performing services in common areas of the

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- residential care facility, or who are advising an individual client at the request of, or with the permission of, the client.
- (A) This exemption shall not apply to a person who is a community care facility licensee or an employee of the facility.
- (5) Members of fraternal, service and similar organizations who conduct group activities for clients, if all of the following apply:
- (A) Members are not left alone with the clients.
 - (B) Members do not transport clients off the facility premises.
 - (C) The same group does not conduct such activities more often than once a month.
- (6) Nothing in this paragraph shall prevent a licensee from requiring a criminal record clearance of any individual exempt from the requirements of this section, provided that the individual has client contact.
- (c) Prior to the Department issuing a license, the applicant, administrator and any adult other than a client, residing in the facility shall obtain a criminal record clearance or exemption as specified in Health and Safety Code section 1522(b).

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Health and Safety Code Section 1522(b) provides in part:

- (b)(1) In addition to the applicant, this section shall be applicable to criminal record clearances and exemptions for the following persons:
- (A) Adults responsible for administration or direct supervision of staff.
 - (B) Any adult, other than a client, residing in the facility, certified family home, resource family home, or tribally approved home.
 - (C) Any person who provides client assistance in dressing, grooming, bathing, or personal hygiene. Any nurse assistant or home health aide meeting the requirements of Section 1338.5 or 1736.6, respectively, who is not employed, retained, or contracted by the licensee, and who has been certified or recertified on or after July 1, 1998, shall be deemed to meet the criminal record clearance requirements of this section. A certified nurse assistant and certified home health aide who will be providing client assistance and who falls under this exemption shall provide one copy of their current certification, prior to providing care, to the community care facility. The facility shall maintain the copy of the certification on file as long as care is being provided by the certified nurse assistant or certified home health aide at the facility or in a certified family home or resource family home of a foster family agency. This paragraph does not restrict the right of the department to exclude a certified nurse assistant or certified home health aide from a licensed community care facility or certified family home or resource family home of a foster family agency pursuant to Section 1558.

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- (D) Any staff person, volunteer, or employee who has contact with the clients.
 - (E) Any adult who works in a community care facility that is eligible to accept placement of a dependent child.
 - (F) If the applicant is a firm, partnership, association, or corporation, the chief executive officer or other person serving in like capacity.
 - (G) Additional officers of the governing body of the applicant, or other persons with a financial interest in the applicant, as determined necessary by the department by regulation. The criteria used in the development of these regulations shall be based on the person's capability to exercise substantial influence over the operation of the facility.
- (2) The following persons are exempt from the requirements applicable under paragraph (1):
- [...]
- (6) Any person similar to those described in this subdivision, as defined by the department in regulations.

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- (d) All individuals subject to criminal record review shall be fingerprinted and declare which states, if any, they have lived in over the previous five years.
- (1) The licensee shall submit these fingerprints to the California Department of Justice, along with a second set of fingerprints for the purpose of searching the records of the Federal Bureau of Investigation, or to comply with the requirements of Section 86619(e), prior to the individual's employment, residence, or initial presence in the community care facility.
 - (A) Fingerprints shall be submitted to the California Department of Justice by the licensee, or sent by electronic transmission to the California Department of Justice by a fingerprinting entity approved by the Department.
- (e) All individuals subject to a criminal record review pursuant to Health and Safety Code Section 1522 shall prior to working, residing, or volunteering in a licensed facility:
- (1) Submit a valid mailing address at which the individual shall receive communications from the Department.
 - (A) An individual who holds a criminal record clearance or exemption shall maintain a current and valid mailing address with the Department and shall notify the Department within ten (10) days of any change in mailing address.
 - (2) Obtain a criminal record clearance or a criminal record exemption as required by the Department or
 - (3) Request a transfer of a criminal record clearance as specified in Section 86619(f) or

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- (4) Request and be approved for a transfer of a criminal record exemption, as specified in Section 86619.1(r), unless, upon request for the transfer, the Department permits the individual to be employed, reside or be present at the facility.

- (f) A licensee or applicant for a license may request a transfer of a criminal record clearance from one state licensed facility to another, or from TrustLine to a state licensed facility by providing the following documents to the Department:
 - (1) A signed Criminal Background Clearance Transfer Request, LIC 9182 (Rev. 4/02).
 - (2) Any other documentation required by the Department.

- (g) Violation of Section 86619(e) may result in a denial of the license application or suspension and/or revocation of the license.

- (h) If the criminal record transcript of any individuals specified in Health and Safety Code Section 1522(b) discloses a plea or verdict of guilty or a conviction following a plea of nolo contendere for any crime other than an infraction violation for which the fine was less than \$300, and an exemption pursuant to Section 86619.1(a) has not been granted, the Department shall take the following actions:
 - (1) For initial applicants, denial of the application.
 - (2) For current licensees, the Department may institute an administrative action, including, but not limited to, revocation of the license.
 - (3) For current employees, exclude the affected individual pursuant to Health and Safety Code Section 1558, and deny the application or revoke the license, if the individual continues to provide services and/or reside at the facility.
 - (4) For convicted individuals residing in the facility, exclusion of the affected individual pursuant to Health and Safety Code Section 1558, and denial of the application or revocation of the license, if the individual continues to provide services and/or reside at the facility.

- (i) The licensee shall maintain documentation of criminal record clearances or criminal record exemptions of employees in the individual's personnel file as required in Section 86666.
 - (1) Documentation shall be available for inspection by the Department.

- (j) The licensee shall maintain documentation of criminal record clearances or criminal record exemptions of volunteers that require fingerprinting and non-client adults residing in the facility.
 - (1) Documentation shall be available for inspection by the Department.

- (k) The Department may seek verification from a law enforcement agency or court of an individual's criminal record as reported to the Department from any member of the public or affected individual.
 - (1) Upon obtaining confirmation from a law enforcement agency or court of the offense, the Department shall proceed as if this criminal record information was provided by the California Department of Justice.

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- (l) An individual with arrest history described in Health and Safety Code section 1522(e) shall be notified of the following:
 - (1) The fact of the investigation into conduct associated with arrest information regarding the subject.
 - (2) The specific arrest(s) upon which the investigation is based.
 - (3) The date of the arrest(s).
 - (4) The arresting agency.
 - (5) The disposition of the arrest(s), if available, as indicated on criminal history information received from Department of Justice.
 - (6) The subject of the notice shall not work or reside in a licensed facility until the subject has received a criminal record clearance or exemption.
 - (7) If the Department obtains evidence through the investigation that the subject may pose a risk to the health and safety of any person who is or may become a client, the Department may deny a criminal record clearance and/or exclude the subject.
 - (8) The subject of the notice may provide written information the subject believes is relevant to the investigation and/or shows the subject is qualified to work in a licensed facility.
 - (9) The subject of the notice will be notified of the Department's decision regarding whether or not to grant a clearance and of the right to appeal any such decision at that time.
- (m) The Department shall, in cases where the subject does not have a conviction, within 5 business days of a decision to deny a criminal record clearance based on an investigation described in subdivision(m) notify the subject of the following:
 - (1) The Department has completed its investigation into arrest information.
 - (2) The Department will not grant the subject a criminal record clearance.
 - (3) The decision, if not appealed, will bar the subject from presence in a licensed facility.
 - (4) The arrest information which triggered the investigation, including the date of arrest, charges, and arresting agency.
 - (5) The Department has determined that the subject may pose a risk to the health and safety of a person who is or may become a client.
 - (6) The specific conduct upon which the decision is based.
 - (7) The subject has a right to contest the decision and will receive an Accusation from the Legal Division as well as information about how to request an administrative hearing.
- (n) For initial applications where the subject does not have a conviction, the Accusation described in

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paragraph (7) of subdivision (m) shall be filed within 40 days of a decision to deny a criminal record clearance.

86619.1 CRIMINAL RECORD EXEMPTION

- (a) The Department will notify a licensee to act immediately to remove from the facility or bar from entering the facility any person described in Sections 86619.1(a)(1) through (5) below while the Department considers granting or denying an exemption. Upon notification, the licensee shall comply with the notice.
- (1) Any person who has been convicted of, or is awaiting trial for, a sex offense against a minor;
 - (2) Any person who has been convicted of a felony;
 - (3) Any person who has been convicted of an offense specified in Sections 243.4, 273a, 273d, 273g, or 368 of the Penal Code or any other crime specified in Health and Safety Code Section 1522(c)(3);
 - (4) Any person who has been convicted of any crime specified below:
 - (A) Battery
 - (B) Shooting at Inhabited Dwelling
 - (C) Corporal Injury on Spouse/Cohabitant
 - (D) Discharging Firearm with Gross Negligence
 - (E) Exhibiting Weapon/Firearm
 - (F) Threat to Commit a Crime Resulting in Gross Bodily Injury or Death
 - (G) Criminal Threat to Harm or Injure Another Person
 - (H) Cruelty to Animals
 - (I) Willful Harm or Injury to Child; or
 - (5) Any other person ordered to be removed by the Department.
- (b) In addition to the requirements of Section 86619.1(a), the licensee must return the confirmation of removal form that is sent by the Department, within five (5) days of the date of the form, that confirms under penalty of perjury that the individual has been removed from the facility.
- (1) Confirmation must be made on either a Removal Confirmation – Exemption Needed, LIC 300A (Rev. 9/03), Removal Confirmation - Denial, LIC 300B (Rev. 9/03), Removal Confirmation - Rescinded, LIC 300C (Rev. 9/03), or Removal Confirmation – Nonexemptible, LIC 300D (Rev. 9/03).
- (c) After a review of the criminal record transcript, the Department may grant an exemption if:

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- (1) The applicant/licensee requests an exemption in writing for himself or herself, or
 - (2) The applicant/licensee requests an exemption in writing for an individual associated with the facility, or
 - (3) The applicant/licensee chooses not to seek an exemption on the affected individual's behalf, the affected individual requests an individual exemption in writing, and
 - (4) The affected individual presents substantial and convincing evidence satisfactory to the Department that they have been rehabilitated and presently is of such good character as to justify being issued or maintaining a license, employment, presence, or residence in a licensed facility.
- (d) To request a criminal record exemption, a licensee or license applicant must submit information that indicates that the individual meets the requirements of Section 86619.1(c)(4). The Department will notify the licensee or license applicant and the affected individual, in concurrent, separate notices, that the affected individual has a criminal conviction and needs to obtain a criminal record exemption.
- (1) The notice to the affected individual shall include a list of the conviction(s) that the Department is aware of at the time the notice is sent that must be addressed in an exemption request.
 - (2) The notice will list the information that must be submitted to request a criminal record exemption.
 - (3) The information must be submitted within forty-five (45) calendar days of the date of the Department's notice.
 - (A) Individuals who submit a criminal record exemption request shall cooperate with the Department by providing any information requested by the Department, including, but not limited to, certified court documents to process the exemption request, pursuant to Section 86619.1(e).
 - (B) If the individual for whom the criminal record exemption is requested is an employee and the licensee/license applicant does not submit the information listed in the Department's written notice within 45 calendar days of the date of the notice, the Department may cease processing the exemption request and close the case.
 - (C) If the individual for whom the criminal record exemption is requested is an applicant or, licensee and the licensee/license applicant does not submit the information listed in the Department's written notice within 45 calendar days of the date of the notice, the Department may deny the exemption request.
 - (D) Individuals may request a criminal record exemption on their own behalf if the licensee or license applicant:
 1. Chooses not to request the exemption and
 2. Chooses not to employ or terminates the individual's employment after receiving notice of the individual's criminal history, or

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3. Removes the individual who resides in the facility after receiving notice of the individual's criminal history.
- (e) The Department shall consider factors including, but not limited to, the following as evidence of good character and rehabilitation:
- (1) The nature of the crime including, but not limited to, whether it involved violence or a threat of violence to others.
 - (2) Period of time since the crime was committed and number of offenses.
 - (3) Circumstances surrounding the commission of the crime that would demonstrate the unlikelihood of repetition.
 - (4) Activities since conviction, including employment or participation in therapy or education, that would indicate changed behavior.
 - (5) Granting by the Governor of a full and unconditional pardon.
 - (6) Character references.
 - (A) All character references shall be on a Reference Request form (LIC 301E – Exemptions [Rev. 7/03]).
 - (7) A certificate of rehabilitation from a superior court.
 - (8) Evidence of honesty and truthfulness as revealed in exemption application documents.
 - (9) Evidence of honesty and truthfulness as revealed in exemption application interviews and conversations with the Department.
- (f) The Department shall also consider the following factors in evaluating a request for an exemption:
- (1) Facility and type of association.
 - (2) The individual's age at the time the crime was committed.
- (g) The Department may deny an exemption request if:
- (1) The licensee and/or the affected individual fails to provide documents requested by the Department, or
 - (2) The licensee and/or the affected individual fails to cooperate with the Department in the exemption process.
- (h) The reasons for any exemption granted or denied shall be in writing and kept by the Department.
- (1) Exemption denial notices shall specify the reason the exemption was denied.

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- (i) The Department has the authority to grant a criminal record exemption that places conditions on the individual's continued licensure, and employment or presence in a licensed facility.
- (j) It shall be conclusive evidence that the individual is not of such good character as to justify issuance of an exemption if the individual:
 - (1) Makes a knowingly false or misleading statement regarding:
 - (A) Material relevant to their application for a criminal record clearance or exemption,
 - (B) Their criminal record clearance or exemption status to obtain employment or permission to be present in a licensed facility, after the Department has ordered that they be excluded from any or all licensed facilities, or
 - (C) Their criminal record clearance or exemption status in order to obtain a position with duties that are prohibited to them by a conditional exemption; or
 - (2) Is on probation or parole.
 - (A) If the individual is currently on probation, and provides sufficient proof that the probationary period(s) is informal, unsupervised and no probation officer is assigned, the Department may, in its discretion, grant a criminal record exemption notwithstanding Section 86619.1(j)(2).
- (k) The Department shall consider granting a criminal record exemption if the individual's criminal history meets all of the applicable criteria specified in Sections 86619.1(k)(1) through (6) and the individual provides the Department with substantial and convincing evidence of good character as specified in Section 86619.1(c)(4). For purposes of this section, a violent crime is a crime that, upon evaluation of the code section violated or the reports regarding the underlying offense, presents a risk of harm or violence.
 - (1) The individual has been convicted of one nonviolent misdemeanor, and one year has lapsed since completing the most recent period of incarceration or probation.
 - (2) The individual has been convicted of two or more nonviolent misdemeanors and four consecutive years have lapsed since completing the most recent period of incarceration, probation or parole, whichever is latest.
 - (3) The individual has been convicted of one or more violent misdemeanors and 15 consecutive years have lapsed since completing the most recent period of incarceration, probation or parole, whichever is latest.
 - (4) The individual has been convicted of one nonviolent felony and four consecutive years have lapsed since completing the most recent period of incarceration, probation or parole, whichever is latest.
 - (5) The individual has been convicted of two or more nonviolent felonies and ten consecutive years have lapsed since completing the most recent period of incarceration, probation or parole, whichever is latest.

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- (6) The individual has not been convicted of a violent felony.
- (7) If the individual is currently on probation, and provides sufficient proof that the probationary period(s) is informal, unsupervised and no probation officer is assigned, the period of lapsed time required in Sections 86619.1(k)(1) through (5) above shall begin from the last date of conviction(s).
- (l) It shall be a rebuttable presumption that an individual is not of such good character as to justify the issuance of an exemption if the individual fails to meet the requirements specified in Sections 86619.1(k)(1) through (6).
- (m) The Department shall not grant an exemption if the individual has a conviction for any offense specified in Section 1522(g)(1) of the Health and Safety Code.

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Health and Safety Code Section 1522(g)(1) provides that no exemption shall be granted if an individual has been convicted of any of the following offenses:

- (1) Penal Code Sections 136.1 and 186.22 – Gang related/Intimidation of witnesses or victims.
- (2) Penal Code Sections 187, 190 through 190.4 and 192(a) – Any murder/Attempted murder/Voluntary manslaughter.
- (3) Penal Code Section 203 – Any mayhem.
- (4) Penal Code Section 206 - Felony torture.
- (5) Penal Code Sections 207, 208, 209, 209.5, 210 – Kidnapping.
- (6) Penal Code Sections 211, 212.5, 213, 214 – Any robbery.
- (7) Penal Code Section 215 – Carjacking.
- (8) Penal Code Section 220 – Assault with intent to commit mayhem, rape, sodomy or oral copulation.
- (9) Penal Code Section 243.4 – Sexual battery.
- (10) Penal Code Section 261(a), (a)(1), (2), (3), (4) or (6) – Rape.
- (11) Penal Code Section 262(a)(1) or (4) – Rape of a spouse.
- (12) Penal Code Section 264.1 – Rape in concert.
- (13) Penal Code Section 266 – Enticing a minor into prostitution.
- (14) Penal Code Section 266c – Induce to sexual intercourse, etc. by fear or consent through fraud.
- (15) Penal Code Section 266h(b) – Pimping a minor.

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- (16) Penal Code Section 266i(b) – Pandering a minor.
- (17) Penal Code Section 266j – Providing a minor under 16 for lewd or lascivious act.
- (18) Penal Code Section 267 – Abduction for prostitution.
- (19) Penal Code Section 269 – Aggravated assault of a child.
- (20) Penal Code Section 272 – Contributing to the delinquency of a minor (must involve lewd or lascivious conduct).
- (21) Penal Code Section 273a(a) [or 273a(1) if the conviction was prior to January 1, 1994] – Willfully causing or permitting any child to suffer under circumstances or conditions likely to produce great bodily harm or death.
- (22) Penal Code Section 273d – Willfully inflicting any cruel or inhuman corporal punishment or injury on a child.
- (23) Penal Code Section 285 – Incest.
- (24) Penal Code Section 286 – Sodomy.
- (25) Penal Code Section 288 – Lewd or lascivious act upon a child under 14.
- (26) Penal Code Section 288a – Oral copulation.
- (27) Penal Code Section 288.2 – Felony conviction for distributing lewd material to children.
- (28) Penal Code Section 288.5(a) – Continuous sexual abuse of a child.
- (29) Penal Code Section 289 – Genital or anal penetration or abuse by any foreign or unknown object.
- (30) Penal Code Section 290(a) – All crimes for which one must register as a sex offender including attempts and not guilty by insanity.
- (31) Penal Code Section 311.2(b), (c) or (d) – Transporting or distributing child-related pornography.
- (32) Penal Code Section 311.3 – Sexual exploitation of a child.
- (33) Penal Code Section 311.4 – Using a minor to assist in making or distributing child pornography.
- (34) Penal Code Section 311.10 – Advertising or distributing child pornography.
- (35) Penal Code Section 311.11 – Possessing child pornography.
- (36) Penal Code Section 314 paragraphs 1 or 2 – Lewd or obscene exposure of private parts.

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- (37) Penal Code Section 347(a) – Poisoning or adulterating food, drink, medicine, pharmaceutical products, spring, well, reservoir or public water supply.
- (38) Penal Code Section 368 – Elder or dependent adult abuse.
- (39) Penal Code Section 417(b) – Drawing, exhibiting or using a loaded firearm.
- (40) Penal Code Section 451(a) or (b) – Arson.
- (41) Penal Code Section 460(a) – First degree burglary if it is charged and proved that a non-accomplice was present in the residence during the burglary.
- (42) Penal Code Sections 186.22 and 518 – Gang related/Extortion.
- (43) Penal Code Section 647.6 or prior to 1988 former Section 647a – Annoy or molest a child under 18.
- (44) Penal Code Section 653f(c) – Solicit another to commit rape, sodomy, etc.
- (45) Penal Code Sections 664/187 – Any attempted murder.
- (46) *Penal Code Section 667.5(c)(7) – Any felony punishable by death or imprisonment in the state prison for life.
- (47) *Penal Code Section 667.5(c)(8) – Enhancement for any felony which inflicts great bodily injury.
- (48) Penal Code Section 667.5(c)(13) – Enhancement for violation of Penal Code Section 12308, 12309 or 12310 – Exploding or igniting or attempting to explode or ignite any destructive device or explosive with intent to commit murder.
- (49) Penal Code Section 667.5(c)(14) - Any kidnapping – Penal Code Sections 207, 208, 209, 209.5 and 210.
- (50) Penal Code Section 667.5(c)(22) - Any violation of Penal Code Section 12022.53 – Enhancement for listed felonies where use of a firearm.
- (51) Penal Code Section 667.5(c)(23) – Use of weapon of mass destruction.
- (52) Business and Professions Code Section 729 – Felony sexual exploitation by a physician, psychotherapist, counselor, etc.
- (53) A felony conviction for child abuse or neglect, spousal abuse, crimes against a child, including child pornography, or for a crime involving violence, including rape, sexual assault, or homicide, but not including other physical assault and battery.
- (54) A felony conviction for physical assault, battery, or a drug- or alcohol-related offense that occurred within the last five years.

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*See Health and Safety Code Section 1522(g)(1) for exception.

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- (n) The Department shall consider granting a simplified criminal record exemption pursuant to Health and Safety Code Section 1522.7.
- (o) At the Department's discretion, an individual who is otherwise eligible for a simplified exemption may be required to go through the standard exemption process if the Department determines such action will help to protect the health and safety of clients.
- (p) If the Department denies or cannot grant a criminal record exemption the Department shall:
 - (1) For initial applicants, deny the application.
 - (2) For current licensees, the Department may institute an administrative action, including, but not limited to, revocation of the license.
 - (3) For current employees, exclude the affected individual pursuant to Health and Safety Code Section 1558, deny the application or revoke the license, if the individual continues to provide services and/or reside at the facility.
 - (4) For individuals residing in the facility or the licensee, exclude the affected individual pursuant to Health and Safety Code Section 1558, deny the application or revoke the license, if the individual continues to provide services and/or reside at the facility.
- (q) If a request for an exemption has been denied, the individual shall be excluded for a period of two years unless the individual has been convicted of a crime for which no exemption may be granted pursuant to Section 86619.1(m). If a request for an exemption has been denied based on a conviction of a crime for which no exemption may be granted, the individual shall be excluded for the remainder of the individual's life.
 - (1) If the Department determines during the review of an exemption request, that the individual was denied an exemption for a conviction of a crime for which an exemption may be granted within the preceding two years, the Department shall cease any further review of the request until two years have elapsed from the date of the denial. In cases where the individual requested a hearing on an exemption denial, the Department shall cease review of the request for an exemption until two years from the effective date of the decision and order of the Department upholding the denial. In cases where the individual submitted a petition for reinstatement or reduction in penalty pursuant to Government Code Section 11522 that was denied, the Department shall cease review of the request for an exemption until two years from the effective date of the decision and order of the Department denying the petition.
 - (2) An exclusion order based solely upon a denied exemption shall remain in effect and the individual shall not be employed in or present in a licensed facility, unless either a petition or an exemption is granted.
 - (3) If an individual who has previously been denied an exemption re-applies after the relevant time period described in Section 86619.1(q)(1) above, the Department may, according to the provisions in Section 86619.1 et seq., grant or deny the subsequent request for an exemption.

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- (4) If an individual submits a petition pursuant to Government Code Section 11522 for reinstatement or reduction of penalty for an exclusion, an individual must submit their fingerprints through an electronic fingerprinting system approved by the Department and submit to the Department a statement of the reason why the individual should be permitted to work or be present in a facility, along with all information required of an individual requesting a criminal record exemption as provided in Section 86619.1. If it is determined, based upon information provided by the Department of Justice, that the individual has been convicted of a crime for which no exemption may be granted, the petition shall be denied. An individual's failure to submit fingerprints or other information as requested by the Department, shall be grounds for denial of the petition. The burden shall be on the petitioner to prove sufficient rehabilitation and good character to justify the granting of the petition.
- (r) A licensee or applicant for a license may request a transfer of a criminal record exemption from one state licensed facility to another by providing the following documents to the Department:
- (1) A signed Criminal Record Exemption Transfer Request, LIC 9188 (Rev. 9/03).
 - (2) Any other documentation required by the Department.
- (s) The Department may consider factors including, but not limited to, the following in determining whether or not to approve an exemption transfer:
- (1) The basis on which the Department granted the exemption;
 - (2) The nature and frequency of client contact in the new position;
 - (3) The category of facility where the individual wishes to transfer;
 - (4) The type of clients in the facility where the individual wishes to transfer;
 - (5) Whether the exemption was appropriately evaluated and granted in accordance with existing exemption laws or regulations; or
 - (6) Whether the exemption meets current exemption laws or regulations.
- (t) If the Department denies the individual's request to transfer a criminal record exemption, the Department shall provide the individual and the licensee with written notification that states the Department's decision and informs the affected individual of their right to an administrative hearing to contest the Department's decision.
- (u) At the Department's discretion, an exemption may be rescinded if it is determined that:
- (1) The exemption was granted in error, or
 - (2) The exemption does not meet current exemption laws or regulations, or
 - (3) The conviction for which an exemption was granted subsequently becomes non-exemptible by law.

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- (v) The Department may rescind an individual's criminal record exemption if the Department obtains evidence showing that the individual engaged in conduct that is inconsistent with the good character requirement of a criminal record exemption, as evidenced by factors including, but not limited to, the following:
 - (1) Violations of licensing laws or regulations;
 - (2) Any conduct by the individual that indicates that the individual may pose a risk to the health and safety of any individual who is or may be a client;
 - (3) Nondisclosure of a conviction or evidence of lack of rehabilitation that the individual failed to disclose to the Department, even if it occurred before the exemption was issued; or
 - (4) The individual is convicted of a subsequent crime.
- (w) If the Department rescinds an exemption the Department shall:
 - (1) Notify the licensee and the affected individual in writing; and
 - (2) Initiate an administrative action.
- (x) If the Department learns that an individual with a criminal record clearance or exemption has been convicted of a subsequent crime, the Department, at its sole discretion, may immediately initiate an administrative action to protect the health and safety of clients.

86619.2 CHILD ABUSE CENTRAL INDEX

- (a) Prior to issuing a license to care for children, the Department shall conduct a Child Abuse Central Index (CACI) review pursuant to Health and Safety Code Section 1522.1 and Penal Code Section 11170(b)(3). The Department shall check the CACI for the applicant(s), and all individuals subject to a criminal record review, pursuant to Health and Safety Code Section 1522(b) and shall approve or deny a facility license, employment, residence or presence in the facility based on the results of the review.
 - (1) The applicant shall submit the Child Abuse Central Index check for all individuals required to be checked, directly to the California Department of Justice at the same time that the individual's fingerprints are submitted for a criminal background check as required by Section 86619(c).
 - (A) Individuals who have submitted the Child Abuse Central Index check (~~LIC-198A~~) with fingerprints on or after January 1, 1999 need not submit a new check if the individual can transfer their criminal record clearance or exemption pursuant to Section 86619(e) or Section 86619.1(f).
 - (2) The Department shall investigate any reports received from the CACI. The investigation shall include, but not be limited to, the review of the investigation report and file prepared by the child protective agency that investigated the child abuse report. The Department shall not deny a license based upon a report from the CACI unless the Department substantiates the allegation of child abuse.

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- (b) Subsequent to licensure, all individuals subject to a criminal record review, pursuant to Health and Safety Code Section 1522(b), shall complete a Child Abuse Central Index check prior to employment, residence or initial presence in the facility that cares for children.
 - (1) The licensee shall submit the Child Abuse Central Index checks directly to the California Department of Justice at the same time that the individual's fingerprints are submitted for a criminal background check as required by Section 86619(d).
 - (A) Individuals who have submitted the Child Abuse Central Index check with fingerprints on or after January 1, 1999 need not submit a new check if the individual can transfer their criminal record clearance or exemption pursuant to Section 86619(e) or Section 86619.1(f).
 - (2) The Department shall check the CACI pursuant to Penal Code Section 11170(b)(3), and shall investigate any reports from the CACI. The investigation shall include, but not be limited to, the review of the investigation report and file prepared by the child protective agency that investigated the child abuse report. The Department shall not deny a license or take any other administrative action based upon a report from the CACI unless the Department substantiates the allegation of child abuse.
 - (3) The Department shall investigate any subsequent reports received from the CACI. The investigation shall include, but not be limited to, the review of the investigation report and file prepared by the child protective agency that investigated the child abuse report. The Department shall not revoke a license or take any other administrative action based upon a report from the CACI unless the Department substantiates the allegation of child abuse.
- (c) The department shall conduct an out-of-state child abuse registry check on any individual subject to the requirements of this section who has lived in another state within the past 5 years pursuant to Health and Safety Code section 1522.1 subdivision (d).

86620 FIRE CLEARANCE

- (a) All facilities shall secure and maintain a fire clearance approved by the city or county fire department, the district providing fire protection services, or the State Fire Marshal.

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The request for fire clearance shall be made through and maintained by the licensing agency.

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- (b) The applicant shall notify the licensing agency if the facility plans to admit any of the following categories of clients so that an appropriate fire clearance, approved by the city or county, fire department, the district providing fire protection services, or the State Fire Marshal, can be obtained prior to the acceptance of such clients:
 - (1) Persons who are nonambulatory, as defined in Section 86601(n)(1).

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86621 WATER SUPPLY CLEARANCE

- (a) All community care facilities where water for human consumption is from a private source shall meet the following requirements:
- (1) As a condition of initial licensure, the applicant shall provide evidence of an on- site inspection of the source of the water and a bacteriological analysis which establishes the safety of the water, conducted by the local health department, the State Department of Health Services or a licensed commercial laboratory.
 - (2) Subsequent to initial licensure, the licensee shall provide evidence of a bacteriological analysis of the private water supply as frequently as is necessary to ensure the safety of the clients, but no less frequently than specified in the following table:

LICENSED CAPACITY	ANALYSIS REQUIRED	PERIODIC SUBSEQUENT ANALYSIS
6 or fewer	Initial Licensing	Not required unless evidence supports the need for such analysis to protect clients.
7 through 15	Initial Licensing	Annually
16 through 24	Initial Licensing	Semiannually
25 or more	Initial Licensing	Quarterly

86622 PLAN OF OPERATION

- (a) Each licensee shall have and maintain on file a current, written, definitive plan of operation.
- (b) The plan of operation and related materials shall contain the following:
 - (1) Statement of purposes, and program methods and goals.
 - (2) Statement of admission policies and procedures regarding acceptance of clients.
 - (3) Administrative organization, if applicable.
 - (4) Staffing plan, qualifications and duties, if applicable.
 - (5) Plan for in-service education of staff if required by regulations or operating standards governing the specific facility category.
 - (6) A sketch of the building(s) to be occupied, including a floor plan which describes the capacities of the buildings for the uses intended, room dimensions, and a designation of the rooms to be used for nonambulatory clients, if any.
 - (7) A sketch of the grounds showing buildings, driveways, fences, storage areas, pools, gardens,

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recreation areas and other space used by the clients.

- (A) The sketch shall include the dimensions of all areas which will be used by the clients.
- (8) Sample menus and a schedule for one calendar week indicating the time of day that meals and snacks are to be served.
- (9) Transportation arrangements for clients who do not have independent arrangements.
- (10) A statement whether or not the licensee will handle the clients' money, personal property, and/or valuables. If money, personal property, and/or valuables will be handled, the method for safeguarding shall ensure compliance with Sections 86625 and 86626.
- (11) Consultant and community resources to be utilized by the facility as part of its program.
- (12) A statement of the facility's policy concerning family visits and other communications with the client pursuant to Health and Safety Code Section 1512.

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Health and Safety Code Section 1512 provides in part

“The community care facility’s policy concerning family visits and communication shall be designed to encourage regular family involvement with the resident client and shall provide ample opportunities for family participation in activities at the facility.”

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- (13) A description of how the facility will ensure the health and safety of children during their entire stay at the facility, including a plan to ensure that appropriate levels of care and supervision are provided for all children as determined by the screenings and assessments specified in Section 86668.1(a)(3) and (c).
- (14) A statement regarding the types of children to be served by the facility, including dependent, neglected, delinquent, predelinquent, physically handicapped, developmentally disabled, mentally disordered, or emotionally disturbed children.
- (15) A description of services to be provided by the facility which shall include the following:
 - (A) How the licensee will provide or coordinate the provision of medical and mental health screenings which identifies each child’s needs and the services required to meet such needs.
 - 1. Documentation shall be maintained of interagency agreements with local agency partners that ensure the availability and coordination of medical and mental health screenings which identifies each child’s needs and the services required to meet such needs and enable timely transitions from the facility.
 - (B) Policy and procedures regarding participation of the child’s placement social worker in identifying the child’s needs and the services needed to meet those needs.

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- (C) Procedures for implementation and modification of the medical and mental health screening results.
 - (D) Policies and procedures for the child's removal and/or discharge as specified in Section 86668.4.
- (16) The administrative policies and procedures to be used to implement the facility's plan of operation.
 - (17) A written Emergency Intervention Plan as specified in Section 86722.
 - (18) A statement that one of the primary purposes of the facility is to provide a Transitional Shelter Care program for children moved from their prior living arrangement in order to enable the county to address gaps in the continuum of care and to develop its capacity and use of home-based care and short term residential therapeutic programs necessary to meet the stability and permanency needs of children.
 - (19) A description of the Transitional Shelter Care services to be provided.
 - (20) Protocols for the provision of individualized assessments of each child that focus on why each child was moved from their prior living arrangement(s) and the provision of services the child will need for transition to their next placement.
 - (21) Protocols to ensure the safety of children in care.
 - (22) A statement of how the facility will establish and ensure the provision of trauma informed program practices, services, and supports, as set forth in Section 86678.2.
- (c) If the licensee intends to provide care and supervision to children with special health care needs as defined in Section 86601(c)(3), the plan of operation shall include the requirements as set forth in Section 86610.1. In addition, the information related to those clients and their needs shall specify all of the following:
- (1) The licensee's plans for serving that client.
 - (A) If the licensee plans to admit or care for one or more clients who have a staph or other serious, communicable infection, the plan must include:
 - 1. A statement that all staff will receive training in universal precautions within the first 10 days of employment, and before providing care to these clients.
 - 2. A statement of how the licensee will ensure that the training is obtained, and the name and qualifications of the person or organization that will provide the training.
 - (2) The services that will be provided.
 - (3) Staffing adjustments if needed in order to provide the proposed services.
 - (A) This may include increased staffing, hiring staff with additional or different

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qualifications, utilizing licensed professionals as consultants, or hiring licensed professionals.

- (d) If the licensee intends to admit and/or specialize in care for one or more clients who have a propensity for behaviors that result in harm to self or others, the facility plan of operation shall include a description of precautions that will be taken to protect that client and all other clients.
- (e) Any changes in the plan of operation which affect the services to clients shall be subject to licensing agency approval and shall be reported as specified in Section 86661.
- (f) The facility shall operate in accordance with the terms specified in the plan of operation and may be cited for not doing so.
- (g) The plan of operation must contain a Contingency Plan that describes how the facility will meet the needs of all children in care in the event that the facility exceeds its licensed capacity. The Contingency Plan shall include, but not be limited to, the following:
 - (1) A process by which the facility will provide sufficient staff as required by Section 86665(a);
 - (2) The fire and life safety measures that will be used;
 - (A) This shall include a sketch, outlining the buildings, rooms, and beds where the facility proposes all children will sleep if the facility exceeds its licensed capacity.
 - (3) A description of the means to adapt the physical features of the facility to accommodate and provide sufficient living space for all children in care;
 - (4) The existence of any factor(s) that would preclude provision of the care required for all children in care;
 - (5) A description of alternative placement procedures and resources for locating available placement locations; and
 - (6) Designation of the staff responsible for writing and submitting to the licensing agency a Plan of Correction as required by Section 86610.
- (h) The plan of operation shall prohibit temporary removal of a client by a caseworker unless the client's presence is needed by the caseworker for placement in an approved or licensed home or facility, or to render services to the client, or is otherwise necessary to promote the best interests of the client.
- (i) The plan of operation shall include a plan describing how a child's educational progress will be maintained during the child's stay at the facility. The plan shall include how the licensee will facilitate the child's connection with their school if practical.
- (j) The plan of operation shall include a plan to ensure, to the extent possible, that the child will be able to attend important milestone events that cannot be rescheduled, if desired by the child and if after consultation with the child's caseworker it is determined that attendance is in the best interest of the child. Examples of milestone events include but are not limited to graduation ceremonies, junior and senior proms, funerals of close family members and friends, and significant religious events such as Bar or Bat Mitzvah, Holy Communion, Quinceañera, and Confirmation.

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- (k) The plan of operation shall include a plan for the provision of safe indoor and outdoor activity space for the facility.
- (l) The plan of operation shall provide that that no child may stay in the facility longer than 72 hours and that the clock commences upon initial entry at the facility. The 72-hour clock shall pause if the child runs away from the facility, and shall resume if the child returns within a period of 30 days. The 72-hour clock shall stop and reset to zero if a child who runs away from the facility does not return to the facility within a 30-day period. The 72-hour clock shall stop and reset to zero upon a child's acceptance of placement in an approved or licensed home or facility.
- (m) The licensee must obtain written approval from the Department before making any change to the facility's plan of operation.

86623 DISASTER AND MASS CASUALTY PLAN

- (a) Each licensee shall have and maintain on file a current, written disaster and mass casualty plan of action.
- (b) The plan shall be subject to review by the licensing agency and shall include:
 - (1) Designation of administrative authority and staff assignments.
 - (2) Contingency plans for action during fires, floods, and earthquakes, including but not limited to the following:
 - (A) Means of exiting.
 - (B) Transportation arrangements.
 - (C) Relocation sites which are equipped to provide safe temporary accommodation for clients.
 - (D) Arrangements for supervision of clients during evacuation or relocation, and for contact after relocation to ensure that relocation has been completed as planned.
 - (E) Means of contacting local agencies, including but not limited to the fire department, law enforcement agencies, and civil defense and other disaster authorities.
- (c) The licensee shall instruct all clients, age and abilities permitting, all staff, and/or members of the household in their duties and responsibilities under the plan.
- (d) Disaster drills shall be conducted at least every six months.
 - (1) Completion of such drills shall not require travel away from the facility grounds or contact with local disaster agencies.
 - (2) The drills shall be documented and the documentation maintained in the facility for at least one year.

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- (e) In addition, the licensee shall meet the provisions specified in Health and Safety Code Section 1565.

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Health and Safety Code Section 1565 provides:

- “(a) A facility shall have an emergency and disaster plan that shall include, but not be limited to, all of the following:
- (1) Evacuation procedures, including identification of an assembly point or points that shall be included in the facility sketch.
 - (2) Plans for the facility to be self-reliant for a period of not less than 72 hours immediately following any emergency or disaster, including, but not limited to, a short-term or long-term power failure. If the facility plans to shelter in place and one or more utilities, including water, sewer, gas, or electricity, is not available, the facility shall have a plan and supplies available to provide alternative resources during an outage.
 - (3) Transportation needs and evacuation procedures to ensure that the facility can communicate with emergency response personnel or can access the information necessary in order to check the emergency routes to be used at the time of an evacuation and relocation necessitated by a disaster. If the transportation plan includes the use of a vehicle owned or operated by the facility, the keys to the vehicle shall be available to staff on all shifts.
 - (4) A contact information list of all of the following:
 - (A) Emergency response personnel.
 - (B) The contact information for the regulating entity.
 - (C) Transportation providers.
 - (5) At least two appropriate shelter locations that can house or supervise, as applicable, individuals served by the facility during an evacuation. One of the locations shall be outside of the immediate area.
 - (6) The location of utility shutoff valves and instructions for use.
 - (7) Procedures that address, but are not limited to, all of the following:
 - (A) Provision of emergency power that could include identification of suppliers of backup generators. If a permanently installed generator is used, the plan shall include its location and a description of how it will be used. If a portable generator is used, the manufacturer’s operating instructions shall be followed.
 - (B) Responding to an individual’s needs if emergency call buttons are inoperable.
 - (C) The process for communicating with individuals served by the facility, families,

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and others, as appropriate, that might include landline telephones, cellular telephones, or walkie-talkies. A backup process shall also be established. Individuals served by the facility and their responsible parties shall be informed of the process for communicating during an emergency.

- (D) Assistance with, and administration of, medications.
 - (E) Storage and preservation of medications, including the storage of medications that require refrigeration.
 - (F) The operation of assistive medical devices that need electric power for their operation, including, but not limited to, oxygen equipment and wheelchairs.
 - (G) A process for identifying individuals served by the facility who have special needs, and a plan for meeting those needs.
 - (H) Procedures for confirming the location of each individual served by the facility during an emergency response.
- (b) If a facility employs staff, the facility shall provide training on the plan to each staff member upon hire and annually thereafter. The training shall include staff responsibilities during an emergency or disaster.
- (c) A facility shall conduct a drill at least quarterly for each shift. The type of emergency covered in a drill shall vary from quarter to quarter, taking into account different emergency scenarios. An actual evacuation of individuals served by the facility is not required during a drill. While a facility may provide an opportunity for individuals served by the facility to participate in a drill, it shall not require that participation. Documentation of the drills shall include the date, the type of emergency covered by the drill, and, if applicable, the names of staff participating in the drill.
- (d) A facility shall review the plan annually and make updates as necessary, including changes in floor plans and the population served. The licensee, administrator, or regulated individual shall sign and date the documentation to indicate that the plan has been reviewed and updated as necessary.
- (e) A facility shall have all of the following information readily available during an emergency:
- (1) A roster of individuals served by the facility, with the date of birth for each individual.
 - (2) An appraisal of needs and services plan for each individual served by the facility.
 - (3) A medication list for individuals served by the facility with centrally stored medications.
 - (4) Contact information for the responsible party and physician for each individual served by the facility.
- (f) A facility shall have both of the following in place:

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- (1) An evacuation chair at each stairwell in a residential facility serving adults, on or before July 1, 2021.
- (2) A set of keys available for use during an evacuation that provides access to all of the following:
 - (A) All occupied resident units, if applicable.
 - (B) All facility vehicles.
 - (C) All facility exit doors.
 - (D) All facility cabinets and cupboards or files that contain elements of the emergency and disaster plan, including, but not limited to, food supplies and protective shelter supplies.
- (g) A facility shall make the plan available upon request to individuals served by the facility onsite, any responsible party for a resident, the local long-term care ombudsman, and local emergency responders. Individual and employee information shall be kept confidential.
- (h) An applicant seeking a license or approval for a new facility shall submit the emergency and disaster plan with the initial license application required.
- (i) The regulating entity shall confirm, during regularly scheduled visits, that the emergency and disaster plan is on file at the facility and includes required content.
- (j) A facility is encouraged to have the emergency and disaster plan reviewed by local emergency authorities.
- (k) Nothing in this section shall create a new or additional requirement for the regulating entity to evaluate the emergency and disaster plan.
- (l) For the purposes of this section, a “facility” means any of the following:
 - (1) An adult residential facility.
 - (3) A social rehabilitation facility.
 - (4) A children’s residential facility other than a resource family home, foster family home, or a small family home.”

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86624 WAIVERS AND EXCEPTIONS

- (a) Unless prior written licensing agency approval is received as specified in (b) below, all licensees shall maintain continuous compliance with the licensing regulations and operating standards.
- (b) The licensing agency shall have the authority to approve the use of alternate concepts, programs,

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services, procedures, techniques, equipment, space, personnel qualifications or staffing ratios, or the contact of experimental or demonstration projects under the following circumstances:

- (1) Such alternatives shall be carried out with provisions for safe and adequate services, and shall in no instance be detrimental to the health and safety of any facility client.
- (2) The applicant or licensee shall submit to the licensing agency a written request for a waiver or exception, together with substantiating evidence supporting the request.

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In determining the merits of each request, the licensing agency shall use as guidelines the standards utilized or recommended by well-recognized state and national organizations, as available or determined appropriate by the licensing agency.

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- (3) The licensing agency shall provide written approval or denial of the request.
- (c) Within 30 days of receipt of a request for a waiver or an exception, the licensing agency shall notify the applicant or licensee, in writing, of one of the following:
- (1) The request with substantiating evidence has been received and accepted for consideration.
 - (2) The request is deficient, describing additional information required for the request to be acceptable and a time frame for submitting this information.
 - (A) Failure of the applicant or licensee to comply within the time specified in (2) above shall result in denial of the request.
- (d) Within 30 days of receipt of an acceptable request for a waiver or an exception, the licensing agency shall notify the applicant or licensee, in writing, whether the request has been approved or denied.

86625 BONDING

- (a) The licensee shall submit an affidavit, on a form provided by the licensing agency, stating whether they safeguard or will safeguard cash resources of clients and the maximum amount of cash resources to be safeguarded for all clients or each client in any month.
- (b) The licensee shall provide a statement of self-insurance in its applications for a license.

86626 SAFEGUARDS FOR CASH RESOURCES, PERSONAL PROPERTY, AND VALUABLES

- (a) A licensee shall not be required to accept for admission or continue to care for any client whose incapacities, as documented by the initial or subsequent needs appraisals, would require the licensee to handle such client's cash resources.

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- (b) If such a client is accepted for or maintained in care, their cash resources, personal property, and valuables not handled by a person outside the facility who has been designated by the client or their authorized representative shall be handled by the licensee or facility staff, and shall be safeguarded in accordance with the requirements specified in (c) through (n) below.
- (c) No employee of a licensee shall:
 - (1) Accept appointment as a guardian or conservator of the person and/or estate of any client;
 - (2) Accept any general or special power of attorney except for Medi-Cal or Medicare claims for any client;
 - (3) Become the substitute payee for any payments made to any client.
 - (A) This requirement does not apply to a licensee who is appointed by the Social Security Administration as representative payee for the client.
 - (4) Become the joint tenant on any account specified in Section 86626(i) with a resident.
- (d) Cash resources, personal property, and valuables of clients handled by the licensee shall be free from any liability the licensee incurs.
- (e) Cash resources, personal property, and valuables of clients shall be separate and intact, and shall not be commingled with facility funds or petty cash.
- (f) The licensee or employee of a licensee shall not make expenditures from clients' cash resources for any basic services in these regulations and operating standards, or for any basic services identified in a contract/admission agreement between the client and the licensee.
- (g) The licensee shall not commingle cash resources and valuables of clients with those of another community care facility of a different license number regardless of joint ownership.
- (h) Each licensee shall maintain accurate records of accounts of cash resources, personal property, and valuables entrusted to their care, including, but not limited to the following:
 - (1) Records of clients' cash resources maintained as a drawing account, which shall include a current ledger accounting, with columns for income, disbursements and balance, for each client. Supporting receipts for purchases shall be filed in chronological order.
 - (A) Receipts for cash provided to any client from their account(s) shall include the client's full signature or mark, or authorized representative's full signature or mark, and a statement acknowledging receipt of the amount and date received, as follows:

"(full signature of client) accepts (dollar amount) (amount written cursive), this date (date), from (payor)."
 - (B) The store receipt shall constitute the receipt for purchases made for the client from their account.
 - (C) The original receipt for cash resources, personal property or valuables entrusted to the

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licensee shall be provided to the client's authorized representative, if any, otherwise to the client.

- (i) Cash resources entrusted to the licensee and kept on the facility premises, shall be kept in a locked and secure location.
- (j) Upon discharge of a client, all cash resources, personal property, and valuables of that client which have been entrusted to the licensee shall be surrendered to the client, or their authorized representative, if any.
 - (1) The licensee shall obtain and retain a receipt signed by the client or their authorized representative.
- (k) Upon the death of a client, all cash resources, personal property and valuables of that client shall immediately be safeguarded in accordance with the following requirements:
 - (1) The executor or the administrator of the estate shall be notified by the licensee of the client's death, and the cash resources, personal property, and valuables shall be surrendered to said party in exchange for a signed, itemized receipt.
 - (2) If no executor or administrator has been appointed, the authorized representative, if any, shall be notified by the licensee of the client's death, and the cash resources, personal property, and valuables shall be surrendered to said person in exchange for a signed, itemized receipt.
 - (3) If the licensee is unable to notify a responsible party as specified in (2) or (3) above, the licensee shall give immediate written notice of the client's death to the public administrator of the county as provided in Section 7600.5 of the California Probate Code.
- (l) The following requirements shall be met whenever there is a proposed change of licensee:
 - (1) The licensee shall notify the licensing agency of any pending change of licensee, and shall provide the licensing agency an accounting of each client's cash resources, personal property and valuables entrusted to their care.
 - (A) Such accounting shall be made on form provided or approved by the licensing agency.
 - (2) Provided the licensing agency approves the application for the new licensee, the form specified in (1)(A) above shall be updated, signed by both the former and new licensee, and forwarded to the licensing agency.
- (m) The licensee shall maintain a record of all monetary gifts and of any other gift exceeding an estimated value of \$100, provided by or on behalf of a client to the licensee, administrator or staff.
 - (1) The record shall be attached to the account(s) specified in (h) above if the client's cash resources, personal property or valuables have been entrusted to the licensee.
 - (2) Monetary gifts or valuables given by the friends or relatives of a deceased client shall not be subject to the requirement specified in (n) and (n)(1) above.
- (n) The licensee shall have written policies and procedures prohibiting fines applied to children in care.

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86627 INITIAL APPLICATION REVIEW

- (a) Within 30 days of receipt of the application by the licensing agency, the licensing agency shall give written notice to the applicant of one of the following:
 - (1) The application is complete.
 - (2) The application is deficient, describing what documents are outstanding and/or inadequate, and informing the applicant that the information must be submitted within 30 days of the date of the notice.
 - (A) If the applicant does not submit the required information within the 30 days, the application shall be deemed withdrawn unless either the licensing agency has denied the application or the facility is under construction.
- (b) The licensing agency shall cease review of any application under the conditions specified in Section 1520.3 of the Health and Safety Code.
 - (1) If cessation of review occurs, the application shall be returned to the applicant. It shall be the responsibility of the applicant to request resumption of review as specified in Health and Safety Code Section 1520.3.

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Health and Safety Code Section 1520.3 provides in part:

“(a)(1) If an application for a license or special permit indicates, or the department determines during the application review process, that the applicant previously was issued a license under this chapter or under Chapter 1 (commencing with Section 1200), Chapter 2 (commencing with Section 1250), Chapter 3.01 (commencing with Section 1568.01), Chapter 3.2 (commencing with Section 1569), Chapter 3.3 (commencing with Section 1570), Chapter 3.4 (commencing with Section 1596.70), Chapter 3.5 (commencing with Section 1596.90), or Chapter 3.6 (commencing with Section 1597.30), or that the applicant was previously approved as a resource family under Article 2 (commencing with Section 16519.5) of Chapter 5 of Part 4 of Division 9 of the Welfare and Institutions Code, and the prior license was revoked within the preceding two years, the department shall cease any further review of the application until two years shall have elapsed from the date of the revocation or rescission. The cessation of review shall not constitute a denial of the application for purposes of Section 1526 or any other provision of law.

[...]

(b) If an application for a license or special permit indicates, or the department determines during the application review process, that the applicant had previously applied for a license under any of the chapters listed in paragraph (1) of subdivision (a) or for resource family approval pursuant to Article 2 (commencing with Section 16519.5) of Chapter 5 of Part 5 of Division 9 of the Welfare and Institutions Code and the application was denied within the last year, the department shall cease further review of the application as follows:

- (1) In cases where the applicant petitioned for a hearing, the department shall cease further review

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of the application until one year has elapsed from the effective date of the decision and order of the department upholding a denial.

- (2) In cases where the department or county informed the applicant of his or her right to petition for a hearing and the applicant did not petition for a hearing, the department shall cease further review of the application until one year has elapsed from the date of the notification of the denial and the right to petition for a hearing.
- (3) The department may continue to review the application if it has determined that the reasons for the denial of the application were due to circumstances and conditions which either have been corrected or are no longer in existence.”

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- (c) The circumstances and conditions in which the licensing agency may continue to review a previously denied application shall include, but are not limited to, the following:
 - (1) A fire clearance previously denied, but now approved;
 - (2) An Administrator who did not meet the minimum qualifications, but now fulfills the qualifications; or
 - (3) A person with a criminal record, which was the basis for license denial, is no longer associated with the facility.
- (d) The application review shall not constitute approval of the application.

86628 CAPACITY DETERMINATION

- (a) A license shall be issued for a specific daytime and nighttime capacity.
- (b) The number of persons for whom the facility is licensed to provide care and supervision shall be determined on the basis of the application review by the licensing agency, which shall take into consideration the following:
 - (1) The fire clearance specified in Section 86620.
 - (2) The licensee's/administrator's ability to comply with applicable law, regulation, and operating standards.
 - (3) Facilities which accept minor parents and their child(ren) shall have such children included in the facility's licensed capacity.
 - (4) Physical features of the facility, including available living space, which are necessary in order to comply with regulations and operating standards.
 - (5) Number of available staff to meet the care and supervision needs of the clients.
 - (6) Any restrictions pertaining to the specific category of facility.

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- (c) When the license is issued for fewer clients than requested, the licensee shall be notified in writing of the reasons for the limitation and of the licensee's rights to appeal the decision as specified in Section 86640.
- (d) The licensing agency shall have the authority to decrease existing licensed capacity with the licensee's agreement, when there is a change in any of the factors specified in (b) above.
 - (1) If the licensee does not agree to the decrease in capacity, the licensing agency shall have the authority to take action as specified in Section 86642.
- (e) The licensing agency shall be authorized to restrict care to specific individuals.
 - (1) If care and supervision is limited to specific individuals, the licensing agency shall specify the names of the individuals in a letter to the licensee.
 - (2) Except where the limitation is requested by the licensee, the licensee shall be notified in writing of the reasons for such limitation and of the licensee's right to appeal the decision as specified in Section 86640.

86629 WITHDRAWAL OF APPLICATION

- (a) An applicant shall have the right to withdraw an application.
 - (1) Such withdrawal shall be in writing.

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Health and Safety Code Section 1553 provides:

“The withdrawal of an application for a license or a special permit after it has been filed with the state department shall not, unless the state department consents in writing to such withdrawal, deprive the state department of its authority to institute or continue a proceeding against the applicant for the denial of the license or a special permit upon any ground provided by law or to enter an order denying the license or special permit upon any such ground.

The suspension, expiration, or forfeiture by operation of law of a license or a special permit issued by the state department, or its suspension, forfeiture, or cancellation by order of the state department or by order of a court of law, or its surrender without the written consent of the state department, shall not deprive the state department of its authority to institute or continue a disciplinary proceeding against the licensee or holder of a special permit upon any ground provided by law or to enter an order suspending or revoking the license or special permit or otherwise taking disciplinary action against the licensee or holder of a special permit on any such ground.”

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86630 PROVISIONAL LICENSE

- (a) The licensing agency shall have the authority to issue a provisional license to an applicant, pending action under Section 86640 on a completed application for an initial license, if it determines that all of the following circumstances exist:
 - (1) The facility is in substantial compliance with applicable law, regulation, and operating standards.
 - (2) An urgent need for licensure exists.
 - (3) An applicant's board of directors, consistent with Section 86663, executive director and officer are eligible for licensure as specified in Health and Safety Code Section 1520.11(b).
- (b) The licensing agency shall issue a provisional license for a period of up to 90 days when it determines that full compliance with licensing regulations and operating standards will be achieved within that time period.
- (c) The licensing agency shall have the authority to extend the provisional license for up to 90 days when it determines that more than 90 days is required to achieve full compliance with licensing regulations and operating standards due to circumstances beyond the control of the applicant.
- (d) If, during the provisional license period, the licensing agency discovers any serious deficiencies, the Department shall have the authority to take action as specified in Section 86642.
- (e) A provisional license shall not be renewable and shall terminate on the date specified on the license, or upon denial of the application, whichever is earlier.
- (f) All transitional shelter care facility license applicants who complete an application and who meet operating standards, regulatory and statutory requirements shall receive a provisional license for the first 90 days of operation, which may be extended pursuant to Section 86630(c) and during that period shall be evaluated for a permanent license.

86631.1 ISSUANCE OF A PROVISIONAL LICENSE

- (a) For the time frames of the initial review of the application for completeness, see Section 86627.
- (b) Within 30 days of the date that a completed application, as defined in Section 86601(c)(17), has been received, the licensing agency shall give written notice to the transitional shelter care facility applicant of one of the following:
 - (1) A provisional license has been approved.
 - (2) The application has been denied.
 - (A) The notice of denial shall include the information specified in Section 86640(b)(1).

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86631.2 ISSUANCE OF A LICENSE

- (a) Before the first business day prior to the expiration of the provisional license the Department shall give written notice to the licensee of one of the following:
 - (1) A license as specified in the Essential Terms of Agreement has been approved, commencing on the date of issuance of the provisional license.
 - (2) The applicant has been denied.
 - (A) The notice of denial shall include the information specified in Section 86640(b)(1).

86634 SUBMISSION OF NEW APPLICATION

- (a) A licensee shall file a new application as required by Section 86618 whenever there is a change in conditions or limitations described on the current license, or other changes including but not limited to the following:
 - (1) Any change in the location of the facility.
 - (2) Any change of licensee.
 - (3) Any increase in capacity.
 - (A) The licensing agency shall have the authority to grant capacity increases without resubmission of an application following a licensing agency review and the securing of an appropriate fire clearance.
- (b) A new application as required by Section 86618 shall be filed whenever an applicant fails to complete a new application within the time limit required by Section 86627(a) if the applicant chooses to continue the application process.

86635 CONDITIONS FOR FORFEITURE OF A COMMUNITY CARE FACILITY LICENSE

- (a) Conditions for forfeiture of a community care facility license may be found in Section 1524 of the Health and Safety Code.

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Health and Safety Code Section 1524 provides in part:

A license shall be forfeited by operation of law when one of the following occurs:

- (a) The licensee sells or otherwise transfers the facility or facility property, except if change of ownership applies to transferring of stock if the facility is owned by a corporation, and if the transfer of stock does not constitute a majority change of ownership.

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- (b) The licensee surrenders the license to the department.
- (c)
 - (1) The licensee moves a facility from one location to another. The department shall develop regulations to ensure that the facilities are not charged a full licensing fee and do not have to complete the entire application process if applying for a license for the new location.
 - (2) This subdivision does not apply to a licensed foster family home or a home certified by a licensed foster family agency. If a foster family home licensee or certified family home parent moves to a new location, the existing license or certification may be transferred to the new location. All caregivers to whom this paragraph applies shall be required to meet all applicable licensing laws and regulations at the new location.

[...]

- (e) The licensee abandons the facility.

[Cont.]

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- (1) "Licensee abandons the facility" shall mean either of the following:
 - (A) The licensee informs the licensing agency that the licensee no longer accepts responsibility for the facility, or
 - (B) The licensing agency is unable to determine the licensee's whereabouts after the following:
 - 1. The licensing agency requests information of the licensee's whereabouts from the facility's staff if any staff can be contacted; and
 - 2. The licensing agency has made at least one (1) phone call per day, to the licensee's last telephone number of record, for five (5) consecutive workdays with no response; and
 - 3. The licensing agency has sent a certified letter, requesting the licensee to contact the licensing agency, to the licensee's last mailing address of record with no response within seven (7) calendar days.

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Article 4. Administrative Actions

86640 DENIAL OF INITIAL LICENSE

- (a) Except as specified in Section 86630, which provides for issuance of a provisional license based upon substantial compliance and urgent need, the licensing agency shall deny an application for an initial license if it is determined that the applicant is not in compliance with applicable law, regulation, and operating standards.
 - (1) An application for licensure shall be denied as specified in Health and Safety Code Sections 1520.11(b), (d) and 1550.
- (b) If the application for an initial licensee is denied, the licensing agency shall mail the applicant a written notice of denial.
 - (1) The notification shall inform the applicant of and set forth the reasons for the denial and shall advise the applicant of the right to appeal.
- (c) If the application for an initial license is denied, the application processing fee shall be forfeited.
- (d) An applicant shall have the right to appeal the denial of the application pursuant to Health and Safety Code Section 1526.
- (e) Notwithstanding any appeal action, the facility is unlicensed and shall not operate pending adoption by the director of a decision on the denial action.

86642 REVOCATION OR SUSPENSION OF LICENSE

- (a) The Department shall have the authority to suspend or revoke any license on any of the grounds specified in Health and Safety Code Sections 1550 and 1550.5, and for violations of the operating standards set forth herein.

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Health and Safety Code Section 1550 provides:

"The department may deny an application for, or suspend or revoke any license, or any special permit, certificate of approval, or any administrator certificate, issued under this chapter upon any of the following grounds and in the manner provided in this chapter, or may deny a transfer of a license pursuant to paragraph (2) of subdivision (b) of Section 1524 for any of the following grounds:

- (a) Violation of this chapter or of the rules and regulations promulgated under this chapter by the licensee, or holder of a special permit or certificate.
- (b) Aiding, abetting, or permitting the violation of this chapter or of the rules and regulations promulgated under this chapter.
- (c) Conduct which is inimical to the health, morals, welfare, or safety of either the people of this state or an individual in, or receiving services from, the facility.

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- (d) The conviction of a licensee, holder of a special permit or certificate, or other person mentioned in Section 1522, at any time before or during licensure, of a crime as defined in Section 1522.
- (e) The licensee of any facility the holder of a special permit or certificate, or the person providing direct care or supervision knowingly allows any child to have illegal drugs or alcohol.
- (f) Engaging in acts of financial malfeasance concerning the operation of a facility or certified family home, including, but not limited to, improper use or embezzlement of client moneys and property or fraudulent appropriation for personal gain of facility moneys and property, or willful or negligent failure to provide services."

Health and Safety Code Section 1550.5 provides in part:

"The director may temporarily suspend any license prior to any hearing when, in the opinion of the director, the action is urgent to protect residents or clients of the facility from physical or mental abuse, abandonment, or any other substantial threat to health or safety. The director shall serve the licensee with the temporary suspension order, a copy of available discovery and other relevant evidence in the possession of the department, including, but not limited to, affidavits, declarations, and any other evidence upon which the director relied in issuing the temporary suspension order, the names of the department's witnesses, and the effective date of the temporary suspension and at the same time shall serve the licensee with an accusation.

- (b) Upon receipt of a notice of defense to the accusation by the licensee, the director shall, within 15 days, set the matter for a full evidentiary hearing, and the hearing shall be held as soon as possible but not later than 30 days after receipt of such notice. The temporary suspension shall remain in effect until the time the hearing is completed and the director has made a final determination on the merits, unless it is earlier vacated by interim decision of the administrative law judge or a superior court judge. However, the temporary suspension shall be deemed vacated if the director fails to make a final determination on the merits within 30 days after the original hearing has been completed."

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- (b) Proceedings to hear a revocation action or a revocation and temporary suspension action shall be conducted pursuant to the provisions of Health and Safety Code Sections 1550, 1550.5, and 1551.

86643 LICENSEE/APPLICANT COMPLAINTS

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Each licensee/applicant shall have the right, without prejudice, to bring to the attention of the Department or the licensing agency, or both, any alleged misapplication or capricious enforcement of regulations and operation standards by any licensing representative, or any differences in opinion between the licensee and any licensing representative concerning the proper application of these regulations.

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86644 INSPECTION AUTHORITY OF THE LICENSING AGENCY

- (a) The licensing agency shall have the inspection authority specified in Health and Safety Code Sections 1526.5, 1533, 1534, 1538, and 1538.7.

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Health and Safety Code Section 1526.5 provides:

- “(a) Within 90 days after a facility accepts its first client for placement following the issuance of a license or special permit pursuant to Section 1525, the department shall inspect the facility. The licensee shall, within five business days after accepting its first client for placement, notify the department that the facility has commenced operating. Foster family homes are exempt from the provisions of this subdivision.
- (b) The inspection required by subdivision (a) shall be conducted to evaluate compliance with rules and regulations and to assess the facility’s continuing ability to meet regulatory requirements. The department may take appropriate remedial action as authorized by this chapter.”

Health and Safety Code Section 1533(a) provides in part:

“...any duly authorized officer, employee, or agent of the State Department of Social Services may, upon presentation of proper identification, enter and inspect any place providing personal care, supervision, and services at any time, with or without advance notice, to secure compliance with, or to prevent a violation of, any provision of this chapter.”

Health and Safety Code Section 1534 provides in part:

- “(a)(1)(A) Except for foster family homes, every licensed community care facility shall be subject to unannounced inspections by the department.
- (B) Foster family homes shall be subject to announced inspections by the department, except that a foster family home shall be subject to unannounced inspections in response to a complaint, a plan of correction, or under any of the circumstances set forth in subparagraph (B) of paragraph (2).
- (2)(A) The department may inspect these facilities as often as necessary to ensure the quality of care provided.
- (B) The department shall conduct an annual unannounced inspection of a facility under any of the following circumstances:
- (i) If a license is on probation.
 - (ii) If the terms of agreement in a facility compliance plan require an annual inspection.
 - (iii) If an accusation against a licensee is pending.
 - (iv) If a facility requires an annual inspection as a condition of receiving federal

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financial participation.

- (v) In order to verify that a person who has been ordered out of a facility by the department is no longer at the facility.

[...] ***

- (F) On and after January 1, 2018, the following shall apply:
 - (i) Except for foster family homes, the department shall conduct annual unannounced inspections of no less than 20 percent of residential care facilities for children, as defined in Section 1502, including enhanced behavioral support homes for children, transitional housing placement providers, group homes for children with special health care needs, and foster family agencies not subject to an inspection under subparagraph (B).
 - (ii) The department shall conduct annual announced inspections of no less than 20 percent of foster family homes, as defined in Section 1502, not subject to an inspection under subparagraph (B).
 - (iii) The inspections in clauses (i) and (ii) shall be conducted based on a random sampling methodology developed by the department.
 - (iv) The department shall conduct unannounced inspections of residential care facilities for children, as defined in Section 1502, including enhanced behavioral support homes for children, transitional housing placement providers, group homes for children with special health care needs, and foster family agencies, and announced inspections of foster family homes, at least once every two years.
- (3) In order to facilitate direct contact with group home or short-term residential therapeutic program clients, the department may interview children who are clients of group homes or short-term residential therapeutic programs at any public agency or private agency at which the client may be found, including, but not limited to, a juvenile hall, recreation or vocational program, or a public or nonpublic school. The department shall respect the rights of the child while conducting the interview, including informing the child that they have the right not to be interviewed and the right to have another adult present during the interview.
- (4) The department shall notify the community care facility in writing of all deficiencies in its compliance with the provisions of this chapter and the rules and regulations adopted pursuant to this chapter, and shall set a reasonable length of time for compliance by the facility.
- (5) Reports on the results of each inspection, evaluation, or consultation shall be kept on file in the department, and all inspection reports, consultation reports, lists of deficiencies, and plans of correction shall be open to public inspection.”

Health and Safety Code Section 1538(c) provides in part:

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- “(c) (1) Upon receipt of a complaint, other than a complaint alleging denial of a statutory right of access to a community care facility, or certified family home or resource family of a foster family agency, the state department shall make a preliminary review and, unless the state department determines that the complaint is willfully intended to harass a licensee, certified family home, or resource family, or is without any reasonable basis, it shall make an onsite inspection of the community care facility, certified family home, or resource family home within 10 days after receiving the complaint, except where a visit would adversely affect the licensing investigation or the investigation of other agencies. In either event, the complainant shall be promptly informed of the state department’s proposed course of action.
- (2) If the department determines that the complaint is intended to harass, is without a reasonable basis, or, after a site inspection, is unfounded, then the complaint and any documents related to it shall be marked confidential and shall not be disclosed to the public. If the complaint investigation included a site visit, the licensee, or certified family home or resource family and foster family agency, shall be notified in writing within 30 days of the dismissal that the complaint has been dismissed.
- (d) Upon receipt of a complaint alleging denial of a statutory right of access to a community care facility, or certified family home or resource family home of a foster family agency, the department shall review the complaint. The complainant shall be notified promptly of the department’s proposed course of action.”

Health and Safety Code Section 1538.7 provides:

- “(a) A group home, transitional housing placement provider, community treatment facility, youth homelessness prevention center, temporary shelter care facility, transitional shelter care facility, or short-term residential therapeutic program shall report to the department’s Community Care Licensing Division upon the occurrence of any incident concerning a child in the facility involving contact with law enforcement. At least every six months, the facility shall provide a follow up report for each incident, including the type of incident; whether the incident involved an alleged violation of any crime described in Section 602 of the Welfare and Institutions Code by a child residing in the facility; whether staff, children, or both were involved; the gender, race, ethnicity, and age of children involved; and the outcomes, including arrests, removals of children from placement, or termination or suspension of staff.
- (b) (1) If the department determines that, based on the licensed capacity, a facility has reported, pursuant to subdivision (a), a greater than average number of law enforcement contacts involving an alleged violation of any crime described in Section 602 of the Welfare and Institutions Code by a child residing in the facility, the department shall inspect the facility at least once a year.
- (2) An inspection conducted pursuant to paragraph (1) does not constitute an unannounced inspection required pursuant to Section 1534.
- (c) If an inspection is required pursuant to subdivision (b), the Community Care Licensing Division shall provide the report to the department’s Children and Family Services Division and to any other public agency that has certified the facility’s program or any component of the facility’s program including, but not limited to, the State Department of Health Care Services, which certifies group homes or approves short-term residential therapeutic programs

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pursuant to Section 4096.5 of the Welfare and Institutions Code. ”

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- (b) The licensing agency shall have the authority to interview clients, including children, or staff members, without prior consent.
 - (1) The licensee shall ensure that provisions are made for private interviews with any clients, including children, or any staff members.
- (c) The licensing agency shall have the authority to inspect, audit, and copy client or facility records upon demand during normal business hours. Records may be removed if necessary for copying. Removal of records shall be subject to the requirements specified in Sections 86666(c) and 86670(d).
 - (1) The licensee shall ensure that provisions are made for the examination of all records relating to the operation of the facility.
- (d) The licensing agency shall have the authority to observe the physical condition of the client, including conditions that could indicate abuse, neglect, or inappropriate placement, and to have a licensed medical professional physically examine the client.

86645 EVALUATION VISITS

- (a) Community care facilities shall be evaluated as specified in Health and Safety Code Sections 1534 and 1548, except that the Department may not levy civil penalties for identified deficiencies.
- (b) The licensing agency shall have the authority to make any number of other visits to a facility in order to determine compliance with applicable law, regulation, and operating standards.
- (c) The licensee shall maintain, at the facility, a copy of all licensing reports for the past three years that would be accessible to the public through the department, for inspection by placement officials, current and prospective facility clients, and these clients’ family members who visit the facility.

86646 EXCLUSIONS

- (a) An individual can be prohibited from serving as a member of a board of directors, executive director, or officer; from being employed or allowing an individual in a licensed facility as specified in Health and Safety Code Sections 1558 and 1558.1.

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Article 5. Enforcement Provisions

86651 SERIOUS DEFICIENCIES

- (a) Failure to operate according to the plan of operation, as specified in Section 86622, may result in a citation for a serious deficiency.

86652 DEFICIENCIES IN COMPLIANCE

- (a) When a licensing evaluation is conducted and the evaluator determines that a deficiency exists the evaluator shall issue a notice of deficiency, unless the deficiency is not serious and is corrected during the visit.
- (b) Prior to completion of an evaluation or other licensing visit, the licensee, administrator, operator, or other person in charge of the facility shall meet with the evaluator to discuss any deficiencies noted, to jointly develop a plan for correcting each deficiency, and to acknowledge receipt of the notice of deficiency.
- (c) The evaluator shall provide notice of deficiency to the licensee by one of the following:
 - (1) Personal delivery to the licensee, at the completion of the visit.
 - (2) If the licensee is not at the facility site, leaving the notice with the person in charge of the facility at the completion of the visit.
 - (A) Under such circumstances, a copy of the notice shall also be mailed to the licensee.
 - (3) If the licensee or the person in charge of the facility refuses to accept the notice a notation of the refusal shall be written on the notice and a copy left at the facility.
 - (A) Under such circumstances, a copy of the notice shall also be mailed to the licensee.
- (d) The notice of deficiency shall be in writing and shall include the following:
 - (1) Citation of the statute, regulation, or operating standard which has been violated.
 - (2) A description of the nature of the deficiency stating the manner in which the licensee failed to comply with a specified statute, regulation, or operating standard, and the particular place or area of the facility in which it occurred.
 - (3) The plan developed, as specified in (b) above, for correcting each deficiency.
 - (4) A date by which each deficiency shall be corrected.
 - (A) In determining the date for correcting a deficiency, the evaluator shall consider the following factors:

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1. The potential hazard presented by the deficiency.
 2. The number of clients affected.
 3. The availability of equipment or personnel necessary to correct the deficiency.
 4. The estimated time necessary for delivery, and for any installation, of necessary equipment.
- (B) The date for correcting a deficiency shall not be more than 30 calendar days following service of the notice of deficiency, unless the evaluator determines that the deficiency cannot be completely corrected in 30 calendar days.
- (C) If the date for correcting the deficiency is more than 30 calendar days following service of the notice of deficiency, the notice shall specify the corrective actions which must be taken within 30 calendar days to begin correction.
- (5) The address and telephone number of the licensing office responsible for reviewing notices of deficiencies for the area in which the facility is located.

86653 FOLLOW-UP VISITS TO DETERMINE COMPLIANCE

- (a) A follow-up visit shall be conducted to determine compliance with the plan of correction specified in the notice of deficiency.
- (1) At a minimum, a follow-up visit shall be conducted within ten working days following the required date of correction specified in each notice of deficiency, unless the licensee has demonstrated that the deficiency was corrected as required.

86655 ADMINISTRATIVE REVIEW

- (a) A licensee or their representative shall have the right to request a review of a notice of deficiency within 10 working days of receipt of such notice(s).
- (b) The review shall be conducted by a higher level staff person than the evaluator who issued the notice(s).
- (c) If the reviewer determines that a notice of deficiency or notice of penalty was not issued or assessed in accordance with applicable statutes, regulations, or operating standards of the Department, they shall have the authority to amend or dismiss the notice.
- (d) The reviewer shall have the authority to extend the date specified for correction of a deficiency if warranted by the facts or circumstances presented to support a request for extension.

86656 EXEMPTION FROM CIVIL PENALTIES

- (a) Civil penalties shall not be assessed against the licensee.

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Article 6. Continuing Requirements

86661 REPORTING REQUIREMENTS

- (a) Each licensee or applicant shall furnish to the licensing agency reports as required by the Department, including, but not limited to, those specified in this section.
- (b) Upon the occurrence, during the operation of the facility, of any of the events specified in (1) below, a report shall be made to the licensing agency within the agency's next working day during its normal business hours. In addition, a written report containing the information specified in (2) below shall be submitted to the licensing agency within seven days following the occurrence of such event.
 - (1) Events reported shall include the following:
 - (A) Death of any client from any cause.
 - (B) Death of any client as a result of injury, abuse, or other than natural causes, regardless of where the death occurred. This includes a death that occurred outside the facility such as at a day program, workshop, job, hospital, en route to or from a hospital, or visiting away from the facility.
 - 1. The licensee shall obtain a certified copy of the client's death certificate as soon as it is available, maintain it in the client's file, and shall send a copy to the Department as soon as it is obtained.
 - 2. For Regional Center clients, the licensee shall also send a copy of the death certificate to the Regional Center.
 - (C) Any complication to a medical condition or to an injury that existed prior to the client's admission which requires medical treatment.
 - (D) Any injury to any client that occurs in the facility which requires medical treatment.
 - (E) Any unusual incident or client absence which threatens the physical or emotional health or safety of any client.
 - (F) Any suspected physical or psychological abuse of any client.
 - (G) Epidemic outbreaks.
 - (H) Poisonings.
 - (I) Catastrophes.
 - (J) Fires or explosions which occur in or on the premises.
 - (2) Information provided shall include the following:
 - (A) Client's name, age, sex at birth, gender identity, and date of admission.

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- (B) Date and nature of event.
 - (C) Attending physician's name, findings, and treatment, if any.
 - (D) Disposition of the case.
- (c) The items below shall be reported to the licensing agency within 10 working days following the occurrence.
- (1) The organizational changes specified in Section 86634(a).
 - (2) Any change in the licensee's or applicant's mailing address.
 - (3) Any changes in the plan of operation which affect the services to clients.
- (d) The items specified in (b)(1)(A) through (J) above shall also be reported to the client's authorized representative, if any.
- (e) The items specified in (b)(1)(G) through (I) above shall also be reported to the local health officer when appropriate pursuant to Title 17, California Administrative Code, Sections 2500, and 2502.

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Title 17, California Code of Regulations, Section 2500(b) provides:

“It shall be the duty of every health care provider, knowing of or in attendance on a case or suspected case of any of the following diseases or conditions listed in subdivision (j) of this section, to report to the local health officer for the jurisdiction where the patient resides as required in subdivision (h) of this section. Where no health care provider is in attendance, any individual having knowledge of a person who is suspected to be suffering from one of the following diseases or conditions listed in subdivision (j) of this section may make such a report to the local health officer for the jurisdiction where the patient resides.”

Title 17, California Code of Regulations, Section 2500(j) provides:

Health care providers shall submit reports for the following diseases or conditions.

Anaplasmosis	Listeriosis
Anthrax, human or animal	Lyme Disease
Babesiosis	Malaria
Botulism (Infant, Foodborne, Wound, Other)	Measles (Rubeola)
Brucellosis, human	Meningitis, Specify Etiology: Viral, Bacterial, Fungal, Parasitic
Brucellosis, animal (except infections due to <i>Brucella canis</i>)	Meningococcal Infections
Campylobacteriosis	Middle East Respiratory Syndrome (MERS)
Chancroid	Mumps
Chickenpox (Varicella) (outbreaks, hospitalizations and deaths)	Novel coronavirus infections

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Cholera	Novel virus infection with pandemic potential
Ciguatera Fish Poisoning	Paralytic Shellfish Poisoning
Chikungunya virus infection	Paratyphoid Fever
Coccidioidomycosis	Pertussis (Whooping Cough)
Coronavirus disease 2019 (COVID-19)	Plague, human or animal
Creutzfeldt-Jakob Disease (CJD) and other Transmissible Spongiform Encephalopathies (TSE)	Poliovirus Infection
Cryptosporidiosis	Psittacosis
Cyclosporiasis	Q Fever
Cysticercosis or taeniasis	Rabies, human or animal
Dengue virus infection	Relapsing Fever
Diphtheria	Respiratory syncytial virus-associated deaths in laboratory-confirmed cases less than five years of age)
Domoic Acid Poisoning (Amnesic Shellfish Poisoning)	Rickettsial Diseases (non-Rocky Mountain Spotted Fever), including Typhus and Typhus-like Illnesses
Erlichiosis	Rocky Mountain Spotted Fever
Encephalitis, Specify Etiology: Viral, Bacterial, Fungal, Parasitic	Rubella (German Measles)
<i>Escherichia coli</i> : shiga toxin producing (STEC) including <i>E. coli</i> O157	Rubella Syndrome, Congenital
Flavivirus infection of undetermined species	Salmonellosis (Other than Typhoid Fever)
Foodborne Disease	Scombroid Fish Poisoning
Giardiasis	Shiga toxin (detected in feces)
Gonococcal Infections	Shigellosis
<i>Haemophilus influenzae</i> , invasive disease, all serotypes (report an incident of less than five years of age)	Smallpox (Variola)
Hantavirus Infections	Syphilis (all stages, including congenital)
Hemolytic Uremic Syndrome	Tetanus
Hepatitis A, acute infection	Trichinosis
Hepatitis B (specify acute, chronic, or perinatal)	Tuberculosis
Hepatitis C (specify acute, chronic, or perinatal)	Tularemia, human
Hepatitis D (Delta) (specify acute case or chronic)	Tularemia, animal
Hepatitis E, acute infection	Typhoid Fever, Cases and Carriers
Human Immunodeficiency Virus (HIV), acute infection, (see (k) for additional reporting requirements)	<i>Vibrio</i> Infections
Human Immunodeficiency Virus (HIV) infection, any stage	Viral Hemorrhagic Fevers, human or animal (e.g., Crimean- Congo, Ebola, Lassa and Marburg viruses)
Human Immunodeficiency Virus (HIV) infection, progression to stage 3 (AIDS)	West Nile virus infection
Influenza-associated deaths in laboratory-confirmed cases less than 18 years of age	Yellow Fever
Influenza due to novel strains (human)	Yersiniosis
Legionellosis	Zika virus infection
Leprosy (Hansen Disease)	OCCURRENCE of ANY UNUSUAL DISEASE

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Leptospirosis	OUTBREAKS of ANY DISEASE (Including diseases not listed in Section 2500). Specify if institutional and/or open community.
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- (f) The item specified in (b)(1)(J) shall also be reported immediately to the local fire authority. In areas not having organized fire services a report shall be made to the State Fire Marshal within 24 hours.
- (g) Licensees shall send copies of all substantiated complaints to board of directors members of the licensed facility, and other persons, as designated in each client's placement agreement in accordance with Health and Safety Code Section 1538.5.

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Health and Safety Code Section 1538.5 provides in part:

"(a)(1)Not less than 30 days prior to the anniversary of the effective date of the license of any residential community care facility license, except licensed foster family homes, the department may transmit a copy to the board members of the licensed facility, parents, legal guardians, conservators, client's rights advocate, or placement agencies, as designated in each resident's placement agreement, of all inspection reports given to the facility by the department during the past year as a result of a substantiated complaint regarding a violation of this chapter relating to resident abuse and neglect, food, sanitation, incidental medical care, and residential supervision. During that one-year period the copy of the notices transmitted and the proof of the transmittal shall be open for public inspection.

[...]

- (b) The facility operator, at the expense of the facility, shall transmit a copy of all substantiated complaints, by certified mail, to those persons described pursuant to paragraph (1) of subdivision (a) in the following cases:
 - (1) In the case of any substantiated complaint relating to resident physical or sexual abuse, the facility shall have three days, from the date the facility receives the licensing report from the department to comply.
 - (2) In the case in which a facility has received three or more substantiated complaints relating to the same violation during the past 12 months, the facility shall have five days from the date the facility receives the licensing report to comply.
- (c) A residential facility shall retain a copy of the notices transmitted pursuant to subdivision (b) and proof of their transmittal by certified mail for a period of one year after their transmittal.
- (d) If a residential facility to which this section applies fails to comply with this section, as determined by the department, the department shall initiate civil penalty action against the facility in accordance this article and the related rules and regulations.

[...]

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- (f) The department shall notify the residential community care facility of its obligation when it is required to comply with this section."

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- (h) The licensee shall ensure that the child's caseworker is notified no later than the next business day if the following circumstances have occurred without the caseworker's participation:
- (1) The child has been removed from the facility.
 - (2) Each time the child has been placed in a manual restraint, to be reported as required in Section 86761.
- (i) The licensee shall ensure that the child's caseworker is sent prior written notification regarding the need for nonemergency relocation of the child to another facility, including a satellite home.
- (j) The licensee shall ensure that the child's caseworker is notified if the child is not enrolled in or regularly attending school.
- (k) Effective January 1, 2000, the licensee shall notify the Department, in writing, within ten (10) days of any change in the facility administrator.
- (l) The licensee shall notify the licensing agency in writing within ten business days of acquiring a new member of the board of directors. The notification shall include the following:
- (1) Name and mailing address of the new member of the board of directors;
 - (2) Date they joined the board of directors, and
 - (3) A copy of the LIC 9165 signed by the new member of the board of directors.
- (m) The licensee shall notify the Department, in writing, within ten (10) business days, of the hiring or appointment of a new administrator. The notification shall include the following:
- (1) Name and residence and mailing addresses of the new administrator.
 - (2) Date they assumed their position.
 - (3) Description of their background and qualifications, including documentation of required education and administrator certification.
 - (A) A photocopy of the documentation shall be permitted.
- (n) Incident Reports must include the following:
- (1) Date, time, duration and location of the incident.
 - (2) A detailed narrative, describing the incident and the events leading up to incident.
 - (3) Analysis of the incident:

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- (A) Other reportable incidents involving the same child in the preceding six months.
 - (B) Description of other incidents.
 - 1. Dates of previous incidents.
 - 2. Types of incidents.
 - 3. Action taken by facility personnel in response to incidents.
 - (C) Are there commonalities between this incident and other incidents involving the same child in the preceding six months.
- (4) Description of the facility's plan for the child, in response to the incident.
- (5) What action was taken by facility personnel to re-integrate the child into the general population after the incident.
- (6) When the Incident Report is used to report the use of manual restraints, the report must include the following:
- (A) Date and time of other manual restraints involving the same child in the past 24 hours.
 - (B) A description of the child's behavior that required the use of manual restraints, and description of the precipitating factors which led to the intervention.
 - (C) Description of what manual restraints were used, and how long the child was restrained.
 - (D) Description of what non-physical interventions were utilized prior to the restraint; explanation of why more restrictive interventions were necessary.
 - (E) Description of injuries sustained by the child or facility personnel. What type of medical treatment was sought and where was child taken. Explanation if medical treatment not sought for injuries.
 - (F) Name(s) of facility personnel who provided the manual restraint.
 - (G) Name(s) of facility personnel who witnessed the child's behavior and the restraint.
 - (H) The child's verbal response and physical appearance, including a description of any injuries at the completion of the restraint.
 - (I) If it is determined by the post incident review, as required in Section 86768.3, that facility personnel did not attempt to prevent the manual restraint, a description of what action should have been taken by facility personnel to prevent the manual restraint incident. What corrective action will be taken or not taken and why.
 - (J) If law enforcement was involved, a detailed description of the incident.

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- (K) Documentation that the child's authorized representative has been notified of the incident.
- (7) When the Incident Report is used to report a runaway situation, the report must include the following:
 - (A) When and how was the child's absence first noted.
 - (B) If known, child's last known activities.
 - (C) What were the circumstances surrounding the child's absence.
 - (D) What action did the facility personnel take to discourage the child from leaving; and what interventions were utilized, if any.
 - (E) What action was taken by facility personnel to locate the child.
 - (F) If a manual restraint was used, and if it is determined by the post incident review, as required in Section 86768.3, that facility personnel did not attempt to prevent the manual restraint, a description of what action should have been taken by facility personnel to prevent the manual restraint incident. What corrective action will be taken or not taken and why.
 - (G) If law enforcement was involved in the incident, a detailed description of the incident.
 - (H) Documentation that the child's authorized representative has been notified of the incident.
- (o) The licensee shall submit reports to the Department, using form LIC 624-LE or a report containing all the information required in LIC 624-LE, regarding any incident that involves law enforcement contact with a child residing in the facility.
 - (1) The licensee shall make an initial report to the Department no later than the next business day following each incident. The initial report shall include all information described in Section 86661(i)(2)(A) through (F) that is known to the licensee at the time the report is made.
 - (2) Within six months of the incident, the licensee shall provide a follow-up report for each incident that includes the following information:
 - (A) The type of incident.
 - (B) Whether the incident involved an alleged violation of any crime, other than an age-based curfew law, by a child residing in the facility.
 - (C) Whether staff, children, or both were involved in the incident.
 - (D) The gender, race, ethnicity, and age of children involved in the incident.
 - (E) The outcome of the incident, if known, including arrests, removals of children from placement, termination or suspension of staff, the filing of a Welfare and Institutions

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Code Section 602 petition for the child, or revocation of or changes to the terms of probation.

- (3) The licensee may file the follow-up report at any time within six months of the incident, including with the initial report, if all outcomes and required information are known.
- (4) The licensee may be required to provide follow-up reports beyond the first six months if the Department determines that the information provided in either the initial or follow-up reports is incomplete, or if outcomes required to be reported are not known until later than six months after the initial report.
- (5) A licensee reporting an incident under this subdivision shall not be required to report the same incident under any other provision of this Section, or under Section 86661, so long as all information required to be reported by the other provision is provided.
- (6) For the purposes of this subdivision, contact with "law enforcement" means contact by police officers, sheriffs and others as defined in Section 86601(1)(1), with a child residing in the facility, which does not include routine contact with a probation officer who is supervising the placement of a child in the facility.

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Example: Routine contacts with probation officers do not need to be reported to the Department. However, action taken by a probation officer in response to a reportable incident involving a child in the facility in which law enforcement was called, including, but not limited to, revocation or changes of the terms of probation, should be reported as an outcome as required in (i)(2)(E) if known.

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- (p) In addition to the reporting requirements of Sections 86661, 86662, 86665, and 86761, the licensee who operates a Transitional Shelter Care Facility shall:
 - (1) Upon the occurrence of any of the events specified in (A) through (D) below, the licensee shall notify the Department by the end of the Department's next business day. In addition, a written report shall be submitted to the Department within seven (7) days.
 - (A) Any person violates the personal rights of a child.
 - (B) A child is assaulted by another child or another person at the facility.
 - (C) A child is detained in a juvenile institution.
 - (D) A child requires physical health care in an acute care hospital or mental health services in an acute psychiatric hospital or community treatment facility.
 - (2) Upon the occurrence of any of the events specified in Section 86661(a)(1)(A) through (D), notification shall be made to the caseworker of each child mentioned in Sections 86661(a)(1)(A) through (D) by the end of the Department's next business day.

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- (q) If the facility admits clients in excess of the capacity set forth on the license, the licensee shall notify the Department in writing within 24 hours, or by the end of the Department's next business day, whichever is sooner.

- (r) If the facility admits clients in excess of the maximum occupancy set by the fire authority having jurisdiction, the licensee shall notify in writing the Department and the fire authority having jurisdiction. The notification to the Department shall occur either within four (4) hours during the Department's business hours or, if after hours, within the first four (4) hours of the Department's next business day;
 - (1) The notice to the Department shall include a copy of the notice sent to the fire authority having jurisdiction.

- (s) (1) The licensee shall prepare a written report for each child whose stay in the facility exceeds 72 hours. The licensee shall submit the report to the Department, through a process determined by the Department, no later than 24 hours after the child's placement reaches the 72-hour limit. The Department's standardized report shall contain the following information:
 - (A) Child's name, date of birth and client identification number, obtained from the county placing agency;
 - (B) Date of admission; and
 - (C) The reasons and circumstances for the child's overstay.

- (2) If requested by the Department, the licensee shall provide additional information on youth who have overstayed.

- (3) The licensee shall provide telephonic notice to the child's county caseworker when that child's stay has exceeded the 72-hour limit, no later than 4 hours after the 72-hour limit was reached.
 - (A) The date and time of the provided telephonic notice must be documented and maintained in the client's file.

- (t) The licensee shall prepare a written report of all children served in the shelter each month. No later than the 5th day of each month, the licensee shall submit the report to the Department, through a process determined by the Department, with the following data from the prior month for each child residing in the facility during the reporting period:
 - (1) Child's date of birth, sex at birth, gender identity, race, and client identification number, obtained from the placing agency;
 - (2) Placing agency;
 - (3) Date of admission;
 - (4) Date of discharge for any child discharged during the reporting period;

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- (5) Length of stay in the facility;
 - (6) Reason for admission to the facility;
 - (7) Barriers to placement, if applicable; and
 - (8) The child's next placement, if applicable.
- (u) The reports maintained by the shelter in accordance with this section shall be made available to the Department for review and reproduction upon request.

86662 FINANCES

- (a) The licensee shall meet the following financial requirements:
- (1) Development and maintenance of a financial plan which describes the resources necessary to meet the facilities' operating costs for the care and supervision of children.
 - (2) Maintenance of financial records.
 - (3) Submission of financial reports as required upon the written request of the Department or licensing agency.
 - (A) Such request shall explain the necessity for disclosure.
 - (B) The licensing agency shall have the authority to reject any financial report, and to request and examine additional information including interim financial statements. The reason(s) for rejection of the report shall be in writing.

86663 ACCOUNTABILITY

- (a) The licensee is accountable for the general supervision of the licensed facility, and for the establishment of policies concerning its operation.
- (1) The licensee, whether operating as a corporation, limited liability company, partnership, joint venture or other association, shall have a governing body that shall conduct all activities and affairs of the licensee and all corporate powers of the licensee shall be exercised or under the direction of the governing body. The governing body may delegate the management of the activities of the licensee to any person or persons, or committee however composed, provided that the activities and affairs of the licensee shall be managed and all corporate powers shall be exercised under the ultimate direction of the governing body.
 - (2) For purposes of these Operating Standards, "governing body" also means "board of directors."
 - (3) For purposes of these Operating Standards, references to "board of directors" shall also include "board of supervisors", when applicable, for a county-operated transitional shelter care facility.

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- (A) For a county-operated transitional shelter care facility, the Board of Supervisors of the County shall serve as “board of directors” of the facility, or, at its election, may appoint no fewer than three individuals to serve as board of directors.
- (b) The board of directors shall be active in ensuring accountability and shall perform, at a minimum, the following duties:
- (1) Establish and approve policies and procedures governing the operation of the transitional shelter care facility;
 - (2) Approve and monitor the facilities’ operating budget;
 - (3) Assess and maintain the level of funds necessary to cover the costs of operating the facility;
 - (4) Review and approve the facility's emergency intervention plan as specified in Section 86722(k);
 - (5) Employ an administrator who meets the requirements of Section 86664;
 - (6) Complete a written statement describing the duties delegated to the administrator. Provide a copy of this statement to the administrator and maintain a copy in the facility's file;
 - (7) Require that the Chief Executive Officer, administrator, or a designee be present at all board of directors meetings during which the operation or the policies of the facilities are discussed;
 - (8) Conduct board of directors meetings at least on a quarterly basis to review and discuss the facility’s operation and documents as specified in Health and Safety Code Section 1520.1(f), and based upon the review, ensure that the facility complies with all applicable regulations and operating standards;
 - (A) Review and discussion of the facility’s operation shall include the incidents concerning a child in the facility involving contact with law enforcement that were reported to the Department as specified in Section 86661(p).
 - (9) Ensure that minutes are kept for all board of directors’ meetings and retained as a permanent record. The minutes shall reflect the board's discussion of the documents specified in Health and Safety Code Section 1520.1(f);
 - (10) Ensure that all minutes of board of directors' meetings are available to the licensing agency to inspect, audit, and copy upon demand during normal business hours. Minutes may be removed if necessary for copying. Removal of minutes shall be subject to the following requirements:
 - (A) Prior to removing any minutes, a licensing representative shall prepare a list of the minutes to be removed, sign and date the list upon removal of the minutes, and leave a copy of the list with the administrator or designee.
 - (B) Licensing representatives shall return the minutes undamaged and in good order within three business days following the date the minutes were removed.
 - (11) Submit copies of all corporate documents to the licensing agency at the time documents are

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submitted to the Secretary of State. Board of director members sign and date the form, LIC 9165 as specified in Section 86618(h). The signed original form shall be maintained in the corporation's principal California office.

- (c) The licensee shall provide each board of directors member with the "Facts You Need To Know, Group Home Board of Directors" (PUB 326) booklet furnished by the Department.
- (d) The licensee shall require that each board of directors member sign and date the form, (LIC 9165) as specified in Section 86618(h). The signed original form shall be maintained in the facilities.
 - (1) The signed form shall be obtained from each board of directors member by the next scheduled board of directors meeting after July 1, 1999.
 - (2) A signed form shall be obtained from a prospective board of directors member before joining the board of directors.
 - (3) A permanent license shall not be issued until all members of the board of directors have signed the form.
 - (4) The LIC 9165 specified in 86618(h) shall be made available for review by the Department upon request.

86664 ADMINISTRATOR-QUALIFICATIONS AND DUTIES

- (a) The administrator shall have the following qualifications:
 - (1) Attainment of at least 21 years of age.
 - (2) Knowledge of the requirements for providing the type of care and supervision needed by clients, including ability to communicate with such clients.
 - (3) Knowledge of and ability to comply with applicable law, regulation, and operating standards.
 - (4) Ability to maintain or supervise the maintenance of financial and other records.
 - (5) Ability to direct the work of others, when applicable.
 - (6) Ability to establish the facility's policy, program and budget.
 - (7) Ability to recruit, employ, train, and evaluate qualified staff, and to terminate employment of staff, if applicable to the facility.
 - (8) Ability to oversee contractors providing care, supervision and other services to clients of the facility and to take action to modify and/or terminate any contracts if the contractors do not meet these operating standards.
- (b) The licensee shall make provision for continuing operation and carrying out of the administrator's responsibilities during any absence of the administrator.

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- (c) The licensee by and through its board of directors, may designate any person to be the administrator provided that they meet the qualifications specified in this section of the Operating Standards, and in applicable regulations in Title 22, Division 6, Chapters 2 through 7.
- (d) A transitional shelter care facility shall have a qualified and currently certified administrator with a group home or short-term residential therapeutic program administrator certificate.
 - (1) In the event a certified administrator is not employed within ten (10) days of the departure of the former administrator, a written "Plan of Correction" shall be developed to bring the transitional shelter care facility into compliance with the requirements of this section.
 - (2) In the event the licensee fails to comply with all requirements regarding group home or short-term residential therapeutic program certified administrators, the Department and the licensee will enter into dispute resolution for a period not to exceed three weeks. If the parties are unable to resolve the dispute, the department may exercise its authority under Section 86642.
 - (3) Unless otherwise provided, a certified administrator may administer more than one licensed transitional shelter care facility.
- (e) The administrator shall be on the premises for the number of hours necessary to manage and administer the facility in compliance with applicable law, regulation, and operating standards.
- (f) When the administrator is absent, one of the following requirements shall be met:
 - (1) In facilities with a licensed capacity of 12 or fewer children, there shall be coverage by a designated staff person.
 - (2) In facilities with a licensed capacity of 13 or more children, there shall be coverage by a designated substitute who has the following qualifications:
 - (A) Graduation from high school or equivalent.
 - (B) One year of administrative or supervisory experience over social work, child care, and/or support staff providing direct services to children in an agency or in a community care facility with a licensed capacity of seven or more.
- (g) The administrator shall meet the requirements specified below:
 - (1) The administrator of a facility with a licensed capacity of 12 or fewer children shall meet one of the following requirements:
 - (A) Have a master's degree in a behavioral science from an accredited college or university, plus a minimum of one year of employment as a social worker, as defined in Section 86601(s)(7), in an agency serving children or in a group residential program for children.
 - (B) Have a bachelor's degree from an accredited college or university, plus at least one year of administrative experience or supervisory experience over social work, child care, and/or support staff providing direct services to children in an agency or in a community care facility with a licensed capacity of seven or more.

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- (C) Have completed at least two years at an accredited college or university, plus at least two years administrative experience or supervisory experience over social work, child care, and/or support staff providing direct services to children in an agency or in a community care facility with a licensed capacity of seven or more.
 - (D) Have completed high school, or equivalent, plus at least three years administrative experience or supervisory experience over social work, child care, and/or support staff providing direct services to children in an agency or in a community care facility with a licensed capacity of seven or more.
- (2) The administrator of a facility with a licensed capacity of 13 or more children shall meet one of the following requirements:
- (A) Have a master's degree in a behavioral science from an accredited college or university, plus at least one year of administrative experience or supervisory experience over social work, child care, and/or support staff providing direct services to children in an agency or in a community care facility with a licensed capacity of seven or more.
 - (B) Have a master's degree in a behavioral science from an accredited college or university, plus two years of employment as a social worker, as defined in Section 86601(s)(7), in an agency serving children or in a group residential program for children.
 - (C) Have a bachelor's degree from an accredited college or university, plus at least three years administrative experience or supervisory experience over social work, child care, and/or support staff providing direct services to children in an agency or in a community care facility with a licensed capacity of seven or more.
 - (D) Have completed at least two years at an accredited college or university, plus at least five years administrative experience or supervisory experience over social work, child care, and/or support staff providing direct services to children in an agency or in a community care facility with a licensed capacity of seven or more.
- (h) The administrator shall perform the following duties:
- (1) Direction and evaluation of a transitional shelter care facility within the limits of the functions and policies established by the licensee.
 - (2) Assist in the preparation of the facility's budget and management of expenditures according to the facility's budget limitations.
 - (3) Organization of the work of the facility and delegation of responsibility to staff members and contractors.
 - (4) Assessment of the facility operations and program; and reporting to the licensee and making recommendations to address identified problems.
 - (5) Recruitment, appointment, evaluation and termination of staff.
 - (6) Recruitment, selection, and evaluation of contractors to provide care, supervision, and services

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to clients of the facility, and initiation of termination of contracts.

- (6) Development of a plan for the orientation, development and training of staff, as specified in Section 86665(t).
- (7) Review of complaints made by children or their authorized representative(s) as specified in Section 86672.2(a), and deciding upon the action to be taken to handle the complaint.

86664.1 ADDITIONAL ADMINISTRATOR QUALIFICATIONS AND DUTIES FOR SERVING CHILDREN WITH SPECIAL HEALTH CARE NEEDS

- (a) An administrator shall ensure the provision of services to children with special health care needs with appropriate regard for the child's physical and mental well-being and needs, including those services identified in the child's individualized health care plan.

86664.2 ADMINISTRATOR CERTIFICATION REQUIREMENTS

- (a) An individual shall be a group home or short-term residential therapeutic program certificate holder prior to being employed as an administrator of a transitional shelter care facility.
- (b) An administrator shall comply with the applicable administrator certification requirements specified in Health and Safety Code section 1522.41 and the regulations, operating standards, or interim licensing standards adopted thereunder.
- (c) It shall be unlawful for any person not certified under Health and Safety Code section 1522.41 to misrepresent themselves as a certified administrator. Any person willfully making any false representation as being a certified administrator is guilty of a misdemeanor.

86664.3 ADMINISTRATOR RECERTIFICATION REQUIREMENTS

- (a) An administrator shall complete at least forty (40) classroom hours of continuing education during each two-year certification period, as specified in Health and Safety Code section 1522.41 and the regulations, operating standards, or interim licensing standards adopted thereunder.
- (b) To apply for recertification of a group home or short-term residential therapeutic program administrator certificate prior to the expiration date of the certificate, the certificate holder shall comply with the requirements specified in Health and Safety Code section 1522.41 and the regulations, operating standards, or interim licensing standards adopted thereunder.
- (c) To apply for recertification of a group home or short-term residential therapeutic program administrator certificate after the expiration date of the certificate, but within four (4) years of the certificate expiration date, the certificate holder shall comply with the requirements specified in Health and Safety Code section 1522.41 and the regulations, operating standards, or interim licensing standards adopted thereunder.
- (d) A certificate holder shall report any change of mailing address within thirty (30) days to the Department's Administrator Certification Section.

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86664.4 ADMINISTRATOR CERTIFICATE DENIAL OR REVOCATION

- (a) The Department may deny or revoke any group home or short-term residential therapeutic program administrator certificate upon any of the grounds specified in Health and Safety Code Section 1550 and as specified in the regulations, operating standards, or interim licensing standards adopted pursuant to Health and Safety Code section 1522.41.
- (b) Any denial or revocation of a group home or short-term residential therapeutic program administrator certificate may be appealed as provided by Health and Safety Code Section 1551 and as specified in the regulations, operating standards, or interim licensing standards adopted pursuant to Health and Safety Code section 1522.41.

86664.5 ADMINISTRATOR CERTIFICATE FORFEITURE

- (a) Unless otherwise ordered by the Department, a group home or short-term residential therapeutic program administrator certificate shall be considered forfeited as specified in Health and Safety Code section 1522.41 and the regulations, operating standards, or interim licensing standards adopted thereunder.
- (b) Unless otherwise ordered by the Department, any application for a group home or short-term residential therapeutic program administrator certificate submitted after a certificate has been forfeited shall be processed in accordance with the provisions of Health and Safety Code Sections 1522.41 and the regulations, operating standards, or interim licensing standards adopted thereunder.

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Health and Safety Code Section 1522.41(i) provides:

- (i) Unless otherwise ordered by the department, an administrator certificate shall be considered forfeited under either of the following conditions:
 - (1) The administrator has had a license revoked, suspended, or denied as authorized under Section 1550.
 - (2) The department has issued an exclusion order against the administrator pursuant to Section 1558, 1568.092, 1569.58, or 1596.8897, after the department issued the certificate, and the administrator did not appeal the exclusion order or, after the appeal, the department issued a decision and order that upheld the exclusion order.

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86665 PERSONNEL REQUIREMENTS

- (a) Facility personnel shall be competent to provide the services necessary to meet individual client needs and shall, at all times, be employed in numbers necessary to meet such needs.
- (b) The licensing agency shall have the authority to require any licensee to provide additional staff

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whenever the licensing agency determines and documents that additional staff are required for the provision of services necessary to meet client needs. The licensee shall be informed in writing of the reasons for the licensing agency's determination. The following factors shall be taken into consideration in determining the need for additional staff.

- (1) Needs of the particular clients.
 - (2) Extent of the services provided by the facility.
 - (3) Physical arrangements of the particular facility.
 - (4) Existence of a state of emergency or disaster.
- (c) The licensee shall be permitted to utilize volunteers provided that such volunteers are supervised, and are not included in the facility staff plan.
- (d) The following facility personnel staff shall be at least 21 years of age:
- (1) Persons who supervise employees and/or volunteers.
 - (2) Persons, including volunteers, who provide any element of care and supervision to clients, except for volunteer peer or youth mentors who shall be at least 18 years of age.
- (e) The licensee shall provide for direct supervision of clients during participation in or presence at potentially dangerous activities or areas in the facility.
- (1) An adult other than a client shall be present at all times while clients are using a pool or other body of water from which rescue requires the rescuer's ability to swim.
 - (2) Adults who supervise while clients are using a pool or other body of water from which rescue requires the rescuer's ability to swim, shall have a valid water safety certificate.
- (f) All personnel shall be given on-the-job training or shall have related experience which provides knowledge of and skill in the following areas, as appropriate to the job assigned and as evidenced by safe and effective job performance.
- (1) Principles of nutrition, food preparation and storage and menu planning.
 - (2) Housekeeping and sanitation principles.
 - (3) Provision of client care and supervision, including communication.
 - (4) Assistance with prescribed medications which are self-administered.
 - (5) Recognition of early signs of illness and the need for professional assistance.
 - (6) Availability of community services and resources.
- (g) All personnel, including the administrator and volunteers, shall be in good health, and shall be physically, mentally, and occupationally capable of performing assigned tasks.

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- (1) Except as specified in (3) below, good physical health shall be verified by a health screening, including a test for tuberculosis, performed by or under the supervision of a physician not more than one year prior to or seven days after employment or licensure.
- (2) A health screening report signed by the person performing such screening shall be made on each person specified above, and shall indicate the following:
 - (A) The person's physical qualifications to perform the duties to be assigned.
 - (B) The presence of any health condition that would create a hazard to the person, clients or other staff members.
- (3) The good physical health of each volunteer who works in the facility shall be verified by:
 - (A) A statement signed by each volunteer affirming that they are in good health.
 - (B) A test for tuberculosis performed not more than one year prior to or seven days after initial presence in the facility.
- (h) Personnel with evidence of physical illness that poses a threat to the health and safety of clients shall be relieved of their duties.
- (i) Prior to employment or initial presence in the facility, all employees and volunteers subject to a criminal record review shall:
 - (1) Obtain a criminal record clearance or a criminal record exemption as required by Section 86619 or
 - (2) Request a transfer of a criminal record clearance as specified in Section 86619(f) or
 - (3) Request and be approved for a transfer of a criminal record exemption, as specified in Section 86619.1(r), unless, upon request for the transfer, the Department permits the individual to be employed, reside or be present at the facility.
- (j) Clients shall not be used as substitutes for required staff but shall be permitted, as a voluntary part of their program of activities, to participate in household duties and other tasks suited to the client's needs and abilities.
- (k) When regular staff members are absent, there shall be coverage by personnel capable of performing assigned tasks as evidenced by on-the-job performance.
- (l) Personnel shall provide for the care and safety of persons without physical or verbal abuse, exploitation or prejudice.
- (m) All personnel shall be instructed to report observations or evidence of violations of any of the personal rights specified in Section 86672 and/or any of the personal rights provisions.
- (o) The licensee shall employ those administrative, child care, social work and support staff necessary to perform the assigned duties specified in applicable law, regulation, and operating standards.

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- (p) The licensee shall ensure provision of the services specified in Section 86665.2(c)(1) through (4) by social work staff.
- (q) The licensee shall designate at least one facility manager to be present at the facility at all times when children are present.
 - (1) The facility manager shall meet one of the following requirements prior to employment.
 - (A) One year of full-time experience, or its equivalent, working with the client group to be served.
 - 1. Experience shall be verified as having been performed as a paid or volunteer staff person whose duties required direct supervision and care of the client group served.
 - (B) Two years experience as a member of the social work staff in a group home performing those duties specified in Section 86665.2(c).
 - (C) Completion with a passing grade, from an accredited or approved college or university, of 15 college semester or equivalent quarter units in behavioral science, 9 units of which must be in courses relating to children with behavioral problems which may be the result of abuse, neglect, or emotional trauma. The courses may include, but are not limited to curricula in Corrections, Psychology, Social Work, or Social Welfare.
 - (2) Prior to assuming the duties and responsibilities of the facility manager, the individual shall complete a minimum of one hour of training as specified in Section 86665(x), in addition to training required in Sections 86665(v) and (w).
 - (3) Any person willfully making any false representation as being a facility manager is guilty of a misdemeanor.
- (r) One employee shall be designated by the administrator to have primary responsibility for planned activities and shall be given assistance as necessary to ensure that all children can participate in accordance with their needs, interests, and abilities.
 - (1) Such employee shall develop, organize, implement, and evaluate the facility activity program, and shall possess the following qualifications:
 - (A) Six months' experience in organizing and providing planned activities.
- (s) The licensee of a transitional shelter care facility providing care and supervision to children diagnosed by a physician, psychiatrist, psychologist or licensed clinical social worker as mentally disordered shall make provision for at least monthly consultation from a psychiatrist, or clinical psychologist, or licensed clinical social worker regarding the program of services.
 - (1) The licensee shall maintain on file copies of reports signed by any such consultant, noting the types and hours of services provided.
- (t) The licensee of a transitional shelter care facility providing care and supervision to children diagnosed by a physician, psychiatrist or psychologist as developmentally disabled shall make provision for at

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least monthly consultation from a qualified mental retardation professional regarding the program of services.

- (1) The licensee shall maintain on file copies of reports signed by any such consultant, noting the types and hours of services provided.
- (u) The licensee shall develop, maintain, and implement a written plan for the supervision, evaluation, and training of all child care staff, which may include training obtained through contract.
- (1) The child care staff training plan, as specified in Sections 86665(v) and (w) shall be incorporated in the transitional shelter care facility program statement.
 - (2) The training plan shall address the initial 24-hour training for newly hired child care staff.
 - (A) When the training plan includes job shadowing activities as described in Section 86665(v)(1), the following shall be included in the training plan:
 1. Specific activities;
 2. Job classification of the individual being shadowed;
 3. Time spent on each activity; and
 4. Skill to be developed through each job-shadowing activity.
 - (3) The training plan shall address the annual training for newly hired and existing child care staff.
 - (4) The training plan shall include the following for each training session:
 - (A) Course title and subject matter;
 - (B) Learning objectives and activities;
 - (C) Number of hours per training session;
 - (D) Qualifications of the trainer; and
 - (E) Training evaluation.
 1. Each session shall include an evaluation of the trainer and course content to determine if the training is meeting the needs of facility staff.
 - (5) The training plan shall be appropriate for the client population and the training needs and skill level of facility staff.
 - (A) The licensee shall amend the training plan, when necessary, to meet the needs of facility staff and the client population.
 - (6) Amendments to the staff training plan, shall be submitted to the Department within ten days following the occurrence.

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- (v) Notwithstanding Sections 86665(f)(1) through (6), new child care staff shall complete a minimum of 24 hours of initial training comprised of the 8 and 16 hour training as specified in (1) and (2) below:
- (1) 8-Hour Training
- (A) Training shall be completed before new child care staff are:
1. Responsible for supervising children,
 2. Left alone with children, and
 3. Counted in the staff-to-child ratio required in Sections 86665.5.
- (B) Until the 8 hours of training is completed, new child care staff shall be visually supervised at all times by child care staff who meet the training requirements specified in this subdivision and (2) below.
- (C) A maximum of 4 hours of the training requirement may be satisfied by successful completion of job shadowing.
1. For the purpose of these operating standards, job shadowing means a process whereby new child care staff follow and observe experienced facility personnel performing a specific job. The purpose of job shadowing is to gain information related to a specific job including, materials used, physical demands, necessary skills and knowledge.
 2. During shadowing, the experienced facility personnel being shadowed must be performing child care duties and counted in the staff-to-child ratios, as required in Sections 86665.5.
 3. Job shadowing shall promote the development of specific skills, and shall consist of specific activities for a specific time period.
 4. Successful completion of job shadowing shall be verified by a statement completed by the experienced facility personnel being shadowed affirming: a) specific activity observed; b) dates and times of shadowing; and, c) training topic listed in Section 86665(v)(3)(A) through (X) that is satisfied by the job shadowing activity.
- (D) Within 7 calendar days of completion of the 8-hour training, the administrator or administrator's designee shall assess if each child care staff understands and can apply the training.
1. The assessment may include observation of performance, post-testing or demonstrated hands-on competency.
 2. The assessment shall be documented in each child care staff personnel record.
 3. When the administrator or administrator's designee determines a child care staff does not understand and cannot apply the training, re-training is required.

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- (2) Sixteen hours of training shall be completed by new child care staff within 90 days of hire.
 - (A) New child care staff who work a maximum of 20 hours per week shall complete the additional minimum 16 hours of training within 180 days of hire.
 - (B) Within 30 days of completion of the 16 hour training, the administrator or administrator's designee shall assess if each newly hired child care staff understands and can apply the training.
 - 1. The assessment may include observation of performance, post-testing or demonstrated hands-on competency.
 - 2. The assessment shall be documented in each child care staff personnel record.
 - 3. When the administrator or administrator's designee determines a child care staff does not understand and cannot apply the training, re-training is required.
- (3) Training shall include, at a minimum, all of the following topics. The licensee shall determine how much time is spent on each topic, and shall ensure that child care staff have appropriate skills necessary to supervise the children in care.
 - (A) Overview of the client population served by the transitional shelter care facility;
 - (B) Facility's program and services, including program philosophy, activities and community resources;
 - (C) Facility's policies and procedures, including reporting requirements to the Department and as a mandated child abuse reporter;
 - (D) Child care staff job description, including roles and responsibilities;
 - (E) Child care staff self-awareness and appropriate boundaries for physical and verbal interactions with children who have a history of abuse, neglect or other trauma;
 - (F) Role of other facility personnel in service delivery, including case staffing and the designated staff member(s) applying the reasonable and prudent parent standard as set forth in Health and Safety Code Section 1522.44;

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Health and Safety Code Section 1522.44 provides:

- (a) It is the policy of the state that caregivers of children in foster care possess knowledge and skills relating to the reasonable and prudent parent standard, as defined in subdivision (c) of Section 362.05 of the Welfare and Institutions Code.
- (b) Except for licensed foster family homes, certified family homes, and resource families approved by a foster family agency, each licensed community care facility that provides

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care and supervision to children and operates with staff shall designate at least one onsite staff member to apply the reasonable and prudent parent standard to decisions involving the participation of a child who is placed in the facility in age or developmentally appropriate activities in accordance with the requirements of Section 362.05 of the Welfare and Institutions Code, Section 671(a)(10) of Title 42 of the United States Code, and the regulations adopted by the department pursuant to this chapter.

- (c) A licensed and certified foster parent, resource family, or facility staff member, as described in subdivision (b), shall receive training related to the reasonable and prudent parent standard that is consistent with Section 671(a)(24) of Title 42 of the United States Code. This training shall include knowledge and skills relating to the reasonable and prudent parent standard for the participation of the child in age or developmentally appropriate activities, including knowledge and skills relating to the developmental stages of the cognitive, emotional, physical, and behavioral capacities of a child, and knowledge and skills relating to applying the standard to decisions such as whether to allow the child to engage in extracurricular, enrichment, cultural, and social activities, including sports, field trips, and overnight activities lasting one or more days, and to decisions involving the signing of permission slips and arranging of transportation for the child to and from extracurricular, enrichment, and social activities.
- (d) This section does not apply to a youth homelessness prevention center, a private alternative boarding school, or a private alternative outdoor program, as those terms are defined, respectively, in subdivision (a) of Section 1502.

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- (G) Discipline policies and procedures, positive discipline and the importance of self-esteem;
- (H) Disaster response;
- (I) Medical emergency response;
- (J) Teamwork and interpersonal communication among facility personnel and clients and client family members;
- (K) Teamwork and intra-facility communication;
- (L) The role of placement workers;
- (M) Medication procedures, assistance with medication, universal precautions, recognition of early signs of illness and the need for professional assistance, infection control procedures for epidemic or pandemic outbreaks of illness, and other health related issues including oversight and monitoring of psychotropic medications for children in foster care and related topics specified in Section 16501.4(d) of the Welfare and Institutions Code;
- (N) Children's adjustment to group care;
- (O) Housekeeping and sanitation principles; principles of nutrition, food preparation and

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- storage and menu planning;
- (P) California Code of Regulations, Title 22 and these operating standards;
 - (Q) Availability of community services and resources;
 - (R) Recreation activities and resources;
 - (S) The children's personal rights as specified in Welfare and Institutions Code section 16001.9 and Section 86672, including the child's right to have fair and equal access to all available services, placement, care, treatment, and benefits, and to not be subjected to discrimination or harassment on the basis of actual or perceived race, ethnic group identification, ancestry, national origin, color, religion, sex, sexual orientation, gender identity, mental or physical disability, or HIV status.
 - (T) Instruction on cultural competency and sensitivity relating to, and best practices for, providing adequate care to lesbian, gay, bisexual and transgender youth in out-of-home care.
 - (U) The facility's policies and procedures concerning when and how to involve law enforcement in response to an incident involving a child residing in the facility.
 - (V) The effects of trauma, including grief and loss, and child abuse and neglect on child development and behavior and methods to behaviorally support children impacted by that trauma or child abuse and neglect;
 - (W) Awareness and identification of commercial sexual exploitation and best practices for providing care and supervision to commercially sexually exploited children; and
 - (X) Physical and psychosocial needs of children, including behavior management, de-escalation techniques, and trauma informed crisis management planning, including the use of emergency interventions.
- (4) The training requirement shall be satisfied by successful completion of course work conducted in a workshop, seminar, classroom setting, individual or small group setting.
- (A) Proof of successful completion of course work shall be limited to official grade slips or transcripts from colleges or adult education departments; or certificates or signed documentation issued by bona fide educational institutions or organizations, or licensee associations, or courses offered or approved by accredited educational institutions, or other individuals who are qualified and who possess the necessary skills, knowledge and experience to train others in a particular subject area.
 - 1. The above referenced individuals who are qualified shall possess: a) a master's degree in a behavioral science from an accredited college or university and one year experience as an administrator, social worker, child care staff, or independent contractor providing direct social work activities in a group home; or, b) a master's degree and one year of work experience with the client population or a bachelor's degree and two years of work experience with the client population; or, c) a licensed mental health professional, as defined in California Code of Regulations

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Title 9, Chapter 12, Section 1901(p) or, d) a certificate or credential from an accredited course of study or educational institution in the subject matter for which the individual will be providing training; e) or, an individual who has provided training to group home child care staff for three years and has at least three years work experience in the subject matter of the training.

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California Code of Regulations, Title 9, Chapter 12, Section 1901(p) provides:

“(p) Licensed mental health professional” means any of the following:

- (1) A psychiatrist;
- (2) A clinical psychologist;
- (3) A licensed marriage, family and child counselor;
- (4) A licensed clinical social worker;
- (5) A licensed registered nurse with a masters or doctorate degree in psychiatric nursing.”

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- (5) Documentation of successful completion of training shall be maintained in the personnel record for each child care staff.
 - (6) The 24-hour initial training is in addition to first aid and CPR training, and other training as required in Sections 86665.1 and 86765.
- (w) Annual Training.
- (1) Notwithstanding Sections 86665(f)(1) through (6), all child care staff shall complete a minimum of 20 hours of annual training, except as specified in (2) below.
 - (A) At least 5 hours of the annual training shall consist of course work from an entity other than the transitional shelter care facility such as an accredited educational institution, workshops, seminars, or other direct training provided by an individual who is qualified and meets the requirements specified in Section 86665(v)(4)(A)1, who is not affiliated with the transitional shelter care facility licensee.
 - (2) Notwithstanding Sections 86665(f)(1) through (6), newly hired child care staff, hired on or after July 1, 1999, shall complete a minimum of 16 hours of annual training within the first 12 months of employment, for a total of 40 hours of initial and annual training. After the first 12 months of employment, child care staff shall comply with (1) above.
 - (A) At least 4 hours of the annual training shall consist of course work from an entity other than the transitional shelter care facility such as an accredited educational institution, workshops, seminars, or other direct training provided by an individual who is qualified and meets the requirements specified in Section 86665(v)(4)(A)1, who is not affiliated

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with the transitional shelter care facility licensee.

- (3) Training may include but is not limited to, the following topics:
 - (A) Neglect/abuse issues;
 - (B) Attachment issues;
 - (C) Behavior problems/psychological disorders;
 - (D) Mental health/behavioral interventions;
 - (E) Developmental disabilities;
 - (F) Substance abuse issues;
 - (G) Cultural diversity;
 - (H) Child and adolescent development;
 - (I) Child empowerment;
 - (J) Discharge and emancipation;
 - (K) Importance of sibling and family relationships;
 - (L) Placement agencies and the placement process;
 - (M) Treatment planning and review;
 - (N) Employee training handbook; and
 - (O) Topics listed in Sections 86665(v)(3)(A) through (X).
- (4) Training topics shall be appropriate for the client population and services provided by the facility.
 - (A) A portion of this training shall address oversight and monitoring of psychotropic medications for dependents and wards in foster care and related topics specified in Section 16501.4(d) of the Welfare and Institutions Code.
- (5) The training requirement may be satisfied by successful completion of course work conducted in a workshop, seminar, or classroom setting, individual or small group setting.
 - (A) Proof of successful completion of course work shall be limited to official grade slips or transcripts; or, certificates or signed documentation issued by colleges, or adult education departments, bona fide educational institutions or organizations, or licensee associations, or courses offered or approved by accredited educational institutions, or other individuals who are qualified and possess the necessary skills, knowledge and experience to train others in a particular subject area.

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1. The above referenced individuals who are qualified shall meet the requirements specified in Section 86665(v)(4)(A)1.
- (6) Documentation of successful completion of training shall be maintained in the personnel record for each child care staff.
 - (7) Annual training is in addition to first aid and CPR training, and other training as required in Sections 86665.1 and 86765.
- (x) The licensee shall develop, maintain and implement a written plan for the training of facility managers.
- (1) The facility manager training plan shall be incorporated in the transitional shelter care facility program statement.
 - (2) The training plan shall include the following for each training session:
 - (A) Course title and subject matter;
 - (B) Learning objectives and activities;
 - (C) Number of hours per training session;
 - (D) Qualifications of the trainer; and
 - (E) Training evaluation.
 1. Each session shall include an evaluation of the trainer and course content to determine if the training is meeting the needs of facility personnel acting as facility managers.
 - (3) The training plan shall be appropriate for the client population and shall consider the training needs and skill level of staff.
 - (A) The licensee shall amend the training plan, as necessary, to meet the needs of facility personnel acting as facility managers and the client population.
 - (4) Amendments to the staff training plan, shall be submitted to the Department within ten days.
 - (5) Training shall include, but not be limited to, the following. The licensee may determine how much time is spent on each topic:
 - (A) Interaction with the Department, including inspection authority;
 - (B) Licensee appeal rights; and
 - (C) Interaction with placement agencies, neighbors, mental health agencies, law enforcement, medical/emergency personnel, client family members.

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- (D) Laws and operating standards governing transitional shelter care facilities.
- (E) Disaster response.
- (6) The training requirement may be satisfied by successful completion of course work conducted in a workshop, seminar, or classroom setting, individual or small group setting.
 - (A) Proof of successful completion of course work shall be limited to official grade slips or transcripts; or, certificates or signed documentation issued by colleges, or adult education departments, bona fide educational institutions or organizations, or licensee associations, or courses offered or approved by accredited educational institutions, or other individuals who are qualified and possess the necessary skills, knowledge and experience to train others in a particular subject area.
 - 1. The above referenced individuals who are qualified shall meet the requirements specified in Section 86665(v)(4)(A)1.
- (7) Documentation of successful completion of training shall be maintained in the personnel record for each staff member.
- (8) Facility manager training is in addition to first aid and CPR training, and other training as required in Sections 86665.1 and 86765.
- (y) All employees shall be given a copy of the job description specified in Section 86666(g)(1) which is relevant to their duties, and shall have access to all other job descriptions.
- (z) The staff assignment information specified in Section 86666(g)(2) shall be provided to all applicants during interviews for employment; to all staff during orientation or when changes are made which affect job assignments; and upon request to placement agencies.
- (aa) Upon employment, the transitional shelter care facility shall make available for review by all transitional shelter care facility personnel, an employee training handbook that shall include the following: facility's program philosophy; facility's policies and procedures; disaster response procedures; law enforcement contact procedures; lines of authority and communication; Title 22 regulations and these operating standards; and reporting requirements.
 - (1) The employee training handbook shall be maintained at the facility and updated as needed.
- (bb) Upon employment, staff shall receive copies of the child removal and/or discharge policies and procedures specified in Section 86668.4(a); the discipline policies and procedures specified in Section 86672.1(a); and the complaint procedures specified in Section 86672.2(a).
- (cc) Physician reports from general practitioners or specialists may be required after licensure if the licensing agency has reason to believe that a licensee's or staff member's physical and/or mental health is not adequate to carry out responsibilities under these regulations and operating standards.
 - (1) The licensing agency shall provide the licensee with a written explanation of the need for any additional report.

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- (dd) In addition to all other training required in Sections 86622, 86665, 86675, 86677.3, 86665.1, 86665.2, 86665.5, 86665.6, and, when applicable, Section 86765, all administrators, facility managers, social work staff and child care staff must receive four (4) hours of training on the specialized needs of children in transition on an annual basis.
- (ee) All administrators, facility managers, social work staff and child care staff hired after the effective date of these operating standards must receive four (4) hours of training on the specialized needs of children in transition before being responsible for supervising children, being left unsupervised with children or being counted in the staff-to-child ratio.

86665.1 ADDITIONAL PERSONNEL REQUIREMENTS FOR SERVING CHILDREN WITH SPECIAL HEALTH CARE NEEDS

- (a) Any person who provides specialized in-home health care to a child placed in the transitional shelter care facility shall comply with the following requirements:
 - (1) Prior to caring for the child or when the child's needs change, the in-home health care provider shall complete training in specialized in-home health care provided by a health care professional as required by the child's individualized health care plan, except when
 - (A) The in-home health care provider is a licensed health care professional; and
 - (B) The child's individualized health care plan team determines that completion of specialized in-home health care training for the child is unnecessary on the basis of the in-home health care provider's medical qualifications and expertise.
- (b) No person shall provide specialized in-home health care to a child placed in the facility unless
 - (1) They are a licensed health care professional; and
 - (2) The child's individualized health care plan team determines that they have the necessary medical qualifications and expertise to meet the child's in-home health care needs.
 - (A) The child's individualized health care plan team shall make a new determination each time the child's in-home health care needs change.
- (c) Volunteers caring for children in a specialized transitional shelter care facility ~~group home~~ shall meet the health screening requirements in Sections 86665(g)(1) and (g)(2).

86665.2 PERSONNEL DUTIES

- (a) The facility manager(s) shall:
 - (1) Meet the requirements of Health and Safety Code Section 1522.4(a)(1) through (3).

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Health and Safety Code Sections 1522.4(a)(1) through (a)(3) states:

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- “(1) The facility shall have one or more facility managers. “Facility manager,” as used in this section, means a person on the premises with the authority and responsibility necessary to manage and control the day-to-day operation of a community care facility and supervise the clients. The facility manager, licensee, and administrator, or any combination thereof, may be the same person provided he or she meets all applicable requirements. If the administrator is also the facility manager for the same facility, this person shall be limited to the administration and management of only one facility.
- (2) The facility manager shall have at least one year of experience working with the client group served, or equivalent education or experience, as determined by the department.
- (3) A facility manager shall be at the facility at all times when one or more clients are present. To ensure adequate supervision of clients when clients are at the facility outside of their normal schedule, a current telephone number where the facility manager can be reached shall be provided to the clients, licensing agency, school, and any other agency or person as the department determines is necessary. The facility manager shall instruct these agencies and individuals to notify him or her when clients will be returning to the facility outside of the normal hours.”

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- (b) Child care staff shall perform the following duties:
 - (1) Supervision, protection and care of children individually and in groups at all times.
 - (2) Assistance to each child in working with a group and in handling individual problems.
 - (3) Administration of discipline and setting of limits for behavior.
 - (4) Notation of the child's progress; identification of the possible need for professional services; and communication of such findings to professional staff.
 - (5) Until they complete the 8 hours of training as required in Section 86665(v)(1), new child care staff shall perform the duties as defined in subdivisions (1) through (4) above while under visual supervision.
- (c) Social work staff shall complete or assist in the completion of the following for each child:
 - (1) An intake assessment, as specified in Section 86668.1, in consideration of the child's medical and mental health screenings.
 - (2) A transition plan.
 - (3) Obtaining, developing and recording of the information necessary for the completion of (1) and (2) above.
- (d) The licensee shall ensure performance of the following duties:
 - (1) Office work.

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- (2) Cooking.
- (3) Housecleaning.
- (4) Laundering.
- (5) Maintenance of facility buildings, grounds, fixtures, furniture, equipment and supplies.
- (e) Support staff duties shall not be assigned to child care staff unless such assignments are directly related to the care of the children, and do not interfere with the performance of their child care duties.
- (f) Household duties directed towards development of self-help skills may be performed by the children in placement. Participation in these duties shall be voluntary.
- (g) No household duties shall go undone because a child refuses to participate.

86665.5 STAFF/CHILD RATIOS

- (a) For children ages 0-6 there shall be one on-duty child care staff person to each three children, or fraction thereof, present.
- (b) For children ages 7-18 there shall be one on-duty child care staff person to each six children, or fraction thereof, present.
 - (1) In minor parent programs, children shall include all children present in the facility, including minor parents and their child(ren). When the minor parent is not providing direct care and supervision to their child(ren), the facility shall provide that care and supervision.
 - (2) At any time the facility provides direct care and supervision of the minor parents' children, there shall be one staff for every four children of minor parents, or fraction thereof.
- (c) If the children require special care and supervision because of age, behavior or other factors, the number of on-duty child care staff shall be increased.

86665.6 ADDITIONAL STAFF/CHILD RATIOS FOR SERVING CHILDREN WITH SPECIAL HEALTH CARE NEEDS

- (a) The licensee shall ensure that staff providing specialized in-home health care are responsible for the provision of care and supervision to no more than three children, with or without special health care needs.

86666 PERSONNEL RECORDS

- (a) The licensee shall ensure that personnel records are maintained on the licensee, administrator and each employee. Each personnel record shall contain the following information:

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- (1) Employee's full name.
 - (2) Driver's license number if the employee is to transport clients.
 - (3) Date of employment.
 - (4) A statement signed by the employee that they are at least 21 years of age.
 - (5) Home address and phone number.
 - (6) Documentation of the educational background, training and/or experience specified in licensing regulations for the type of facility in which the employee works.
 - (7) Past experience, including types of employment and former employers.
 - (8) Duties of the employee.
 - (9) Termination date if no longer employed by the facility.
 - (10) A health screening as specified in Section 86665(g).
 - (11) Tuberculosis test documents as specified in Section 86665(g).
 - (12) For employees that are required to be fingerprinted pursuant to Section 86619:
 - (A) Documentation of either a criminal record clearance or exemption as required by Section 86619(e).
 1. For certified administrators, a copy of their current and valid group home or short-term residential therapeutic program administrator certification meets this requirement.
- (b) Personnel records shall be maintained for all volunteers and shall contain the following:
- (1) A health statement as specified in Section 86665(g)(3).
 - (2) Tuberculosis test documents as specified in Section 86665(g).
 - (3) For volunteers that are required to be fingerprinted pursuant to Section 86619:
 - (A) Documentation of either a criminal record clearance or exemption as required by Section 86619(e).
- (c) All personnel records shall be available to the licensing agency to inspect, audit, and copy upon demand during normal business hours. Records may be removed if necessary for copying. Removal of records shall be subject to the following requirements:
- (1) Licensing representatives shall not remove any current emergency and health-related information for current personnel unless the same information is otherwise readily available in

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another document or format.

- (2) Prior to removing any records, a licensing representative shall prepare a list of the records to be removed, sign and date the list upon removal of the records, and leave a copy of the list with the administrator or designee.
- (3) Licensing representatives shall return the records undamaged and in good order within three business days following the date the records were removed.
- (d) All personnel records shall be retained for at least three years following termination of employment.
- (e) All personnel records shall be maintained at the facility site.
 - (1) The licensee shall be permitted to retain such records in a central administrative location provided that they are readily available to the licensing agency at the facility site as specified in Section 86666(c).
- (f) In all cases, personnel records shall document the hours actually worked.
- (g) The licensee shall maintain the following personnel records:
 - (1) Complete job descriptions on all positions within the facility.
 - (2) A description of all staff assignments, including information regarding lines of authority and staff responsibilities.
 - (3) A dated employee time schedule developed at least monthly; displayed conveniently for employee reference; and containing the following information for each employee:
 - (A) Name.
 - (B) Job title.
 - (C) Hours of work.
 - (D) Days off.
 - (4) Documentation of the completion by each child care staff person and facility manager of the training specified in Sections 86665(u) through (x) inclusive.
 - (5) Documentation that the administrator has met the group home or short-term residential therapeutic program administrator certification requirements specified in Section 86664.2.
 - (6) A record of each work performance evaluation and any correspondence with the employee.

86667 REASONABLE AND PRUDENT PARENT STANDARD

- (a) The licensee shall recognize that the best interests of children in transition are served by maintaining and promoting retention of the child's social connections and activities.

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- (b) When applying the "Reasonable and Prudent Parent Standard," the administrator or facility manager, or their responsible designee, shall consider:
 - (1) The child's age, maturity, and developmental level to ensure the overall health and safety of the child is maintained.
 - (2) The potential risk factors and the appropriateness of the extracurricular, enrichment, and social activity.
 - (3) The best interest of the child based on information known by the administrator or facility manager, or their designee.
- (c) Application of the "Reasonable and Prudent Parent Standard" shall not result in the denial of the rights of a child as specified in Welfare and Institutions Code section 16001.9, or contradict court orders.

86668 ADMISSION AGREEMENTS

- (a) The licensee shall complete an individual written admission agreement with each client and the client's authorized representative, if any.
 - (1) The licensee shall maintain a copy of the certification in the client's file.
- (b) The licensee shall complete and maintain in the client's file a Telecommunications Device Notification form (LIC 9158, 5/97) for each client whose pre-admission appraisal or medical assessment indicates they are deaf, hearing-impaired, or otherwise disabled.
- (c) Admission agreements must specify the following:
 - (1) Basic services.
 - (2) Available optional services.
 - (3) Right of the licensing agency to perform the duties authorized in Section 86644(b) and (c).
 - (4) Conditions under which the agreement may be terminated.
 - (5) The facility's policy concerning family visits and other communication with clients, pursuant to Health and Safety Code Section 1512.

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Health and Safety Code Section 1512 provides:

“The community care facility’s policy concerning family visits and communication shall be designed to encourage regular family involvement with the resident client and shall provide ample opportunities for family participation in activities at the facility.”

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- (d) Such agreements shall be dated and signed, acknowledging the contents of the document, by the client and the client's authorized representative and the licensee or the licensee's designated representative, no later than 24 hours following admission.
- (e) Modifications to the original agreement shall be made whenever circumstances covered in the agreement change, and shall be dated and signed by the persons specified in (c) above.
- (f) The licensee shall retain in the client's file the original of the initial admission agreement and all subsequent modifications.
 - (1) The licensee shall provide a copy of the current admission agreement to the client and the client's authorized representative, if any.
- (g) The licensee shall comply with all terms and conditions set forth in the admission agreement.
- (h) The admission agreement shall be automatically terminated by the death of the client. No liability or debt shall accrue after the date of death.

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This does not preclude contractual arrangements such as life care contracts or payments ordered by a court of competent jurisdiction.

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86668.1 INTAKE PROCEDURES

- (a) The licensee shall develop, maintain, and implement intake procedures which meet the requirements specified in this section.
 - (1) Placement of the child in the facility shall not result in the facility exceeding its licensed capacity.
 - (2) If it is determined, following placement of the child in the facility, that the facility cannot continue to provide necessary services or meet the needs of the child, applicable discharge/transfer procedures specified in Sections 86668.4 and 86670(i) shall be followed.
 - (3) The licensee shall provide or coordinate the provision of medical and mental health screenings which shall occur no later than the 24 hours after admission and that ongoing supportive services identified during the pre-admission screenings shall be provided as needed by the child during their placement in the facility. The medical and mental health screening shall be performed by a licensed physician or designee, who is also a licensed professional.
 - (4) An admission agreement shall be completed and signed as specified in Section 86668.
- (b) In addition to all information required to be obtained and reviewed in Sections 86668, the licensee

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shall obtain from the child's authorized representative the list of the child's prior community care facility placements and/or residences and the reasons why the child was removed from each of these living arrangements.

- (c) The licensee shall also assess whether the child may represent a threat to self or to any other child in care, or whether the child may be at risk of harm from another child in care.

86668.2 CHILD'S NEEDS AND SERVICES

- (a) A needs and services plan is not required for children who are placed in the facility.
- (b) The licensee shall consider the child's medical and mental health screening, observe and evaluate the child's behaviors, social interactions, and other important characteristics for the purpose of informing the child's caseworker about the child to facilitate appropriate and timely placement of the child in an approved or licensed home or facility.
- (c) If the licensee determines that it cannot meet the needs of a child, the licensee shall inform the child's caseworker and request that the child be relocated to a facility that can provide the needed services.

86668.4 REMOVAL AND/OR DISCHARGE PROCEDURES

- (a) The licensee shall develop, maintain and implement written policies and procedures governing a child's removal and/or planned discharge from the facility which meet the requirements specified in this section.
 - (1) The policies and procedures shall be trauma informed in accordance with Section 86678.2 and shall be designed to maximize the physical and psychological safety for the child and reduce the risk of re-traumatization.
- (b) Upon identification of an appropriate placement that meets the individual needs of a child, the licensee shall ensure that the child is transferred to the placement in a timely manner.
- (c) The licensee shall not remove or discharge a child without the permission of the county placing agency or probation agency, except when the child:
 - (1) Is placed in an approved or licensed home or facility;
 - (2) Endangers the health and safety of the child or others in the facility by the continued presence of the child in the facility;
 - (3) Commits an unlawful act and must be detained in a juvenile institution;
 - (4) Requires physical health care in an acute care hospital; or
 - (5) Requires mental health services in an acute psychiatric hospital or community treatment facility.
- (d) The licensee shall ensure that the child's caseworker is actively developing placement options for the

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child placed in the facility.

- (e) If it is determined that the facility cannot meet the needs of the child, the licensee shall immediately notify the placing agency and support relocation of the child to a placement that can provide appropriate care.
- (f) For each licensed facility, the licensee shall maintain a written child intake and exit log for each child which contains the following information:
 - (1) The date and time the child is admitted into placement;
 - (2) The date and time the child exits from placement; and
 - (3) The location and type of placement made for the child after the child's exit from the facility, if known by the licensee.

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For a transitional shelter care facility serving children under six years of age, the facility shall endeavor to do the following.

Whenever possible, with the assistance of the placing agency, the facility should transition the child into the new placement as follows:

- (1) Introduce the child to the family or staff associated with the new placement before discharge from the transitional shelter care facility.
- (2) Allow a transitional shelter care facility staff, trusted by the child, to accompany the child on a visit to the next placement.

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86669 CLIENT MEDICAL ASSESSMENTS

- (a) No later than 24 hours after acceptance of a client, the licensee shall obtain a written medical and mental health screening of the child as provided in section 86668.1, which enables the licensee to determine their ability to provide necessary health-related services to the client.
 - (1) The medical and mental health screening shall be performed by a licensed physician or designee, who is also a licensed professional.
- (b) The licensee shall obtain and keep in the client's file documentation of the client's medical and mental health screening.
- (c) The medical and mental health screening shall include the following:
 - (1) Identification of the client's exigent medical or mental health problems and needs.
 - (2) Identification of any prescribed medications being taken by the client, if available.

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- (3) Identification of physical restrictions, including any medically necessary diet restrictions, to determine the client's capacity to participate in the licensee's program, if available.
- (d) In addition to Section 86669(c), the medical and mental health screening for clients shall include the following:
 - (1) Identification of other medical conditions, including, but not limited to, whether the client is a “child with special health care needs”, as defined in Section 86601(c)(11).
 - (2) Documentation of prior medical services and history if available.
 - (3) Current medical status including, but not limited to, height, weight, and blood pressure.
 - (4) Identification of the client's needs as a result of any medical information contained in the report.
- (e) The licensing agency shall have the authority to require the licensee to obtain a current written medical assessment, if such an assessment is necessary to verify the appropriateness of a client's placement.

86670 CLIENT RECORDS

- (a) The licensee shall ensure that a separate, complete, and current record is maintained in the facility for each client.
- (b) Each record must contain information including, but not limited to, the following:
 - (1) Name of client.
 - (2) Birthdate.
 - (3) Sex at birth.
 - (4) Gender identity.
 - (5) Date of admission.
 - (6) Names, addresses, and telephone numbers of the authorized representative.
 - (7) Name, address and telephone number of physician and dentist, and other medical and mental health providers, if known.
 - (8) Medical and mental health screening, including ambulatory status, as specified in Sections 86668.1 and 86669.
 - (9) Record of any illness or injury requiring treatment by a physician or dentist and for which the facility provided assistance to the client in meeting their necessary medical and dental needs.
 - (10) Record of current medications, including the name of the prescribing physician, and

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instructions, if any, regarding control and custody of medications, if known.

- (11) The licensee shall maintain a written log indicating the date and time of a child's admission to the facility and the date and time the child is transferred from the facility.
 - (12) An account of the client's cash resources, personal property, and valuables entrusted as specified in Section 86626.
 - (13) A signed copy of the admission agreement specified in Section 86668.
- (c) All information and records obtained from or regarding clients shall be confidential.
- (1) The licensee shall be responsible for safeguarding the confidentiality of record contents.
 - (2) Except as specified in (d) below, or as otherwise authorized by law, the licensee and all employees shall not reveal or make available confidential information.
- (d) All client records shall be available to the licensing agency to inspect, audit, and copy upon demand during normal business hours. Records may be removed if necessary for copying. Removal of records shall be subject to the following requirements:
- (1) Licensing representatives shall not remove the following current records for current clients unless the same information is otherwise readily available in another document or format:
 - (A) Name, address, and telephone number of the child's caseworker.
 - (B) Name, address, and telephone number of a client's physician and dentist, and any other medical and mental health providers, if known.
 - (C) Medical and mental health screenings, including ambulatory status, as specified in Section 86670(b)(8).
 - (D) Record of any current illness or injury as specified in Section 86670(b)(9).
 - (E) Record of current medications as specified in Section 86670(b)(10).
 - (F) Any other records containing current emergency or health-related information for current clients.
 - (2) Prior to removing any records, a licensing representative shall prepare a list of the records to be removed, sign and date the list upon removal of the records, and leave a copy of the list with the administrator or designee.
 - (3) Licensing representatives shall return the records undamaged and in good order within three business days following the date the records were removed.
- (e) A client's records shall be open to inspection by the client's authorized representative(s), if any.
- (f) The information specified in (b)(1)-(b)(12) above must be updated as necessary to ensure the accuracy of the client's record.

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- (g) Original client records or photographic reproductions shall be retained for at least three years following termination of service to the client.
- (h) The following information regarding the child shall be obtained and maintained in the child's record:
 - (1) The name, address, and telephone number of all adults with whom the child was living immediately prior to the current placement, if known.
 - (2) The name, address, and telephone number of the child's parent(s), if known.
 - (3) The name, address, and telephone number of the placement worker and placement agency.
 - (4) Educational records, if available, describing the child's present academic level, including their grade or performance level, and any previous school-related problems.
 - (5) Dental and medical history, if available, including immunization records; and physician's orders for any medically necessary diet as specified in section 86676(a)(5), if available.
 - (6) The child's court status, if applicable, including a copy of any custody orders and agreements with parent(s) or person(s) having legal custody, if available.
 - (7) The placement agency's list of persons who should not be allowed to visit, if available.
 - (8) Medical, psychiatric and psychological reports that identify special needs of a child diagnosed as mentally disordered or developmentally disabled, if available.
 - (9) Medical and dental insurance coverage information, or information regarding the agency or person responsible for medical and dental costs, if known.
 - (10) Consent forms, completed by the child's authorized representative(s) or pursuant to an order by the Juvenile Court, to permit the facility to authorize medical care.
 - (11) A copy of the child's individualized health care plan, if any.
 - (12) A copy of the current court order, or written authorization of the child's parent or guardian, for each psychotropic medication, as defined in Section 86601(p)(9).
 - (A) Written authorization of the child's parent or guardian may only be documented in lieu of a court order if the child is not a dependent or ward of the court, or it is documented in the child's record that the county placing agency has verified a court order is not required.
 - (B) This section shall not apply when the child's record contains documentation from the child's prescribing physician that the psychotropic medication has been provided in an emergency situation, as described in California Rules of Court, rule 5.640.
 - (13) A separate log for each psychotropic medication prescribed to the child documenting all the following:

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- (A) The name of the medication.
- (B) The date of the prescription.
- (C) The quantity of medication and number of refills initially prescribed.
- (D) When applicable, any additional refills prescribed.
- (E) The prescribed dosage and directions for use as specified in writing by the physician prescribing the medication, including any changes directed by the physician.
- (F) The date and time of each dose taken by the child.
- (G) Documentation of each refusal.
 - 1. Documentation shall include the name of the medication refused, date and time of the refusal, the reason for the refusal, who was notified of the refusal, and any observed results of the refusal.
- (H) Staff initials for each time a psychotropic medication is taken by a child, as an indication that they supervised the child self-administering their psychotropic medication.
 - 1. Initials shall not be pre-filled on the log.
- (i) If it is determined that the child is to be removed or discharged from the facility for reasons other than the placement of the child in an approved or licensed home or facility, the reason for the child's removal or discharge shall be documented in the child's record.
- (j) (1) For each child whose stay in the facility exceeds 3 calendar days, the licensee shall maintain weekly documentation in the child's file containing the following information:
 - (A) Client identification number;
 - (B) Planned date of discharge, if known;
 - (C) The date and time the licensee provided telephonic notice to the child's county caseworker about the child exceeding the 72-hour placement limit, no later than 4 hours after the 72-hour limit was reached, as specified in Section 86661(s)(3);
 - (D) The reasons and circumstances for the child's overstay; and
 - (E) The steps the licensee is taking to assist the child welfare agency to identify placement options for the child and place the child.

86671 REGISTER OF CLIENTS

- (a) In all licensed facilities, the following shall apply:
 - (1) The licensee shall maintain in the facility a register of all clients. The register shall be

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immediately available to, and copied for, licensing staff upon request; and must contain current information on the following:

- (A) Client's name and ambulatory status as specified in Section 86670(b)(1) and (7).
 - (B) Name, address and telephone number of client's attending physician.
 - (C) Authorized representative information as specified in Section 86670(b)(6).
 - (D) If a client is a child with special health care needs as defined in section 86601(c)(11), the register shall include a description of those special health care needs.
 - 1. The licensee may keep a separate client register with this information.
- (2) The licensee shall keep the register in a central location at the facility.
- (A) Registers are confidential, as specified in Section 86670(c).

86672 PERSONAL RIGHTS

- (a) Each facility licensed to provide foster care for six or more children shall post a listing of a foster child's rights. The rights posted in the facility shall be consistent with the list of rights specified in Welfare and Institutions Code section 16001.9(a) and as specified in subsection (c).
 - (1) Pursuant to Health and Safety Code section 1530.91(b), any facility licensed to provide foster care for six or more children must use material developed by the Office of the Foster Care Ombudsperson as the listing of rights consistent with section 16001.9 of the Welfare and Institutions Code.

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Health and Safety Code section 1530.91 provides in pertinent part:

- (a) Except as provided in subdivision (b), a care provider that provides foster care for children pursuant to this chapter shall provide each schoolage child and the child's authorized representative, as defined in regulations adopted by the department, who is placed in foster care, with an age and developmentally appropriate orientation that includes an explanation of the rights of the child, as specified in Section 16001.9 of the Welfare and Institutions Code, and addresses the child's questions and concerns.
- (b) Any facility licensed to provide foster care for six or more children pursuant to this chapter shall post a listing of a foster child's rights specified in Section 16001.9 of the Welfare and Institutions Code, as developed by the Office of the State Foster Care Ombudsperson pursuant to Section 16164 of the Welfare and Institutions Code. The Office of the State Foster Care Ombudsperson shall provide the posters it has designed pursuant to Section 16164 of the Welfare and Institutions Code to each facility subject to this subdivision. The posters shall include the telephone number of the Office of the State Foster Care Ombudsperson.

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- (b) (1) The licensee shall provide each child, and their authorized representative, regardless of whether the child is in foster care, with the information listed in subdivision (b)(2) at the following times:
- (A) Upon placement in a facility;
 - (B) At the request of a child; and
 - (C) Each time a new right has been added to subdivision (c) or Welfare and Institutions Code section 16001.9.
- (2) Pursuant to subdivision (b)(1), the licensee shall provide the following information:
- (A) An age or developmentally appropriate orientation that includes an explanation of the rights of the child, as specified in subdivision (c) below and in Welfare and Institutions Code section 16001.9, and addresses the child's questions and concerns;
 - (B) A written copy of these rights; and
 - (C) Information regarding agencies the child may contact concerning violations of these rights and other complaints, including the address, email address, and telephone number of the California Department of Social Services Community Care Licensing Division and Foster Care Ombudsperson.
 - (D) Provisions of law regarding complaints including, but not limited to, the confidentiality of complaints.
- (c) The licensee shall ensure that each child, regardless of whether the child is in foster care, is accorded the personal rights specified in Welfare and Institutions Code section 16001.9 and below, as applicable:
- (1) To live in a safe, healthy, and comfortable home where they are treated with respect. If the child is an Indian child, to live in a home that upholds the prevailing social and cultural standards of the child's Indian community, including, but not limited to, family, social, and political ties.
 - (2) To receive adequate and healthy food.
 - (3) To receive an age-appropriate allowance.
 - (4) To visit the facility with their relatives and/or authorized representative(s) prior to admission.
 - (5) To file a complaint with the facility, as specified in Section 86672.2.
 - (6) To have the facility inform their caseworker or attorney representing the child in juvenile court of their progress at the facility.
 - (7) To have communications to the facility from their relatives and/or caseworker answered

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- promptly and completely.
- (8) To have visitors visit privately during waking hours without prior notice, provided that such visitations do not infringe upon the rights of other children; do not disrupt planned activities; and are not prohibited by court order.
- (A) The child has the right to private visits and contact with the following:
1. Siblings, family members, and relatives. Visits by the child's siblings, family members, and relatives can only be prohibited by court order.
 2. Authorized Representative.
 3. Other visitors.
- (B) Rules regarding visitation hours, sign-in rules and visiting rooms can be established but shall apply to all visitors.
- (9) To be provided with and allowed to possess and use adequate personal items, consistent with Welfare & Institutions Code section 16001.9(a)(3), which includes their own:
- (A) Clothing items, provided the clothes are age-appropriate.
1. Clothing provided for school shall not violate school standards.
 2. Clothing shall respect the child's culture, ethnicity, and gender identity and expression.
- (B) Toiletries, and grooming and personal hygiene products, including enclosed razors used for shaving, as age and developmentally appropriate.
1. Toiletries, and grooming and personal hygiene products, shall respect the child's culture, ethnicity, and gender identity and expression.
- (C) Personal belongings, including items that were a gift to the child unless prohibited as part of a discipline program.
- (10) To have storage space for private use.
- (11) To be free from unreasonable searches of personal belongings.
- (12) To possess and use their own cash resources except as specified in Section 86626 and to maintain a bank account and manage personal income consistent with the child's age and developmental level, unless prohibited by the case plan.
- (13) To make, send, and receive confidential telephone calls and other electronic communications, unless prohibited by court order.
- (A) Reasonable restrictions to telephone use may be imposed by the licensee. The licensee shall be permitted to:

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1. Restrict the making of long distance calls upon documentation that requested reimbursement for previous long distance calls has not been received;
 2. Restrict phone use in accordance with the facility's discipline program;
 3. Impose restrictions to ensure that phone use does not infringe on the rights of others or restrict the availability of the phone during emergencies.
- (B) All restrictions shall be documented in the facility's discipline policies, and be signed by the child's caseworker.
- (C) Calls permitted to be restricted by subdivisions (A)1. and 2. above shall not include calls to the child's authorized representative, placement agency, family members (except by court order), social workers, attorneys, Court Appointed Special Advocates (CASA), probation officers, representatives designated by the child's Indian tribe to participate in the juvenile court proceeding, Community Care Licensing Division of the California Department of Social Services or the State Foster Care Ombudsperson.
- (14) To send and receive unopened mail unless prohibited by court order and to have access to letter writing material.
- (15) To be provided the names and contact information for social workers, probation officers, attorneys, service providers, foster youth advocates, Court appointed special Advocates (CASAs), and education rights holder if other than the parent or parents, and when applicable, representatives designated by the child's Indian tribe to participate in the juvenile court proceeding.
- (A) The child has the right to communicate with these individuals privately.
- (16) To contact the California Department of Social Services Community Care Licensing Division or the State Foster Care Ombudsperson, immediately upon request, regarding violations of rights, to speak to representatives of these offices confidentially, and to be free from threats or punishment for making complaints.
- (17) To have social contacts with people outside of the foster care system, including, but not limited to teachers, coaches, religious or spiritual community members, mentors, and friends, and if applicable, tribal members and members of the Indian community consistent with the prevailing social and cultural standards of the Indian child's tribe.
- (18) To be accorded dignity in their personal relationships with staff and other persons.
- (19) To be free from physical, sexual, emotional, or other abuse, and from corporal or unusual punishment, exploitation, infliction of pain, humiliation, intimidation, ridicule, coercion, threat, mental abuse, or other actions of a punitive nature including, but not limited to, interference with the daily living function of eating, sleeping, or toileting, or withholding of shelter, clothing, or aids to physical functioning.
- (20) To be free to attend religious services, or activities, and ceremonies of the child's choice, including, but not limited to, engaging in traditional Native American religious practices, and

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to have visits from the spiritual advisor of the child's choice. Attendance at religious services, activities, and ceremonies inside or outside of the facility, shall be on a completely voluntary basis.

- (21) To have caregivers, child welfare and probation personnel, and legal counsel who have received instruction on cultural competency and sensitivity relating to sexual orientation, gender identity and expression, and best practices for providing adequate care to lesbian, gay, bisexual, and transgender children in out-of-home care.
- (22) To participate in extracurricular, cultural, racial, ethnic, personal enrichment, and social activities, including, but not limited to, access to computer technology and the internet, consistent with the child's age, maturity, developmental level, sexual orientation, and gender identity and expression.
- (23) To not be locked in any portion of their foster care placement at any time, unless the child is placed in a community treatment facility.
 - (A) The licensee shall not be prohibited by this provision from locking exterior doors and windows or from establishing house rules for the protection of children provided the children are able to exit the facility.
 - (B) The licensee shall be permitted to utilize means other than those specified in (A) above for securing exterior doors and windows only provided the children are able to exit the facility and with the prior approval of the licensing agency.
- (24) Not to be placed in any restraining device. Postural supports may be used if they are approved in advance by the licensing agency as specified in (A) through (F) below.
 - (A) Postural supports shall be limited to appliances or devices including braces, spring release trays, or soft ties used to achieve proper body position and balance, to improve a client's mobility and independent functioning, or to position rather than restrict movement including, but not limited to, preventing a client from falling out of bed, a chair, etc.
 - 1. Physician-prescribed orthopedic devices such as braces or casts used for support of a weakened body part or correction of body parts are considered postural supports.
 - (B) All requests to use postural supports shall be in writing and include a written order of a physician indicating the need for such supports. The licensing agency shall be authorized to require other additional documentation in order to evaluate the request.
 - (C) Approved postural supports shall be fastened or tied in a manner which permits quick release by the child.
 - (D) The licensing agency shall approve the use of postural supports only after the appropriate fire clearance, as required by Section 86620(a) or (b), has been secured.
 - (E) The licensing agency shall have the authority to grant conditional and/or limited approvals to use postural supports.

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- (F) Under no circumstances shall postural supports include tying of, or depriving or limiting the use of, a child's hands or feet.
 - 1. A bed rail that extends from the head half the length of the bed and used only for assistance with mobility shall be allowed with prior licensing approval. Bed rails that extend the entire length of the bed are prohibited.
 - (G) Protective devices including, but not limited to, helmets, elbow guards, and mittens which do not prohibit a client's mobility but rather protect the client from self-injurious behavior are not to be considered restraining devices for the purpose of this regulation. Protective devices may be used if they are approved in advance by the licensing agency as specified below.
 - 1. All requests to use protective devices shall be in writing and include a written order of a physician indicating the need for such devices. The licensing agency shall be authorized to require additional documentation including, but not limited to, the Individual Program Plan (IPP) as specified in Welfare and Institutions Code Section 4646, and the written consent of the authorized representative, in order to evaluate the request.
 - 2. The licensing agency shall have the authority to grant conditional and/or limited approvals to use protective devices.
 - (H) Under no circumstances shall postural supports or protective devices be used for disciplinary purposes.
- (25) To access and receive health-related services, as defined in Section 86601(h)(3), with reasonable promptness that meets the needs of the child.
- (26) To participate in decisions regarding health-related services and treatment, including but not limited to, the following:
- (A) Choosing, whenever feasible and in accordance with applicable law, their own health care provider, if they are 12 years or older and payment for the service is authorized under applicable federal Medicaid law or other approved insurance.
 - (B) Communicating with their health care provider regarding any treatment concerns or needs.
 - (C) Requesting a second opinion before being required to undergo invasive medical, dental, or psychiatric treatment.
- (27) To personally consent to or decline medical services related to the following, without the consent or knowledge of any adult, including but not limited to, a parent, guardian, licensee, social worker, probation officer, judge or authorized representative:
- (A) The prevention, diagnosis or treatment of pregnancy, including but not limited to: female or male birth control or protection, pregnancy testing, and prenatal care, at any age.

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- (B) Abortion, at any age.
 - (C) Sexual assault or rape, at any age.
 - (D) The prevention, diagnosis testing, and treatment of sexually transmitted diseases, at 12 years of age or older.
 - (E) Mental health services, at 12 years of age or older.
- (28) To have fair and equal access to all available services, placement, care, treatment, and benefits, and to not be subjected to discrimination or harassment on the basis of actual or perceived race, ethnic group identification, ancestry, national origin, color, religion, sex, sexual orientation, gender identity and expression, mental or physical disability, or HIV status.
- (A) This includes the right of an Indian child to be free from discrimination based on the child's political affiliation with an Indian tribe or Alaskan village.
- (29) To obtain, possess and use contraception as well as medications for the prevention or treatment of pregnancy, including but not limited to: prenatal vitamins, birth control medication, emergency contraception, long acting reversible contraceptives, condoms, and barrier methods.
- (30) To obtain, possess, and use contraception as well as medications for the prevention or treatment of sexually transmitted diseases at 12 years of age or older.
- (31) To have access to age-appropriate, medically accurate information about reproductive health care, the prevention of unplanned pregnancy, and the prevention and treatment of sexually transmitted infections.
- (32) Except in an emergency, to be free of the administration of medication or chemical substances, and to be free of all psychotropic medications unless prescribed by a physician, and in the case of children, authorized by a judge, without consequences or retaliation.
- (33) To have a placement that utilizes trauma-informed and evidence-based de-escalation and intervention techniques.
- (A) Law enforcement intervention shall only be requested when there is an imminent threat to the life or safety of the child or another person or as a last resort after other diversion and de-escalation techniques have been utilized and only upon approval of a staff supervisor.
 - (B) Law enforcement intervention shall not be used as a threat or in retaliation against the child.
- (34) To attend Independent Living Program classes and activities, if the child meets the age requirements, and to not be prevented from attending as a consequence or punishment.
- (35) To work and develop job skills at an age-appropriate level, consistent with state law.
- (36) To attend school.

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- (37) To maintain privacy regarding sexual orientation and gender identity and expression, unless the youth permits the information to be disclosed, or disclosure is required to protect their health and safety, or disclosure is compelled by law or a court order.
- (38) To confidentiality of medical and mental health records, including, but not limited to, HIV status, substance use disorder history and treatment, and sexual and reproductive health care, consistent with existing law.
- (39) To be referred to by the child's preferred name and gender pronouns.
- (d) A licensee shall not subject a child to harassment, punishment, or retribution for exercising the personal rights specified in subdivision (c) and Welfare and Institutions Code section 16001.9.
- (e) Nothing in this section shall be interpreted to require a licensee or facility staff to take any action that would impair the health and safety of children in out-of-home placement consistent with Welfare & Institutions Code section 16001.9(c).

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Welfare and Institution Code Section 16001.9 provides:

- “(a) All children placed in foster care, either voluntarily or after being adjudged a ward or dependent of the juvenile court pursuant to Section 300, 601, or 602, shall have the rights specified in this section. These rights also apply to nonminor dependents in foster care, except when they conflict with nonminor dependents' retention of all their legal decision making authority as an adult. The rights are as follows:
 - (1) To live in a safe, healthy, and comfortable home where they are treated with respect. If the child is an Indian child, to live in a home that upholds the prevailing social and cultural standards of the child's Indian community, including, but not limited to, family, social, and political ties.
 - (2) To be free from physical, sexual, emotional, or other abuse, corporal punishment, and exploitation.
 - (3) To receive adequate and healthy food, adequate clothing, grooming and hygiene products, and an age-appropriate allowance. Clothing and grooming and hygiene products shall respect the child's culture, ethnicity, and gender identity and expression.
 - (4) To be placed in the least restrictive setting possible, regardless of age, physical health, mental health, sexual orientation, and gender identity and expression, juvenile court record, or status as a pregnant or parenting youth, unless a court orders otherwise.
 - (5) To be placed with a relative or nonrelative extended family member if an appropriate and willing individual is available.
 - (6) To not be locked in any portion of their foster care placement, unless placed in a community treatment facility.

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- (7) To have a placement that utilizes trauma-informed and evidence-based deescalation and intervention techniques, to have law enforcement intervention requested only when there is an imminent threat to the life or safety of a child or another person or as a last resort after other diversion and deescalation techniques have been utilized, and to not have law enforcement intervention used as a threat or in retaliation against the child.
- (8) To not be detained in a juvenile detention facility based on their status as a dependent of the juvenile court or the child welfare services department's inability to provide a foster care placement. If they are detained, to have all the rights afforded under the United States Constitution, the California Constitution, and all applicable state and federal laws.
- (9) To have storage space for private use.
- (10) To be free from unreasonable searches of personal belongings.
- (11) To be provided the names and contact information for social workers, probation officers, attorneys, service providers, foster youth advocates and supporters, Court Appointed Special Advocates (CASAs), and education rights holder if other than the parent or parents, and when applicable, representatives designated by the child's Indian tribe to participate in the juvenile court proceeding, and to communicate with these individuals privately.
- (12) To visit and contact siblings, family members, and relatives privately, unless prohibited by court order, and to ask the court for visitation with the child's siblings.
- (13) To make, send, and receive confidential telephone calls and other electronic communications, and to send and receive unopened mail, unless prohibited by court order.
- (14) To have social contacts with people outside of the foster care system, including, but not limited to, teachers, coaches, religious or spiritual community members, mentors, and friends. If the child is an Indian child, to have the right to have contact with tribal members and members of their Indian community consistent with the prevailing social and cultural conditions and way of life of the Indian child's tribe.
- (15) To attend religious services, activities, and ceremonies of the child's choice, including, but not limited to, engaging in traditional Native American religious practices.
- (16) To participate in extracurricular, cultural, racial, ethnic, personal enrichment, and social activities, including, but not limited to, access to computer technology and the internet, consistent with the child's age, maturity, developmental level, sexual orientation, and gender identity and expression.
- (17) To have fair and equal access to all available services, placement, care, treatment, and benefits, and to not be subjected to discrimination or harassment on the basis of actual or perceived race, ethnic group identification, ancestry, national origin, color, religion, sex, sexual orientation, gender identity and expression, mental or physical disability, or HIV status.

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- (18) To have caregivers, child welfare and probation personnel, and legal counsel who have received instruction on cultural competency and sensitivity relating to sexual orientation, gender identity and expression, and best practices for providing adequate care to lesbian, gay, bisexual, and transgender children in out-of-home care.
- (19) To be placed in out-of-home care according to their gender identity, regardless of the gender or sex listed in their court, child welfare, medical, or vital records, to be referred to by the child's preferred name and gender pronoun, and to maintain privacy regarding sexual orientation and gender identity and expression, unless the child permits the information to be disclosed, or disclosure is required to protect their health and safety, or disclosure is compelled by law or a court order.
- (20) To have child welfare and probation personnel and legal counsel who have received instruction on the federal Indian Child Welfare Act of 1978 (25 U.S.C. Sec. 1901 et seq.) and on cultural competency and sensitivity relating to, and best practices for, providing adequate care to Indian children in out-of-home care.
- (21) To have recognition of the child's political affiliation with an Indian tribe or Alaskan village, including a determination of the child's membership or citizenship in an Indian tribe or Alaskan village; to receive assistance in becoming a member of an Indian tribe or Alaskan village in which the child is eligible for membership or citizenship; to receive all benefits and privileges that flow from membership or citizenship in an Indian tribe or Alaskan village; and to be free from discrimination based on the child's political affiliation with an Indian tribe or Alaskan village.
- (22) (A) To access and receive medical, dental, vision, mental health, and substance use disorder services, and reproductive and sexual health care, with reasonable promptness that meets the needs of the child, to have diagnoses and services explained in an understandable manner, and to participate in decisions regarding health care treatment and services. This right includes covered gender affirming health care and gender affirming mental health care, and is subject to existing laws governing consent to health care for minors and nonminors and does not limit, add, or otherwise affect applicable laws governing consent to health care.

(B) To view and receive a copy of their medical records to the extent they have the right to consent to the treatment provided in the medical record and at no cost to the child until they are 26 years of age.
- (23) Except in an emergency, to be free of the administration of medication or chemical substances, and to be free of all psychotropic medications unless prescribed by a physician, and in the case of children, authorized by a judge, without consequences or retaliation. The child has the right to consult with and be represented by counsel in opposing a request for the administration of psychotropic medication and to provide input to the court about the request to authorize medication. The child also has the right to report to the court the positive and adverse effects of the medication and to request that the court reconsider, revoke, or modify the authorization at any time.
- (24) (A) To have access to age-appropriate, medically accurate information about reproductive health care, the prevention of unplanned pregnancy, and the prevention and treatment of sexually transmitted infections.

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- (B) At any age, to consent to or decline services regarding contraception, pregnancy care, and perinatal care, including, but not limited to, abortion services and health care services for sexual assault without the knowledge or consent of any adult.
 - (C) At 12 years of age or older, to consent to or decline health care services to prevent, test for, or treat sexually transmitted diseases, including HIV, and mental health services, without the consent or knowledge of any adult.
- (25) At 12 years of age or older, to choose, whenever feasible and in accordance with applicable law, their own health care provider for medical, dental, vision, mental health, substance use disorder services, and sexual and reproductive health care, if payment for the service is authorized under applicable federal Medicaid law or other approved insurance, and to communicate with that health care provider regarding any treatment concerns or needs and to request a second opinion before being required to undergo invasive medical, dental, or psychiatric treatment.
 - (26) To confidentiality of medical and mental health records, including, but not limited to, HIV status, substance use disorder history and treatment, and sexual and reproductive health care, consistent with existing law.
 - (27) To attend school, to remain in the child's school of origin, to immediate enrollment upon a change of school, to partial credits for any coursework completed, and to priority enrollment in preschool, afterschool programs, a California State University, and each community college district, and to receive all other necessary educational supports and benefits, as described in the Education Code.
 - (28) To have access to existing information regarding the educational options available, including, but not limited to, the coursework necessary for career, technical, and postsecondary educational programs, and information regarding financial aid for postsecondary education, and specialized programs for current and former foster children available at the University of California, the California State University, and the California Community Colleges.
 - (29) To attend Independent Living Program classes and activities, if the child meets the age requirements, and to not be prevented by caregivers from attending as a consequence or punishment.
 - (30) To maintain a bank account and manage personal income, consistent with the child's age and developmental level, unless prohibited by the case plan.
 - (31) To work and develop job skills at an age-appropriate level, consistent with state law.
 - (32) For children 14 to 17 years of age, inclusive, to receive a consumer credit report provided to the child by the social worker or probation officer on an annual basis from each of the three major credit reporting agencies, and to receive assistance with interpreting and resolving any inaccuracies.
 - (33) To be represented by an attorney in juvenile court; to have an attorney appointed to advise the court of the child's wishes, to advocate for the child's protection, safety, and

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well-being, and to investigate and report to the court on legal interests beyond the scope of the juvenile proceeding; to speak to the attorney confidentially; and to request a hearing if the child feels their appointed counsel is not acting in their best interest or adequately representing their legal interests.

- (34) To receive a notice of court hearings, to attend court hearings, to speak to the judge, to view and receive a copy of the court file, subject to existing federal and state confidentiality laws, and to object to or request the presence of interested persons during court hearings. If the child is an Indian child, to have a representative designated by the child's Indian tribe be in attendance during hearings.
- (35) To the confidentiality of all juvenile court records consistent with existing law.
- (36) To view and receive a copy of their child welfare records, juvenile court records, and educational records at no cost to the child until the child is 26 years of age, subject to existing federal and state confidentiality laws.
- (37) To be involved in the development of their own case plan, including placement decisions, and plan for permanency. This involvement includes, but is not limited to, the development of case plan elements related to placement and gender affirming health care, with consideration of the child's gender identity. If the child is an Indian child, the case plan shall include protecting the essential tribal relations and best interests of the Indian child by assisting the child in establishing, developing, and maintaining political, cultural, and social relationships with the child's Indian tribe and Indian community.
- (38) To review the child's own case plan and plan for permanent placement if the child is 10 years of age or older, and to receive information about their out-of-home placement and case plan, including being told of changes to the plan.
- (39) To request and participate in a child and family team meeting, as follows:
 - (B) Within 60 days of entering foster care, and every 6 months thereafter.
 - (C) If placed in a short-term residential therapeutic program, or receiving intensive home-based services or intensive case coordination, or receiving therapeutic foster care services, to have a child and family team meeting at least every 90 days.
 - (D) To request additional child and family team meetings to address concerns, including, but not limited to, placement disruption, change in service needs, addressing barriers to sibling or family visits, and addressing difficulties in coordinating services.
 - (E) To have both informal and formal support people participate, consistent with state law.
- (40) To be informed of these rights in an age and developmentally appropriate manner by the social worker or probation officer and to be provided a copy of the rights in this section at the time of placement, any placement change, and at least once every six

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months or at the time of a regularly scheduled contact with the social worker or probation officer.

- (41) To be provided with contact information for the Community Care Licensing Division of the State Department of Social Services, the tribal authority approving a tribally approved home, and the State Foster Care Ombudsperson, at the time of each placement, and to contact any or all of these offices immediately upon request regarding violations of rights, to speak to representatives of these offices confidentially, and to be free from threats or punishment for making complaints.
- (b) The rights described in this section are broad expressions of the rights of children in foster care and are not exhaustive of all rights set forth in the United States Constitution and the California Constitution, federal and California statutes, and case law.
- (c) This section does not require, and shall not be interpreted to require, a foster care provider to take any action that would impair the health and safety of children in out-of-home placement.
- (d) The State Department of Social Services and each county welfare department are encouraged to work with the Student Aid Commission, the University of California, the California State University, and the California Community Colleges to receive information pursuant to paragraph (28) of subdivision (a).”

HANDBOOK ENDS HERE

86672.1 DISCIPLINE POLICIES AND PROCEDURES

- (a) The licensee shall develop, maintain and implement written facility discipline policies and procedures meeting the requirements specified in this section, and in Sections 86678.2 and 86872.1.
- (1) Staff, children, and authorized representatives shall receive copies of such policies and procedures, as specified herein and in Section 86665(bb).
- (2) Signed copies of such policies and procedures shall be maintained in the child's record.
- (b) Any form of discipline which violates a child's personal rights as specified in Section 86672 shall be prohibited.
- (c) Calls to law enforcement must be made in accordance with the facility's emergency intervention plan as specified in Section 86722. Calling or threatening to call law enforcement is prohibited as a form of discipline.
- (d) Acceptable forms of discipline shall include the following:
- (1) Exclusion in an unlocked living, sleeping, or play area.
- (2) Prohibition against attendance at, or participation in, planned activities.
- (3) Prohibition against use of entertainment devices, including but not limited to, telephones, televisions, radios and other electronic devices.

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- (4) Any other form of discipline approved in writing, in advance by the licensing agency.
- (e) The licensee or staff shall not discipline a child for refusing to take their medication.
 - (1) Document the child's medication refusal, as specified in Section 86670(h)(13)(G)1, and contact the child's caseworker as soon as possible, but within no more than 24 hours.
 - (2) When determining whether a child who has not taken a prescribed psychotropic medication is able to safely participate in an activity the licensee shall use the Reasonable and Prudent Parent Standard described in Welfare and Institutions Code Section 362.05. The determination shall be based upon an individualized consideration of the specific situation and the cognitive, emotional, physical, and behavioral capacities of the child.

86672.2 COMPLAINT PROCEDURES

- (a) The licensee of a transitional shelter care facility shall develop, maintain and implement written complaint procedures by which children or their authorized representatives are permitted to file complaints, without fear of retaliation, with the facility administrator regarding facility staff or operations.

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Children and/or their authorized representatives may file complaints with the licensing agency.

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- (1) Staff, children, and authorized representatives shall receive copies of such procedures, as specified herein and in Section 86665(bb).
- (2) Signed copies of such procedures shall be maintained in each child's record.
- (3) Such procedures shall be posted in a location in the facility which is accessible to children and their authorized representatives.

86672.3 PERSONAL RIGHTS FOR CHILDREN WITH SPECIAL HEALTH CARE NEEDS

- (a) A child with special health care needs has the right to be free from any restraining/postural support device imposed for purposes of discipline or convenience, and not required to treat the child's specific medical symptoms.
 - (1) Physical restraining devices may be used for the protection of a child with special health care needs during treatment and diagnostic procedures such as, but not limited to, intravenous therapy or catheterization procedures. The restraining device, which shall not have a locking device, shall be applied for no longer than the time required to complete the treatment and shall be applied in conformance with the child's individualized health care plan. The child's individualized health care plan shall include all of the following:

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- (A) The specific medical symptom(s) that require use of the restraining device.
 - (B) An evaluation of less restrictive therapeutic interventions and the reason(s) for ruling out these other practices as ineffective.
 - (C) A written order by the child's physician. The order must specify the duration and circumstances under which the restraining device is to be used.
- (2) The use of a postural support or protective device and the method of application shall be specified in the child's individualized health care plan and approved in writing by the child's physician.

86673 TELEPHONES

- (a) All facilities shall have telephone service on the premises.

86674 TRANSPORTATION

- (a) Only drivers licensed for the type of vehicle operated shall be permitted to transport clients.
- (b) The manufacturer's rated seating capacity of the vehicles shall not be exceeded.
- (c) Motor vehicles used to transport clients shall be maintained in a safe operating condition.
- (d) The facility staff are prohibited from smoking a tobacco product, or permitting any person from smoking a tobacco product in a motor vehicle that is regularly used to transport children, regardless of when the children are present. This prohibition applies when the motor vehicle is moving or at rest. Smoking has the same meaning as in subdivision (c) of Section 22950.5 of the Business and Professions Code, and tobacco product means a product or device as defined in subdivision (d) of Section 22950.5 of the Business and Professions Code.

86675 HEALTH-RELATED SERVICES

- (a) The licensee shall ensure that each client receives necessary first aid and other needed medical or dental services, including arrangement for and/or provision of transportation to the nearest available services.
- (b) Clients shall be assisted as needed with self-administration of prescription and nonprescription medications.
 - (1) Facility staff, except those authorized by law, shall not administer injections but staff designated by the licensee shall be authorized to assist clients with self-administration of injections as needed.
 - (2) Assistance with self-administration does not include forcing a client to take medications, hiding or camouflaging medications in other substances without the client's knowledge and consent,

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or otherwise infringing upon a client's right to refuse to take a medication.

- (3) If the client's physician has stated in writing that the client is able to determine and communicate their need for a prescription or nonprescription PRN medication, facility staff shall be permitted to assist the client with self-administration of their PRN medication.
- (4) If the client's physician has stated in writing that the client is unable to determine their own need for nonprescription PRN medication, but can communicate their symptoms clearly, facility staff designated by the licensee shall be permitted to assist the client with self-administration, providing all of the following requirements are met:
 - (A) There is a written direction from a physician, on a prescription blank, specifying the name of the client, the name of the medication, instructions regarding a time or circumstance (if any) when it should be discontinued, and an indication of when the physician should be contacted for a medication reevaluation.
 - (B) Once ordered by the physician the medication is given according to the physician's directions.
 - (C) A record of each dose is maintained in the client's record. The record shall include the date and time the PRN medication was taken, the dosage taken, and the client's response.
- (5) If the client is unable to determine their own need for a prescription or nonprescription PRN medication, and is unable to communicate their symptoms clearly, facility staff designated by the licensee, shall be permitted to assist the client with self-administration, provided all of the following requirements are met:
 - (A) Facility staff shall contact the client's physician prior to each dose, describe the client's symptoms, and receive direction to assist the client in self-administration of that dose of medication.
 - (B) The date and time of each contact with the physician, and the physician's directions, shall be documented and maintained in the client's facility record.
 - (C) The date and time the PRN medication was taken, the dosage taken, and the client's response, shall be documented and maintained in the client's facility record.
- (6) For every prescription and nonprescription PRN medication for which the licensee provides assistance, there shall be a signed, dated written order from a physician on a prescription blank, maintained in the client's file, and a label on the medication. Both the physician's order and the label shall contain at least all of the following information:
 - (A) The specific symptoms which indicate the need for the use of the medication.
 - (B) The exact dosage.
 - (C) The minimum number of hours between doses.
 - (D) The maximum number of doses allowed in each 24-hour period.

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- (c) The isolation room shall be used where separation from others is required.
- (d) There shall be privacy for first aid treatment of minor injuries and for examination or treatment by a physician if required.
- (e) Staff responsible for providing direct care and supervision shall receive training in age appropriate CPR and first aid from persons qualified by agencies including but not limited to the American Red Cross. Training in “age appropriate CPR and first aid” includes training in adult and pediatric CPR and first aid.
- (f) First aid supplies shall be maintained and be readily available in a central location in the facility.
 - (1) The supplies shall include at least the following:
 - (A) A current edition of a first aid manual approved by the American Red Cross, the American Medical Association or a state or federal health agency.
 - (B) Sterile first aid dressings.
 - (C) Bandages or roller bandages.
 - (D) Adhesive tape.
 - (E) Scissors.
 - (F) Tweezers.
 - (G) Thermometers.
 - (H) Antiseptic solution.
- (g) There shall be at least one person capable of and responsible for communicating with emergency personnel in the facility at all times. The following information shall be readily available:
 - (1) The name, address and telephone number of each client's physician and dentist, and other medical and mental health providers, if any.
 - (2) The name, address and telephone number of each emergency agency, including but not limited, to the fire department, crisis center or paramedical unit. There shall be at least one medical resource available to be called at all times.
 - (3) The name and telephone number of an ambulance service.

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It is recommended that the licensee obtain consent forms to permit the authorization of medical care.

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- (h) When a client requires prosthetic devices, or vision or hearing aids, the staff shall be familiar with

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the use of these devices and aids and shall assist the client with their utilization as needed.

- (i) Medications shall be centrally stored under the following circumstances:
 - (1) Preservation of the medication requires refrigeration.
 - (2) Any medication determined by the physician to be hazardous if kept in the personal possession of the client for whom it was prescribed.
 - (3) Because of physical arrangements and the condition or the habits of persons in the facility, the medications are determined by either the administrator or by the licensing agency to be a safety hazard.

- (j) The following requirements shall apply to medications which are centrally stored:
 - (1) Medication shall be kept in a safe and locked place that is not accessible to persons other than employees responsible for the supervision of the centrally stored medication.
 - (2) Each container shall identify the items specified in (7)(A) through (G) below.
 - (3) All medications shall be labeled and maintained in compliance with label instructions and state and federal laws.
 - (4) No person other than the dispensing pharmacist shall alter a prescription label.
 - (5) Each client's medication shall be stored in its originally received container.
 - (6) No medications shall be transferred between containers.
 - (7) The licensee shall ensure the maintenance, for each client, of a record of centrally stored prescription medications which is retained for at least one year and includes the following:
 - (A) The name of the client for whom prescribed.
 - (B) The name of the prescribing physician.
 - (C) The drug name, strength and quantity.
 - (D) The date filled.
 - (E) The prescription number and the name of the issuing pharmacy.
 - (F) Expiration date.
 - (G) Number of refills.
 - (H) Instructions, if any, regarding control and custody of the medication.

- (k) Prescription medications which are not taken with the client upon termination of services, or which are not to be retained shall be destroyed by the facility administrator, or a designated substitute, and

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one other adult who is not a client.

- (1) Both shall sign a record, to be retained for at least one year, which lists the following:
 - (A) Name of the client.
 - (B) The prescription number and the name of the pharmacy.
 - (C) The drug name, strength and quantity destroyed.
 - (D) The date of destruction.
- (l) The licensee shall ensure that all prescribed medications are centrally stored, as provided in Section 86675(j), with the exception of contraceptives and medications used to treat or prevent pregnancy or sexually transmitted disease or infection.
- (m) Psychotropic medication shall only be used in accordance with the written directions of the physician prescribing the medication and in accordance with authorization requirements specified in Sections 369.5(a)(1) and 739.5(a)(1) of the Welfare and Institutions Code and Section 86670(h)(12).
 - (1) Psychotropic medications may be administered without court order or parental authorization in an emergency. Emergency procedures are specified in the California Rules of Court, rule 5.640.
- (n) Procedures for a child's medication refusal shall be as specified in Section 86670(h)(13)(G)1.

86676 FOOD SERVICE

- (a) In facilities providing meals to clients, the following shall apply:
 - (1) All food shall be safe and of the quality and in the quantity necessary to meet the needs of the clients. Each meal shall meet at least 1/3 of the servings recommended in the USDA Basic Food Group Plan - Daily Food Guide for the age group served. All food shall be selected, stored, prepared and served in a safe and healthful manner.
 - (2) Where all food is provided by the facility, arrangements shall be made so that each client has available at least three meals per day.
 - (A) Not more than 15 hours shall elapse between the third meal of one day and first meal of the following day.
 - (3) Where meal service within a facility is elective, arrangements shall be made to ensure availability of a daily food intake meeting the requirement of (a)(1) above for all clients who, in their admission agreement, elect meal service.
 - (4) Between meal nourishment, snacks shall be available for all clients unless limited by dietary restrictions prescribed by a physician.
 - (5) Modified diets prescribed by a client's physician as a medical necessity shall be provided.

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- (A) The licensee shall obtain and follow instructions from the physician or dietitian on the preparation of the modified diet.
- (6) Commercial foods shall be approved by appropriate federal, state and local authorities. All foods shall be selected, transported, stored, prepared and served so as to be free from contamination and spoilage and shall be fit for human consumption. Food in damaged containers shall not be accepted, used or retained.
- (7) Where indicated, food shall be cut, chopped or ground to meet individual needs.
- (8) Powdered milk shall not be used as a beverage but shall be allowed in cooking and baking. Raw milk, as defined in Division 15 of the California Food and Agricultural Code shall not be used. Milk shall be pasteurized.
- (9) Except upon written approval by the licensing agency, meat, poultry and meat food products shall be inspected by state or federal authorities. Written evidence of such inspection shall be available for all products not obtained from commercial markets.
- (10) If food is prepared off the facility premises, the following shall apply:
 - (A) The preparation source shall meet all applicable requirements for commercial food services.
 - (B) The facility shall have the equipment and staff necessary to receive and serve the food and for cleanup.
 - (C) The facility shall maintain the equipment necessary for in-house preparation, or have an alternate source for food preparation, and service of food in emergencies.
- (11) All persons engaged in food preparation and service shall observe personal hygiene and food services sanitation practices which protect the food from contamination.
- (12) All foods or beverages capable of supporting rapid and progressive growth of microorganisms which can cause food infections or food intoxications shall be stored in covered containers at 45 degrees F (7.2 degrees C) or less.
- (13) Pesticides and other similar toxic substances shall not be stored in food storerooms, kitchen areas, food preparation areas, or areas where kitchen equipment or utensils are stored.
- (14) Soaps, detergents, cleaning compounds or similar substances shall be stored in areas separate from food supplies.
- (15) All kitchen, food preparation, and storage areas shall be kept clean, free of litter and rubbish, and measures shall be taken to keep all such areas free of rodents, and other vermin.
- (16) All food shall be protected against contamination. Contaminated food shall be discarded immediately.
- (17) All equipment, fixed or mobile, dishes, and utensils shall be kept clean and maintained in safe condition.

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- (18) All dishes and utensils used for eating and drinking and in the preparation of food and drink, shall be cleaned and sanitized after each usage.
 - (A) Dishwashing machines shall reach a temperature of 165 degrees F (74 degrees C) during the washing and/or drying cycle to ensure that dishes and utensils are cleaned and sanitized.
 - (B) Facilities not using dishwashing machines shall clean and sanitize dishes and utensils by an alternative comparable method.
- (19) Equipment necessary for the storage, preparation and service of food shall be provided, and shall be well-maintained.
- (20) Tableware and tables, dishes, and utensils shall be provided in the quantity necessary to serve the clients.
- (21) Adaptive devices shall be provided for self-help in eating as needed by clients.
- (b) The licensee shall meet the following food supply and storage requirements:
 - (1) The Plan of Operation shall include an emergency nutrition plan.
 - (2) Freezers shall be large enough to accommodate required perishables and shall be maintained at a temperature of zero degrees F (-17.7 degrees C).
 - (3) Refrigerators shall be large enough to accommodate required perishables and shall maintain a maximum temperature of 45 degrees F (7.2 degrees C).
 - (4) Freezers and refrigerators shall be kept clean, and food storage shall permit the air circulation necessary to maintain the temperatures specified in (2) and (3) above.
 - (5) Kitchen appliances and utensils shall be made accessible to a child when they are participating in age-appropriate, and developmentally-appropriate activities related to food preparation, cooking, and other related kitchen and dining activities. The administrator or facility manager, or their responsible designee, shall:
 - (A) Apply the "Reasonable and Prudent Parent Standard," as specified in Section 86667, when allowing a child to use kitchen appliances and utensils for food preparation and cooking.
 - (B) Ensure that the child is properly trained to safely use the kitchen appliances and utensils.
 - (C) Not require a child to participate in meal preparation.
- (c) The licensing agency shall have the authority to require the facility to provide written information, including menus, regarding the food purchased and used over a given period when it is necessary to determine if the licensee is in compliance with the food service requirements in the regulations and operating standards in this Chapter.

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- (1) The licensing agency shall specify in writing the written information required from the licensee.
 - (2) The facility shall maintain a list of food offered or provided to clients and keep the list on file for at least 30 days. Sample menus shall be made available for review by the clients or their authorized representatives and the licensing agency upon request.
- (d) Sample menus shall be posted in an area accessible to the staff and children.

86677 PERSONAL SERVICES

- (a) The Plan of Operation shall include a description of laundry services.

86677.3 CARE FOR CLIENTS WHO LACK HAZARD AWARENESS OR IMPULSE CONTROL

- (a) If a client requires protective supervision because of running/wandering away, supervision may be enhanced by fencing yards, using self-closing latches and gates, and installing operational bells, buzzers, or other auditory devices on exterior doors to alert staff when the door is opened. The fencing and devices must not substitute for appropriate staffing.
- (1) The licensee may use wrist bands and other client egress-alert devices with the prior written approval of the client or authorized representative, if the client is legally incapable of giving consent, provided that the devices do not violate Section 86672.

86678 RESPONSIBILITY FOR PROVIDING CARE AND SUPERVISION

- (a) The licensee shall provide care and supervision as necessary to meet the client's needs.
- (1) In addition, the following shall apply to a facility serving minor or nonminor dependents and their children:
- (A) The licensee shall ensure that a minor or nonminor dependent parent provides care and supervision for the minor or nonminor dependent's child.
 - 1. When the minor parent is not providing direct care and supervision to their child(ren), the facility shall provide that care and supervision.
- (b) In any instance where the Department requires that a client/resident be relocated, the licensee shall immediately communicate that information to the child's caseworker. The licensee shall ensure that all necessary steps to be taken to reduce stress to the client/resident which may result in transfer trauma.
- (c) The facility shall not admit any child when their admission presents an imminent health and safety risk to any child.

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- (d) When a child residing in the facility poses a risk or threat to themselves or others, the licensee must employ methods of protection that may include separation, closer monitoring, or increased and/or specialized staff.
 - (1) Staff who provide the additional protective measures shall not be included in the usual facility staffing and ratio requirements.

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The provision in Section 86678(c) would permit the facility to decline admission of a child who presents with a communicable disease/infection as long as that decision is made on a case by case basis with consideration of whether or not the facility is able to meet the child's needs and is consistent with current department published guidance, including but not limited to infection control practices and requirements. It also would permit the facility to decline admission of a child who presents other imminent health or safety risks to other children in the facility. These decisions would also be subject to the provisions described in Section 86668.4(e).

HANDBOOK ENDS HERE

86678.2 TRAUMA INFORMED PROGRAM PRACTICES, SERVICES, AND SUPPORTS

- (a) The facility's program interventions, practices, services, and supports shall be trauma informed and shall include curricula, training, interventions, policies, practices and procedures which include the following:
 - (1) Written policies and procedures that explicitly include and support recognized Trauma Informed principles including but not limited to the following:
 - (A) A child's need to feel safe, be respected, informed, connected, and hopeful regarding their own experience with trauma.
 - (B) The interrelationship between trauma and impacts of trauma including, but not limited to, neuro-cognitive problems, neuro-psychological issues such as depression and anxiety, and behaviors.
 - (C) The need to work in a collaborative way with a child and human services agencies in a manner that will empower the child.
 - (D) The trauma informed interventions, treatment practices, or both, that will be used in serving children.
 - (2) Interventions and practices that demonstrate the following:
 - (A) Recognition and understanding of the trauma that children have experienced and how trauma impacts children;
 - (B) How observable behaviors will be identified, documented, and evaluated to assess the need for services;

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- (C) Maximization of physical and psychological safety for the child;
 - (D) How emergency interventions, including early interventions and de-escalation procedures, are trauma informed;
 - (E) How individualized strategies for trauma-specific interventions address trauma's consequences and facilitate healing, and can be implemented in components consistent with the child's history of trauma; and
 - (F) Minimization of any potential for re-traumatization.
- (3) Training of all staff that includes the types of trauma experienced by children, the effects and impact of abuse, neglect and trauma, how trauma may manifest itself in daily functioning and behaviors, how to provide care and supervision that is trauma informed, how to facilitate healing, and how to reduce risk of re-traumatization.
- (4) Support for both children and facility staff in identifying and accessing services and supports to heal from trauma, reduce the risk of re-traumatization, and foster well-being and resiliency. This may include but is not be limited to:
- (A) Development of coping, communication, and self-regulation skills;
 - (B) Development of independent living skills that foster self-esteem, self-advocacy, and empowerment;
 - (C) Training on how to access specialty, health, and community services;
 - (D) Extracurricular activities;
 - (E) Healing practices;
 - (F) Engagement with family and loved ones;
 - (G) Maintaining connections to important people in the child's life; and
 - (H) Ensuring the provision of a positive, safe physical and emotional environment, as well as services which are strengths-based and promote positive development.
- (5) Evidence-based or informed screening or assessment tools to identify trauma history and trauma-related symptoms or problems, and how that history is included in the child's client record, as applicable, upon admission.
- (6) Procedures for how the licensee will access and make referrals for evidence-based and/or promising services and practices that are trauma-informed.
- (7) Policies and procedures for collaboration with Child Welfare, Probation, County Mental Health, Child and Family Teams, and outside partners to ensure effective and consistent provision of care and services that are trauma informed.
- (8) Procedures for maintaining consistency with Transitional Independent Living Plans (TILPS),

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as applicable.

86679 PLANNED ACTIVITIES

- (a) The licensee shall develop, maintain, and implement a written plan to ensure that indoor and outdoor activities which include but are not limited to the following are provided for all children:
 - (1) Activities that require group interaction.
 - (2) Physical activities, including but not limited to games, sports and exercise.
 - (3) Leisure time.
- (b) The licensee shall promote inclusiveness with children in developing planned activities when feasible.
- (c) The administrator or facility manager, or their designee, shall:
 - (1) Allow a child to participate in age-appropriate and developmentally-appropriate extracurricular, enrichment, and social activities at the facility.
 - (2) Apply the "Reasonable and Prudent Parent Standard" as specified in Section 86667, when determining whether to allow a child to participate in age-appropriate and developmentally-appropriate extracurricular, enrichment, and social activities at the facility.

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Article 7. Physical Environment

86686 ALTERATIONS TO EXISTING BUILDINGS OR NEW FACILITIES

- (a) Prior to construction or alterations, all licensees shall notify the licensing agency of the proposed change.
- (b) The licensing agency shall have the authority to require that the licensee have a building inspection by a local building inspector if the agency suspects that a hazard to the clients' health and safety exists.

HANDBOOK BEGINS HERE

Prior to construction or alterations, state or local law requires that all facilities secure a building permit.

HANDBOOK ENDS HERE

86687 BUILDINGS AND GROUNDS

- (a) The facility shall be clean, safe, sanitary and in good repair at all times for the safety and well-being of clients, employees and visitors.
 - (1) The licensee shall take measures to keep the facility free of flies and other insects.
 - (2) The licensee shall provide for the safe disposal of water and other chemicals used for cleaning purposes.
- (b) All clients shall be protected against hazards within the facility through provision of the following:
 - (1) Protective devices including but not limited to nonslip material on rugs.
- (c) All outdoor and indoor passageways, stairways, inclines, ramps, open porches and other areas of potential hazard shall be kept free of obstruction.
- (d) General permanent or portable storage space shall be available for the storage of facility equipment and supplies.
 - (1) Facility equipment and supplies shall be stored in this space and shall not be stored in space used to meet other requirements specified in these operating standards.
- (e) All licensees serving children or serving clients who have physical handicaps, mental disorders, or developmental disabilities shall ensure the inaccessibility of pools, including swimming pools (in-ground and above-ground), fixed-in-place wading pools, hot tubs, spas, fish ponds or similar bodies of water through a pool cover or by surrounding the pool with a fence.
 - (1) Fences shall be at least five feet high and shall be constructed so that the fence does not obscure the pool from view. The bottom and sides of the fence shall comply with Division 1, Appendix Chapter 4 of the 1994 Uniform Building Code. In addition to meeting all of the aforementioned

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requirements for fences, gates shall swing away from the pool, self-close and have a self-latching device located no more than six inches from the top of the gate. Pool covers shall be strong enough to completely support the weight of an adult and shall be placed on the pool and locked while the pool is not in use.

- (2) Where an above-ground pool structure is used as the fence or where the fence is mounted on top of the pool structure, the pool shall be made inaccessible when not in use by removing or making the ladder inaccessible or erecting a barricade to prevent access to decking. If a barricade is used, the barricade shall meet the requirements of Section 86687(e)(1).
- (f) All in-ground pools, and above-ground pools which cannot be emptied after each use shall have an operative pump and filtering system.
- (g) Disinfectants, cleaning solutions, poisons, firearms and other items that could pose a danger if readily available to clients shall be stored where inaccessible to clients.
- (1) Storage areas for poisons, and firearms and other dangerous weapons shall be locked.
 - (2) In lieu of locked storage of firearms, the licensee may use trigger locks or remove the firing pin.
 - (A) Firing pins shall be stored and locked separately from firearms.
 - (3) Ammunition shall be stored and locked separately from firearms.
- (h) Medicines shall be stored as specified in Section 86675(i) and (j) and separately from other items specified in Section 86687(g) above.
- (i) The items specified in Section 86687(g) above shall not be stored in food storage areas or in storage areas used by or for clients.
- (j) The use of surveillance cameras in the facility and in outdoor activity areas shall be prohibited.
- (k) Bedrooms shall meet, at a minimum, the following requirements:
- (1) No more than two children shall sleep in a bedroom.
 - (2) Bedrooms shall be large enough to allow for easy passage and comfortable use of any required assistive devices, including but not limited to wheelchairs, between beds and other items of furniture.
 - (3) Children of the opposite sex shall not share a bedroom unless:
 - (A) A minor parent is sharing a bedroom with the minor parent's child of the opposite sex;
 - (B) Each child is under five years of age;
 - (C) The children are members of the same sibling group; or
 - (D) A licensee is permitting a child to share a bedroom consistent with their gender identity

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regardless of the gender or sex listed on the court or child welfare documents.

- (4) No room commonly used for other purposes shall be used as a bedroom.
 - (A) Such rooms shall include but not be limited to halls, stairways, unfinished attics or basements, garages, storage areas, and sheds or similar detached buildings.
- (5) No bedroom shall be used as a public or general passageway to another room, bath or toilet.
- (6) Except for infants, children shall not share a bedroom with an adult.
 - (A) In bedrooms shared by adults and infants, no more than one infant and no more than two adults shall share the room.
 - (B) If two children have been sharing a bedroom and one of them turns 18 they may continue to share the bedroom as long as they remain compatible and the licensing agency has granted an exception pursuant to Section 86624.
- (7) If staff sleep at the facility, then private bedrooms, separate from the children's bedrooms, shall be provided for staff or other adults who sleep at the facility.
 - (A) Staff bedrooms are to be located near the children's sleeping area.
- (8) Subdivisions (1), (2), (3), (4), (5), and (6) apply to all bedrooms used by all children in the facility including children who are members of the licensee's family, children of staff members and children in placement.
- (9) Subdivisions (4), (5) and (7) apply to all bedrooms used by the licensee(s), staff and any other adults in the facility.
- (l) The licensee shall prohibit smoking of any kind in the facility and on the grounds of the facility.
- (m) Every transitional shelter care facility shall have one or more carbon monoxide detectors in the facility that meets the standards established in Health and Safety Code Chapter 8 (commencing with Section 13260) of Part 2 of Division 12.
- (n) In every situation where children share a bedroom, the licensee shall document that the bedroom sharing arrangement ensures the health and safety of each child and that the children are compatible. When considering compatibility a licensee shall consult with children in their care, in an age and developmentally appropriate manner, regarding the child's sexual orientation and gender identity and what information the child wishes to disclose and to whom. A licensee shall not disclose information about the child's sexual orientation and/or gender identity against the child's wishes, unless compelled to do so by law or court order. This documentation shall be maintained in the child's record.

86687.1 ADDITIONAL BUILDINGS AND GROUNDS REQUIREMENTS FOR SERVING CHILDREN WITH SPECIAL HEALTH CARE NEEDS

- (a) Areas in the facility, including bathrooms, toilets, dining areas, passageways and recreational spaces used by a child with special health care needs shall be large enough to accommodate any medical

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equipment needed by the child therein.

- (1) Bedrooms occupied by children with special health care needs shall be large enough to allow the storage of each child's personal items and any required medical equipment or assistive devices, including wheelchairs, adjacent to the child's bed.
 - (A) The bedroom shall be large enough to permit unobstructed bedside ministrations of medical procedures and medications.
- (b) Notwithstanding Section 86687(k)(1), a bedroom used by a child with special health care needs shall not be shared with another child residing in the facility if the child's need for medical services or the child's medical condition would be incompatible with the use and enjoyment of the bedroom by each minor.

86687.2 OUTDOOR ACTIVITY SPACE

- (a) Children shall have access to safe outdoor activity space.
 - (1) Outdoor activity space meeting the requirement of (a) above shall include but not be limited to activity centers and public parks.
 - (2) A sketch of the physical plant as required in the plan of operation pursuant to Section 86622, shall include the location(s) of outdoor activity space.
 - (3) The outdoor activity space shall not include any area made inaccessible by fencing pursuant to Section 86687(e).
 - (4) Where natural or man-made hazards such as canals, cliffs, condemned buildings, creeks, ditches, lakes, ocean fronts, mines, power lines, quarries, rivers, ravines, swamps, watercourses, and areas subject to flooding lie on or adjacent to the facility premises, the outdoor activity space shall be inaccessible to such hazards.
 - (A) Where a fence or wall is used to make the outdoor activity space inaccessible, the requirements of Section 86687(e)(1) shall be met.
 - (5) The administrator or facility manager, or their responsible designee, shall apply the "Reasonable and Prudent Parent Standard," as specified in Section 86667, when determining whether to allow a "child" to have access to fish ponds, fountains, and similar bodies of water.
 - (A) The licensee shall ensure safeguards that include but are not limited to; familiarity of the surroundings, and staff trained in water safety as specified in Section 86665(e)(2).
- (b) As a condition of licensure, the areas around and under high climbing equipment, swings, slides and other similar equipment shall be cushioned with material which absorbs falls.
 - (1) Sand, woodchips, peagravel or rubber mats commercially produced for this purpose, shall be permitted.
 - (2) The use of cushioning material other than that specified in (1) above shall be approved by the licensing agency in advance of installation.

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86687.3 INDOOR ACTIVITY SPACE

- (a) Adequate indoor space shall be available to children for relaxation and visitation with friends and/or relatives, subject to Section 86672(c).

86688 FIXTURES, FURNITURE, EQUIPMENT AND SUPPLIES

- (a) A comfortable temperature for clients shall be maintained at all times.
 - (1) The licensee shall maintain the temperature in rooms that clients occupy between a minimum of 68 degrees F (20 degrees C) and a maximum of 85 degrees F (30 degrees C).
 - (A) In areas of extreme heat the maximum shall be 30 degrees F (16.6 degrees C) less than the outside temperature.
 - (2) Nothing in this section shall prohibit clients from adjusting individual thermostatic controls.
- (b) All window screens shall be in good repair and be free of insects, dirt and other debris.
- (c) Fireplaces and open-faced heaters shall be made inaccessible to clients to ensure protection of the clients' safety.

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The use of a fireplace screen or similar barrier will meet this requirement.

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- (d) The licensee shall provide lamps or lights as necessary in all rooms and other areas to ensure the comfort and safety of all persons in the facility.
- (e) Faucets used by clients for personal care such as shaving and grooming shall deliver hot water.
 - (1) Hot water temperature controls shall be maintained to automatically regulate temperature of hot water delivered to plumbing fixtures used by clients to attain a hot water temperature of not less than 105 degrees F (40.5 degrees C) and not more than 120 degrees F (48.8 degrees C).
 - (2) Taps delivering water at 125 degrees F (51.6 degrees C) or above shall be prominently identified by warning signs.
 - (3) All toilets, hand washing and bathing facilities shall be maintained in safe and sanitary operating condition. Additional equipment, aids, and/or conveniences shall be provided in facilities accommodating physically handicapped clients who need such items.
- (f) Solid waste shall be stored, located and disposed of in a manner that will not transmit communicable diseases or odors, create a nuisance, or provide a breeding place or food source for insects or rodents.
 - (1) All containers, including movable bins, used for storage of solid wastes shall have tight-fitting

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- covers kept on the containers; shall be in good repair, shall be leakproof and rodent-proof.
- (2) Solid waste containers, including movable bins, receiving putrescible waste shall be emptied at least once per week or more often if necessary to comply with (f) above.
 - (3) Each movable bin shall provide for suitable access and a drainage device to allow complete cleaning at the storage area.
- (g) The licensee shall provide linens of various kinds necessary to meet the program of services being offered by the facility and the requirements specified in these operating standards.
- (h) As a condition of licensure, toilet, wash basin, bath and shower fixtures shall, at a minimum, meet the following requirements.
- (1) There shall be at least one toilet and wash basin maintained for each six persons residing in the facility, including children and personnel.
 - (2) There shall be at least one shower or bathtub maintained for each ten persons residing in the facility, including children and personnel.
 - (3) Toilets and bathrooms shall be located so that children do not have to go out-of-doors to have access to such accommodations.
 - (4) Individual privacy shall be provided in all toilet, bath, and shower areas.
- (i) The licensee shall provide and make readily available to each child the following furniture, equipment and supplies necessary for personal care and maintenance of personal hygiene:
- (1) An individual bed for each child maintained in good repair; equipped with good springs and a clean mattress; and supplied with pillow(s) which are clean and in good repair.
 - (A) No transitional shelter care facility shall have more beds for children's use than required for the maximum capacity approved by the licensing agency.
 - 1. This requirement shall not apply to the bed(s) made available for illness or separation of others in an isolation room or area as specified in Section 86675(c).
 - (B) The use of cots, trundle, or bunk beds shall be prohibited, except cots may be used for napping.
 - (2) Clean linen in good repair, including lightweight, warm blankets and bedspreads; top and bottom bed sheets; pillow cases; mattress pads; and bath towels, hand towels and wash cloths.
 - (A) The quantity of linen provided shall permit changing the linen between children or more often when indicated to ensure that clean linen is in use by children at all times.
 - (B) Use of common towels and wash cloths shall be prohibited.

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Rubber or plastic sheeting or bed coverings should be provided when necessary.

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- (3) Items used to maintain basic personal hygiene practices, including but not limited to, shampoo, feminine napkins, nonmedicated soap, toilet paper, toothbrush, toothpaste, and comb.
- (4) Portable or permanent closets and drawer space in the child's bedroom to accommodate the child's clothing and personal belongings.
 - (A) A minimum of two drawers or eight cubic feet (.2264 cubic meters) of drawer space, whichever is greater, shall be provided for each child.
- (j) The administrator or facility manager, or their responsible designee, shall:
 - (1) Apply the "Reasonable and Prudent Parent Standard," as specified in Section 86667, when determining whether a child should have access to disinfectants and cleaning solutions; and
 - (2) Ensure that the child is properly trained to safely use disinfectants and cleaning solutions.
- (k) The following facilities shall maintain a signal system which meets the requirements specified in (l) and (m) below. Such system shall be used by children to summon staff during an emergency.
 - (1) All facilities with a licensed capacity of 31 or more children.
 - (2) All facilities having separate floors and not providing full-time staff on each floor whenever children are present.
 - (3) All facilities having separate buildings and not providing full-time staff in each building whenever children are present.
- (l) The signal system shall have the ability to meet the following requirements:
 - (1) Operation from each children's living unit.
 - (2) Transmission of a visual and/or auditory signal to a central location, or production of an auditory signal at the specific children's living unit which is loud enough to summon staff.
 - (3) Identification of the specific children's living unit from which the signal originates.

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Intercoms may be used to meet the requirement for a signal system as long as all facility clients are capable of using the intercom system, and the intercom system meets all the requirements of a signal system.

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- (m) Facilities having more than one wing, floor or building shall be allowed to have a separate signal system in each component provided that each such system meets the requirements specified in (l)

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above.

- (n) The licensee shall provide and maintain the supplies, equipment and reading material necessary to implement the planned activities.
- (o) The licensee shall provide and make readily available to children well-lighted desk or table space and necessary supplies, for school-related study.
- (p) Construction or other equipment, including but not limited to, incinerators and air conditioning equipment, shall be made inaccessible to children.

86688.3 OUTDOOR ACTIVITY EQUIPMENT

- (a) Outdoor activity equipment shall be securely anchored to the ground unless it is portable by design.
 - (1) Equipment shall be maintained in a safe condition free of sharp, loose or pointed parts.

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SUBCHAPTER 1: EMERGENCY INTERVENTION IN TRANSITIONAL SHELTER CARE FACILITIES

Article 1. General Provisions

86700 GENERAL PROVISIONS

- (a) Transitional Shelter Care Facilities ~~Group homes~~, as defined in Section 86601(t)(4), which utilize or it is reasonably foreseeable that they will utilize, emergency interventions to prevent a child who exhibits assaultive behavior from injuring or endangering themselves or others, shall be governed by the provisions of this Subchapter in addition to the operating standards specified in Chapter 12, commencing with Section 86600, which prohibit the use of restraint.
- (b) Transitional shelter care facility staff may be justified/excused in using emergency interventions which include restraint if:
 - (1) The restraint is reasonably applied to prevent a child exhibiting assaultive behavior from exposure to immediate injury or danger to themselves or others; and
 - (2) The force used does not exceed that reasonably necessary to avert the injury or danger; and
 - (3) The danger of the force applied does not exceed the danger being averted; and
 - (4) The duration of the restraint ceases as soon as the danger of harm has been averted.
- (c) The licensee must use a continuum of interventions, starting with the least restrictive intervention. More restrictive interventions may be justified when less restrictive techniques have been attempted and were not effective and the child continues to present an imminent danger for injuring or endangering themselves or others.
- (d) An emergency intervention plan as specified in Section 86722, is required for all transitional shelter care facilities, and must be submitted to, and approved by the Department prior to use by the transitional shelter care facility.
 - (1) The Department shall review and approve the emergency intervention plan as specified in Sections 86722(1) and 86722(1)(1).

86700.1 EMERGENCY INTERVENTION PROHIBITION

- (a) The following emergency interventions techniques must not be used on a child at any time.
 - (1) Mechanical Restraints, except as provided in Section 86672(c)(24).
 - (2) Aversive behavior modification interventions including, but not limited to, body shaking, water spray, slapping, pinching, ammonia vapors, sensory deprivation and electric shock.
 - (3) Intentionally producing pain to limit the child's movement, including but not limited to, arm twisting, finger bending, joint extensions and headlocks.

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- (4) Methods of restricting a child's breathing or circulation.
- (5) Corporal punishment.
- (6) Placing blankets, pillows, clothing or other items over the child's head or face; body wraps with sheets or blankets.
 - (A) Pillows or padding, placed under the head of a thrashing child to prevent injury, are permitted.
- (7) The use of psychotherapeutic or behavior modifying drugs as punishment or for the convenience of facility personnel to control a child who is exhibiting assaultive behavior.
- (8) Techniques that can reasonably be expected to cause serious injuries to the child that require medical treatment provided by a health practitioner, licensed under Division 2 of the Business and Professions Code. A health practitioner would include a physician, surgeon, osteopath, dentist, licensed nurse, optometrist, etc.
- (9) Verbal abuse or physical threats by facility personnel.
- (10) The isolation of a child in a room which is locked by means of: key lock; deadbolt; security chain; flush, edge or surface bolt; or similar hardware which is inoperable by the child inside the room.
- (11) Manual restraints for more than 15 consecutive minutes in a 24-hour period, unless as specified in Section 86722.
- (12) Manual restraints for more than four (4) cumulative hours in a 24-hour period.
- (b) In addition to techniques specified in Section 86700.1(a), any emergency intervention technique not approved for use as part of the licensee's emergency intervention plan must not be used at any time.
- (c) Manual restraints must never be used for the following purposes:
 - (1) Punishment or discipline.
 - (2) Replacement for on-duty child care staff.
 - (3) Convenience of facility personnel.
 - (4) As a substitute for, or as part of, a treatment program.
 - (5) As a substitute for, or as part of, a behavior modification program.
 - (6) Harassment or humiliation.
 - (7) To prevent a child from leaving the facility, except as specified in Section 86722.2.

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- (d) Manual restraints must not be used when a child's medical assessment, as specified in Section 86669, documents that they have a medical condition that would contraindicate the use of manual restraints; and when the child's current condition contraindicates the use of manual restraints.
- (e) Law enforcement must not be contacted as a substitute for effective care and supervision or the facility's approved continuum of emergency interventions.

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Article 2. Application Procedures

86722 EMERGENCY INTERVENTION PLAN

- (a) The emergency intervention plan is to be designed and approved, in conjunction with the licensee, by an individual with the qualifications of a behavior management consultant as defined in Section 86601(b)(3).
 - (1) The plan must be appropriate for the client population served by the transitional shelter care facility; and
 - (2) The plan must be appropriate for the staff qualifications and staff emergency intervention training.
 - (3) The plan must incorporate trauma informed concepts and practices, as described in Section 86678.2, where applicable.
- (b) The emergency intervention plan is to be included in the transitional shelter care facility statement.
- (c) In addition to Section 86622, the written emergency intervention plan must be submitted to, and approved by the Department prior to implementation. The plan must include the requirements specified in Sections 86722(d) through (h).
- (d) General Provisions:
 - (1) Name(s) of facility personnel including security personnel trained to use emergency interventions.
 - (2) A description of the continuum of emergency interventions, commencing with early interventions, specifying the emergency intervention techniques to be utilized. For each type of emergency intervention, the plan must include the following:
 - (A) A description of each emergency intervention technique to be used.
 - (B) Maximum time limits for each emergency intervention technique, not to exceed maximum time limits as specified in Sections 86722(f)(2) and 86700(b)(4).
 - (C) In what situations each emergency intervention technique is not to be used.
 - (D) Expected outcome, benefits to the child.
 - (3) A statement specifying what emergency interventions will never be used.
 - (4) A description of the circumstances and the types of behaviors that may require the use of emergency intervention.
 - (5) Procedures for using age and size appropriate emergency intervention techniques.
 - (6) Procedures for using emergency interventions if more than one child requires the use of emergency intervention at the same time.

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- (7) Procedures for ensuring care and supervision is maintained in the facility when all available facility personnel are required for the use of emergency interventions.
 - (8) Procedures for re-integrating the child back into the facility routine after an emergency intervention technique has been used.
 - (9) Criteria for assessing when an emergency intervention plan needs to be modified or terminated.
 - (10) Criteria for assessing when the facility does not have adequate resources to meet the needs of a specific child.
- (e) The manual restraint plan is to be included as a component of the emergency intervention plan. If the facility will not use manual restraints, the plan must include the following:
- (1) Procedures for responding to a crisis situation to prevent a child who is exhibiting assaultive behavior from injuring or endangering themselves or others.
 - (A) The external community resources to be used to assist facility personnel must be identified and listed in the plan.
 - (B) The facility's policies and procedures concerning when and how to involve law enforcement in response to an incident involving a child residing in the facility must be included in the plan.
 - 1. The facility's policies and procedures shall meet the minimum criteria for protocols outlining the circumstances under which staff may call law enforcement in response to the conduct of a child residing at the facility as specified in Health and Safety Code section 1531.6(b).
 - (i) In addition to the facility's policies and procedures meeting the required criteria referenced in subparagraph (e)(1)(B), the facility's policies and procedures shall address emergency situations where there is immediate risk of serious harm to a child or others as required in Health and Safety Code section 1531.6(b)(4).
 - 2. The facility shall maintain a list of specified staff supervisors who may approve a call to law enforcement for the conduct of a child residing in the facility, as required in Health and Safety Code section 1531.6(b)(3), and the list shall be kept on file at the facility.
 - (C) Nothing in Section 86722(e)(1)(A) or (B) shall be interpreted to require a licensee to take any action that would endanger, or to prevent a licensee from taking any action that would protect, the health and safety of children in care, staff, or others.
- (f) The manual restraint plan is to be included as a component of the emergency intervention plan. If the facility will use, or it is reasonably foreseeable that the facility will use, manual restraints, the plan must include the following:

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- (1) Procedures for ensuring a child's safety when a manual restraint is being used including, but not limited to, the titles of facility personnel responsible for checking the child's breathing and circulation.
 - (A) Procedures for determining when a medical examination is needed during a manual restraint, as specified in Section 86769.

- (2) Procedures for ensuring that:
 - (a) the amount of time a child is restrained is limited to the amount of time when the child is presenting an immediate danger to himself/herself or others;
 - (b) restraints will not cause injury to the child. Such procedures must include provisions that ensure the following:
 - (A) A child does not remain in a manual restraint for more than 15 consecutive minutes, unless written approval to continue the restraint after the initial 15 minutes is obtained from the administrator or administrator's designee.
 1. The individual who approves the continuation of restraint must be a person other than the individual who restrained the child.
 2. The individual who visually checks the child after 15 minutes to ensure the child is not injured and that the child's personal needs, such as access to toilet facilities, are being met, must be a person other than the individual restraining the child.
 3. After the initial 15 minutes, the individual who approves the continuation of the manual restraint observes the child's behavior while the child is being restrained to determine whether continued use of the manual restraint is justified.
 4. Written approval to continue a manual restraint beyond 15 consecutive minutes must be documented in the child's record.
 - (B) A child does not remain in a manual restraint for more than 30 consecutive minutes in a 24-hour period unless the child is still presenting a danger to themselves or others and written approval to continue the restraint after the initial 30 minutes is obtained from the administrator or administrator's designee and the facility social work staff. If facility social work staff are not onsite to provide written approval, the facility may obtain verbal approval. Written approval must be obtained within 24 hours of the verbal approval.
 1. The individual who approves the continuation of the restraint must be a person other than the individual who restrained the child.
 2. The child is visually checked after the initial 30 minutes, by persons other than the individuals who restrained the child, to ensure the child is not injured and that the child's personal needs, such as access to toilet facilities, are being met.
 3. After the initial 30 minutes, the individuals who approve the continuation of the restraint observe the child's behavior while the child is being restrained to determine whether continued use of the manual restraint is justified.
 4. Written approval to continue the use of the manual restraint must be

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documented in the child's record.

- (C) After the initial 30 minutes, a child placed in a manual restraint must be visually checked every 15 minutes until the manual restraint is terminated, to ensure the child is not injured, that personal needs are being met, and that the continued use of the manual restraint is justified.
 - 1. This visual check must be documented in the child's record.
 - 2. The person conducting the check must not be the individual who restrained the child.
 - (D) After the initial 30 minutes, and at 30 minute intervals, if the child is still presenting a danger to themselves or others, the administrator or administrator's designee and facility social work staff must evaluate whether the facility has adequate resources to meet the child's needs.
 - (E) Manual restraints used in excess of 60 consecutive minutes must be approved, every 30 minutes, in writing by the administrator or administrator's designee, facility social work staff and the child's authorized representative. If the child's authorized representative is not available to provide written approval, the facility may obtain verbal approval. Written approval must be obtained within 24 hours of the verbal approval. The continued use of a manual restraint shall be documented in the child's record.
 - (F) Manual restraints must not exceed four (4) cumulative hours in a 24-hour period.
 - 1. If a child continues to present an immediate danger of injuring or endangering themselves or others, the facility must inform the child's authorized representative; and contact community emergency services to determine whether or not the child should be removed from the facility.
 - (G) If a manual restraint exceeds two (2) hours, at regular intervals not exceeding two (2) hours, the child must be allowed to access liquids, meals and toileting and range of motion exercises.
 - (H) Staff must make provisions for responding promptly and appropriately to a child's request for services and assistance and repositioning the child when appropriate.
- (3) Procedures for documenting each use of manual restraints in the child's record.
 - (4) Procedures for reviewing each use of manual restraints with the child and authorized representative or parent.

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Health and Safety Code section 1531.6 states in part:

- (a) Each group home, transitional shelter care facility, and short-term residential therapeutic program, as defined in Section 1502, and each temporary shelter care facility as defined in subdivision (c) of Section 1530.8, shall develop protocols that dictate the circumstances under

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which law enforcement may be contacted in response to the conduct of a child residing at the facility.

- (b) The protocols shall, at a minimum, do all of the following:
 - (1) Employ trauma-informed and evidence-based de-escalation and intervention techniques when staff is responding to the behavior of a child residing in the facility.
 - (2) Require staff to undergo annual training on the facility’s protocols developed pursuant to this section.
 - (3) Specify that contacting law enforcement shall only be used as a last resort once all other de-escalation and intervention techniques have been exhausted, and only upon approval of a staff supervisor.
 - (4) Address contacting law enforcement in an emergency situation if there is an immediate risk of serious harm to a child or others.
 - (5) Identify and describe collaborative relationships with community-based service organizations that provide culturally relevant and trauma-informed services to youth served by the facility to prevent, or as an alternative to, arrest, detention, and incarceration for system-impacted youth.

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- (5) Procedures for accessing community emergency services, including, but not limited to, law enforcement, if the use of emergency interventions is not effective or appropriate.
 - (A) The facility’s policies and procedures concerning when and how to involve law enforcement in response to an incident at the facility must be included in the plan.
 - 1. The facility’s policies and procedures shall meet the minimum criteria for protocols outlining the circumstances under which staff may call law enforcement in response to the conduct of a child residing at the facility as specified in Health and Safety Code section 1531.6(b).
 - (i) In addition to the facility’s policies and procedures meeting the required criteria referenced in subparagraph (e)(1)(B), the facility’s policies and procedures shall address emergency situations where there is immediate risk of serious harm to a child or others as required in Health and Safety Code section 1531.6(b)(4).
 - 2. The facility shall maintain a list of specified staff supervisors who may approve a call to law enforcement for the conduct of a child residing in the facility, as required in Health and Safety Code section 1531.6(b)(3), and the list shall be kept on file at the facility.
 - (B) Nothing in Section 86722(f)(5)(A) shall be interpreted to require a licensee to take any action that would endanger, or to prevent a licensee from taking any action that would protect, the health and safety of children in care, staff, or others.

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- (6) Procedures for requiring a licensed professional, as defined in Section 86601(1)(3), to approve the initiation and continued use of manual restraints, if the licensee chooses to require this authorization.
- (g) The Emergency Intervention Staff Training Plan is to be included as a component of the emergency intervention plan. The plan must include the following:
 - (1) The type, title, and a brief description of the training that all facility personnel have completed.
 - (2) Training requirements for new personnel.
 - (3) The ongoing training required for existing personnel.
 - (4) Training curriculum as specified in Section 86765(b).
 - (5) Training schedule which identifies when staff training will be offered and provided.
 - (6) The name(s) and qualification(s) of the instructor(s) who will provide the training.
- (h) Procedures for an internal biannual review of the use of emergency interventions must be developed. Such procedures must include at least the following:
 - (1) A review is to be conducted by the administrator or the administrator's designee.
 - (2) Analysis of patterns/trends of use of emergency interventions in the previous six (6) month period, based on:
 - (A) Review of all records related to the use of emergency interventions for accuracy and completeness.
 - (B) Review of the use, effectiveness and duration of each emergency intervention including a determination of the effectiveness and appropriateness of the intervention technique used in each situation.
 - (C) Review of the frequency of emergency interventions in the previous six (6) month period.
 - (3) The biannual review and corrective action plan must be submitted to the Department no later than the fifth (5th) day of the month following the review.
 - (4) The licensee shall provide a copy of the biannual review and corrective action plan, if applicable, to the authorized representative upon request.
- (i) In addition to the requirements in Section 86668, the admission agreement must include a written statement regarding the type(s) of emergency interventions the licensee has been approved to use.
 - (1) The facility's policy regarding the use of emergency intervention must be reviewed with the child and the authorized representative at the time of admission.

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- (A) The licensee shall provide a copy of the approved emergency intervention plan to the authorized representative, upon request.

- (j) Only trained facility personnel as specified in Section 86765 will be allowed to use emergency interventions on children.

- (k) Prior to using the emergency intervention plan, the licensee's Board of Directors must approve the plan, and any subsequent amendments. The approval must be documented in the minutes of the Board of Directors meeting. Each board member must receive a copy of the plan prior to its use and any modifications to it.

- (l) The Department must review the emergency intervention plan, including any amendments, and notify the licensee within 30 days of the receipt of the plan, whether the plan has been approved or denied or if additional information is needed.
 - (1) If the plan is disapproved, the licensee may appeal the decision using the procedures specified in Section 86640(d).

- (m) If the Department determines that the licensee has not complied with the emergency intervention plan requirements as specified in Sections 86722(a) through (k), the licensee must discontinue the use of emergency interventions immediately upon written notice of deficiency by the Department.

- (n) The licensee may retain security services solely for the protection of children placed in the licensed facility and staff, subject to the following conditions:
 - (1) Security staff must comply with the fingerprint requirements contained in Section 86619.
 - (2) Security staff may not be stationed or located within the indoor or outdoor areas of the facility. Security staff may be located in a designated entry room, or on or about the outside perimeter of the facility.
 - (3) Security staff shall not perform child care or supervision activities.
 - (4) Security staff shall not engage in behavior management of children in care.
 - (5) In accordance with the facilities' emergency intervention plan and training requirements which shall include calling 911 for law enforcement assistance, security staff may participate in emergency interventions involving children in care as a last resort to protect the health and safety of children and staff, except that security staff shall not use or possess lethal weapons such as a firearm during performance of any emergency intervention involving a child in care.
 - (6) Security staff may not inspect the person or belongings of a child in care unless reasonable cause exists based on observable factors as necessary to protect children in care.

- (o) Audio and Video surveillance is prohibited in the facility except as provided below:
 - (1) Audio and Video surveillance shall be allowed in any entry room of the facility and in and around the outside perimeter of the facility.

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86722.1 PROTECTIVE SEPARATION ROOM

- (a) In addition to Section 86722, any licensee with an approved emergency intervention plan which includes the use of a protective separation room, must comply with the following requirements:
- (1) No protective separation room may be used for another purpose, e.g. bedroom, bathroom, storage.
 - (2) No protective separation room may be used without a fire clearance from the local fire authority.
 - (A) The request for the fire clearance must be made through and maintained by the Department.
 - (3) No protective separation room may be used without prior inspection and approval by the Department.
 - (4) Protective separation rooms must be safe and free of hazards such as objects or fixtures which can be broken or used by a child to inflict injury to themselves or others.
 - (5) Procedures regarding the use of the protective separation room must be included in the manual restraint plan component of the emergency intervention plan. These procedures must include the following to ensure a child's safety when placed in a protective separation room:
 - (A) Facility personnel must maintain direct visual contact with the child at all times, and be free from other responsibilities, to ensure the child's safety while in the room.
 1. Facility personnel must remain in the room, when necessary, to prevent injury to the child.
 - (B) Facility personnel must ensure that there are no objects in the child's possession that could be used to inflict injury to himself/herself or others while in the protective separation room.
 - (C) No more than one child shall be placed in the protective separation room at any one time.
 - (D) Physical abuse, corporal punishment, threats or prohibited restraints may not be used as a method for placing a child in the protective separation room.
 - (6) A child placed in a protective separation room may not be deprived of eating, sleeping, toileting or other basic daily living functions.
 - (7) Exiting from a protective separation room may not be prevented by the use of locking or jamming devices.
 - (A) The door may be held shut in a manner that allows for immediate release upon removal of a staff member's foot, hand, and/or body.

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86722.2 RUNAWAY PLAN

- (a) The licensee must develop and maintain a written runaway plan that describes how the facility will respond to the following:
 - (1) Runaway child(ren).
 - (2) Child(ren) outside of the facility property without permission, but within view of the facility personnel.
- (b) The runaway plan must be appropriate for the age, size, emotional, behavioral and developmental level of the child(ren).
- (c) The runaway plan must include the following:
 - (1) Time frames for determining when a child is absent without permission.
 - (2) Continuum of interventions.
 - (3) Actions taken by facility personnel to locate the child.
 - (4) Staff training plan, to include non-physical interventions, strategies to de-escalate a situation.
 - (5) Plan to include the involvement of law enforcement, when appropriate, consistent with the policies and procedures specified in Section 86722(e)(1)(B) or Section 86722(f)(5)(A).
 - (6) Plan to notify the child's authorized representative.
- (d) The runaway plan must be included in the transitional shelter care facility program statement.
- (e) The runaway plan described in Section 86722.2(a), must be provided to, and discussed with each child and their authorized representative at the time of admission.
 - (1) If during the discussion, it is determined that the child has a history of running away from placement, then the following must occur:
 - (A) The facility social work personnel and the child's authorized representative must develop an individualized plan for that particular child.
 - (B) The individualized plan must be maintained in the child's record.
- (f) Manual restraints must only be used if the facility has an approved manual restraint plan, in accordance with Section 86722.
- (g) The licensee is prohibited from preventing a child from leaving the facility by locking the child in a room or any part of the facility.

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Article 3. Continuing Requirements

86761 DOCUMENTATION AND REPORTING REQUIREMENTS

- (a) Each use of manual restraints must be reported to the Department and the child's authorized representative by telephone no later than the next working day following the incident. A written incident report must be submitted to the Department within seven (7) days, as required in Section 86661.
 - (1) If a child is restrained more than once in a 24-hour period, each use of manual restraints must be reported.
- (b) Any report of the use of manual restraints must be reviewed, for accuracy and completeness, and signed by the administrator or administrator's designee no later than the next working day following the incident.
- (c) A copy of the written incident report must be maintained in the child's record.
- (d) The information required in Section 86761(a), must be documented immediately following the use of manual restraints or no later than the end of the working shift of the staff member(s) who participated in the manual restraint.
- (e) The child's record must be available for review by the Department, as required in Section 86670.
- (f) The licensee must maintain a monthly log of each use of manual restraints. The log must include:
 - (1) Name of each child.
 - (2) Date and time of the intervention.
 - (3) Duration of the intervention.
 - (4) Name(s) of facility staff member(s) who participated in the manual restraint.
 - (5) Description of the intervention and type used.
 - (6) Result of licensee review.
- (g) The monthly log must be available for review, and subject to reproduction by the Department upon request during normal business hours.

86765 EMERGENCY INTERVENTION STAFF TRAINING

- (a) No facility personnel must use emergency intervention techniques on a child unless the training instructor has certified in writing that the facility personnel have successfully completed the emergency intervention training required in Section 86765(b).
 - (1) All new and existing facility personnel who use or participate in emergency interventions, as well as the facility administrator and the administrator's designee must complete the training.

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- (b) The emergency intervention training curriculum must address the following areas:
 - (1) Techniques of group and individual behavior management, including, but not limited to, crisis prevention, precipitating factors leading to assaultive behavior and crisis intervention.
 - (2) Trauma-informed and evidence-based methods of de-escalating volatile situations, including non-physical intervention techniques such as crisis communication, evasive techniques, alternative behavior.
 - (3) Alternative methods of handling aggressive and assaultive behavior.
 - (4) If the licensee chooses to use manual restraints, the physical techniques of applying manual restraints in a safe and effective manner ranging from the least to most restrictive type(s) of restraints including, but not limited to, escorting, wall restraint, and prone containment.
 - (5) Techniques for returning the child to the planned activity following completion of the emergency intervention.
 - (6) The training must include a written and hands-on competency test as part of the training program.
 - (7) The facility's policies and procedures concerning when and how to involve law enforcement in response to an incident involving a child residing in the facility.
- (c) The training must be provided by an individual who holds a valid instructor certificate from a program of managing assaultive behavior, that is consistent with regulations and operating standards.
- (d) The licensee must maintain a written record of the facility staff training.
 - (1) Documentation of training received must be maintained in the personnel record for each staff member and must include:
 - (A) Dates, hours, and description of the training completed.
 - (B) Name and training certificate of the instructor who provided the training.
 - (C) Certification from the instructor that the staff member has successfully completed the competency test.
 - (2) The staff training record must be made available for review by the Department upon request.
- (e) Facility personnel must receive on-going training to maintain certification.
 - (1) Ongoing training shall include annual training on the facility's procedures concerning when and how to involve law enforcement as specified in Section 86722(e)(1)(B) if a facility will not use manual restraints.

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- (2) Ongoing training shall include annual training on the facility's procedures concerning when and how to involve law enforcement as specified in Section 86722(f)(5)(A) if a facility will use, or it is reasonably foreseeable that the facility will use, manual restraints.
- (f) When an inappropriate manual restraint technique is used during an emergency intervention, the licensee must develop a corrective action plan, and as part of the plan may require facility personnel to repeat the appropriate emergency intervention training.

86765.5 STAFFING REQUIREMENTS

- (a) The administrator or administrator's designee must oversee the emergency intervention program.
- (b) All facility personnel who will use emergency interventions must be trained in the appropriate emergency intervention techniques approved to be used by the licensee.
- (c) A minimum of two (2) trained facility personnel must be available and responsible for using each manual restraint if the restraint technique requires the use of two people.
- (d) Additional facility personnel must be available to supervise the other children in placement when the trained facility personnel are required to use manual restraints as specified in Section 86722(d)(7).

86768.3 REVIEW OF MANUAL RESTRAINT USE

- (a) The administrator or administrator's designee must discuss the use of the manual restraints with the facility personnel involved no later than the next working day following the incident.
- (b) The administrator or administrator's designee must determine whether the emergency intervention action taken by the staff member(s) was consistent with the emergency intervention plan, and document the findings in the child's record and facility monthly log as specified in Section 86761. The manual restraint review must evaluate the following:
 - (1) Did the staff member(s) attempt to de-escalate the situation. What interventions were utilized. Did the staff member(s) attempt at least two non-physical interventions.
 - (A) If the use of any de-escalation technique causes an escalation of the child's behavior, the use of the technique must be evaluated for its effectiveness. De-escalation techniques which are ineffective or counter-productive must not be used.
 - (2) Were manual restraints utilized only after less restrictive techniques were utilized and proven to be unsuccessful.
 - (3) Was the child restrained for the minimum amount of time, limited to when the child is presenting an immediate danger to themselves or others.

86769 MEDICAL EXAMINATION

- (a) The administrator or the social work staff shall be responsible for obtaining a physical examination of the child during or after an incidence of emergency intervention when it is determined that:

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- (1) There is physical injury to a child, or
 - (2) There is a suspected injury to a child.
- (b) The administrator or the social work supervisor must see and talk with the child before a determination can be made.
- (c) If no physical examination is necessary, this decision must be documented in the child's record.
- (d) Any post emergency intervention injury or suspected injury observed by facility personnel, or any complaint of injury reported to facility personnel must be reported immediately to the administrator or social work staff.

SUBCHAPTER 2: CARE FOR CHILDREN UNDER THE AGE OF SIX YEARS

Article 1. Requirements for Children Under the Age of Six Years

86872.1 DISCIPLINE POLICIES AND PROCEDURES

- (a) In addition to Section 86672.1, the following shall apply.
- (b) Discipline for children under the age of six years shall be education-based, consistent among caregivers, and include the following:
 - (1) Redirecting the child's attention.
 - (2) Focusing on the rule to learn and the reason for the rule.
 - (3) Providing acceptable alternatives.
 - (4) Providing time away from the precipitating situation.
 - (5) Arranging the environment to allow safe testing of limits.
- (c) Discipline shall not include confinement to cribs, high chairs, playpens or other similar furniture or equipment.

86874 TRANSPORTATION

- (a) In addition to Section 86674, the following shall apply:
- (b) The licensee or designee shall secure children in the vehicle in an appropriate restraint device according to the California Vehicle Code and, if applicable, the manufacturers' instructions for the infant car seat(s) or other appropriate restraint device.
 - (1) The licensee or designee shall use other restraint or protective devices that are required due to the child's disabilities or physical and medical condition.
 - (2) The licensee or designee shall secure children in the vehicle so that the child is not in danger of being injured by the vehicle's airbag.
- (c) No child under six years of age shall be left unattended in a vehicle.

86876 FOOD SERVICE

- (a) In addition to Section 86676, the following shall apply to a facility serving children under six years of age.
- (b) The facility shall not serve honey or corn syrup to any infant.

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- (c) The staff shall use appropriate seating equipment while feeding children under the age of six years.
 - (1) Children under the age of six years who are unable to sit unassisted shall be held by the child care worker.
 - (2) If staff use high chairs or feeding tables, the high chairs or feeding tables shall have the following:
 - (A) A wide base.
 - (B) A safety strap that the child care worker shall properly secure around the child or a tray that the child care worker shall properly latch on both sides.
 - (3) Child care workers shall not allow an infant to pull on, climb on, climb into, or stand up in a high chair.
 - (4) Children shall have age and developmentally appropriate cups, utensils, and other dishes.
- (d) There shall be an individual feeding plan for each infant that includes the following:
 - (1) Instructions that address:
 - (A) The feeding schedule.
 - (B) The kind of milk or formula and types of solid foods.
 - (C) Food consistency.
 - (D) Food allergies.
- (e) Staff shall feed an infant according to the individual plan.
 - (1) The child care worker shall hold the infant while bottle-feeding, unless it is necessary to protect the infant from overstimulation during mealtimes.
 - (2) If an infant holds the bottle, it shall be unbreakable and the child shall not be allowed to carry a bottle while ambulating.
 - (3) At no time shall a bottle be propped for an infant.
- (f) Bottles and nipples shall be sterilized using any of the following methods after each use:
 - (1) Boiled for a minimum of five minutes and air dried.
 - (2) Washed and sterilized using a commercial bottle sterilizer according to the manufacturer's directions or a dishwasher.

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86877 PERSONAL SERVICES

- (a) In addition to Section 86677, the following shall apply to a facility serving children under six years of age.
- (b) The staff shall keep children under the age of six years clean and dry at all times.
 - (1) When the minor parent is the primary caretaker of their child, the staff shall supervise the minor parent to ensure that their child is clean and dry.
- (c) The staff shall wash their hands with soap and water before and after each diaper change or toilet training session.
 - (1) Staff shall use only soap in a dispenser, either liquid or powder.
 - (2) Staff shall use only disposable paper towels in an appropriate holder or dispenser or an air drying machine, for hand drying.
- (d) Staff shall diaper each infant on a changing table, or on a changing pad placed on the floor, which meets the following specifications:
 - (1) Has a padded surface no less than one inch thick, covered with washable vinyl or plastic.
 - (2) Is in good repair and safe condition.
 - (3) Is located outside the kitchen/food preparation area.
 - (4) Is disinfected after each use, even when disposable covers are used.
 - (5) If disposable paper towels or similar materials cover infant changing tables or pads, they shall be discarded following each diaper change.
 - (6) Changing tables shall have raised sides at least three inches high.
- (e) (1) If children use potty chairs, staff shall assure the following:
 - (A) Potty chairs are placed on the floor and used according to the manufacturer's instructions.
 - (B) Contents are emptied into a flushing toilet promptly after each use.
 - (C) The surfaces are thoroughly cleaned and disinfected after each use.
 - (D) Children do not play with potty chairs.
 - (2) Staff shall instruct and help children in handwashing after use of the toilet.
- (f) Sleeping arrangements shall meet the following requirements:
 - (1) Only one child at a time shall occupy a crib, floor mat, cot, or bed.

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86878 RESPONSIBILITY FOR PROVIDING CARE AND SUPERVISION

- (a) In addition, the following shall apply to a facility serving children under six years of age who are placed in the facility.
- (b) A qualified staff person shall supervise at all times a child under the age of six years of age.
- (c) Each infant shall be constantly supervised and under direct visual observation and supervision by a staff person at all times. Under no circumstances shall any infant be left unattended.

86878.1 SANITATION REQUIREMENTS

- (a) For a facility serving children under the six years of age the following shall apply:
 - (b) (1) Thoroughly wash bedding, towels, and washcloths used on or by infants daily or more often, if necessary.
 - (2) Thoroughly wash toys.
 - (A) Clean and disinfect daily all frequently touched toys in rooms occupied by diapered children.
 - (B) Clean and disinfect weekly, and when soiled, toys in rooms occupied by non-diapered children.
 - (3) Wipe noses with disposable, one-use tissues.
- (c) Staff shall clean those areas used by infant care staff or to which infants have access as follows:
 - (1) Vacuum or sweep, and mop with a disinfectant the uncarpeted floors at least daily or more often if soiled.
 - (2) Vacuum carpeted floors and large unwashable throw rugs at least daily and clean them at least every six months or more often if soiled.
 - (3) Shake or vacuum small washable rugs at least daily and wash them at least weekly or more often if soiled.
 - (4) Wash walls and portable partitions with a disinfectant at least weekly or more often if soiled.
 - (5) Wash and disinfect high chairs, feeding tables, food preparation areas, bathtubs, changing areas, toilets, and potty chairs at least daily.
 - (6) Wash and disinfect at least daily, or more often if soiled, objects mouthed by infants, such as but not limited to, toys and blankets.
 - (7) Use washing/disinfecting solutions as follows:
 - (A) Freshly prepare it each day, using 1/4 cup of bleach per gallon of water, or

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- (B) Use commercial disinfecting solutions according to label directions.
- (d) The bedding of infants shall meet the following standards:
- (1) Each infant shall have bedding replaced when wet or soiled.
 - (2) Staff shall wipe crib mattresses with a detergent/disinfectant daily and when soiled or wet.
 - (3) Staff shall place soiled bedding in a suitable container, inaccessible to children.
- (e) Staff shall handle soiled disposable diapers as follows:
- (1) Discard them as recommended on the packaging, or
 - (2) Place them in an airtight container for daily disposal outside the facility and
 - (3) Sanitize any soiled diaper containers daily.
- (f) Staff shall handle soiled cloth diapers as follows:
- (1) Place them in an airtight container.
 - (2) Rinse, wash, and sanitize them daily.
 - (3) If the facility uses a diaper service, staff shall place the diapers in the diaper service company's container for pickup, as instructed by the diaper service.
- (g) After each diaper change, staff shall wash and disinfect soiled items and surfaces around the diaper changing area, including but not limited to the following:
- (1) Walls and floors surrounding the immediate diaper changing area.
 - (2) Dispensers for talc, lotion, soap and paper towels.
 - (3) Countertops, sinks, drawers and cabinets.
 - (4) Sinks used to wash infants or to rinse soiled clothing or diapers.

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Article 2. Physical Environment

86887.3 INDOOR ACTIVITY SPACE

- (a) In addition to Section 86687.3, the following shall apply to a facility serving children under six years of age.
- (b) The licensee shall equip the indoor activity space with a variety of equipment, materials, and toys that meet the following requirements:
 - (1) Are appropriate to the developmental needs of the children.
 - (2) Are maintained in good condition.
 - (3) Are sufficient in quantity to allow children to fully participate in planned activities and have opportunities for flexible play.
 - (4) Are stored safely in the facility.
- (c) The floors of all rooms shall have a surface that is safe and clean.

86888 FIXTURES, FURNITURE, EQUIPMENT, AND SUPPLIES

- (a) In addition to Section 86688, the following shall apply to a facility serving children under six years of age.
- (b) The licensee shall provide safe fixtures, furniture, equipment, supplies, and toys.
 - (1) They shall be free from toxic materials or substances.
 - (2) They shall be in good condition, free of sharp, loose, or pointed parts.
 - (3) Baby walkers are prohibited in accordance with Health and Safety Code Sections 1596.846.
- (c) The licensee shall provide furniture which is age appropriate in type, height, and size as follows:
 - (1) Tables and chairs.
 - (2) High chairs, low wheeled feeding tables, or other furniture used for feeding an infant which meets the following requirements:
 - (A) Has broad base legs.
 - (B) Has seats and backrests made of washable, moisture resistant material.
 - (C) Has a safety strap and/or tray to secure a seated infant.
 - (3) Changing tables or changing pads.

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- (4) For each infant who is unable to climb from a crib, a standard crib that meets the following requirements:
 - (A) All cribs shall meet the United States Consumer Product Safety Commission safety standards.
 - (B) Spaces between the crib slats are no more than 2 3/8 inches.
 - (C) Crib mattresses are covered with moisture resistant material.
 - (D) The crib and mattress are in a safe condition with no exposed foam, batting, or coils.
 - (E) Mattress shall be firm and covered with a fitted sheet that is appropriate to the mattress size, fits tightly on the mattress, and overlaps the underside of the mattress so it cannot be dislodged.
 - (F) When an infant is in the crib, the mattress is at its lowest position.
 - (G) Is arranged so that staff can see the child.
 - (H) Allows a child to stand upright.
 - (I) Are not stacked or tiered with other cribs.
- (5) An age-appropriate bed shall be provided for each child who can climb from a crib.
- (d) The licensee shall provide equipment as follows:
 - (1) Equipment purchased already assembled shall not be modified.
 - (2) Toy containers shall meet the following requirements:
 - (A) Boxes or chests shall not have lids or the hardware used to hinge lids.
 - (B) All edges and corners shall be rounded and padded.
 - (C) The container shall be well ventilated.
 - (D) The container shall not be lockable.
 - (E) The container shall be in good repair and safe condition.
 - (F) Metal toy boxes shall not have rough or sharp edges and wooden toy boxes shall not have splinters and other rough areas.
- (e) The licensee shall provide the following fixtures and/or supplies:
 - (1) Readily available drinking water from a noncontaminating fixture.
 - (A) Children shall be free to drink water as they wish.

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- (B) The facility may use bottled water or portable containers if (1) the water and containers are free of contamination, and (2) bottled water containers are secured to prevent tipping and breaking.
 - (D) All water for drinking shall be potable as defined in California Administrative Code, Title 24, Part 5.
- (2) Pacifiers that have a shield or guard large enough so that infants cannot choke on them.
- (f) The licensee shall provide toys that meet the following requirements:
- (1) Are appropriate to the developmental needs of the children.
 - (2) Are sufficient in quantity to avoid excessive competition and long waits by the children.
 - (3) Are free from sharp points, edges, or splinters.
 - (4) Are made of parts too large to be swallowed.
 - (A) Any rattles are large enough so that they cannot become lodged in an infant's throat and constructed so that they will not separate into small pieces.
 - (5) Are sufficient in variety to enhance the following:
 - (A) Intellectual and creative development.
 - (B) Social development.
 - (C) Auditory development.
 - (D) Visual development.
 - (E) Gross and fine motor development.
 - (6) Are clean and safe for the children.
- (g) The licensee shall arrange furniture and equipment as follows:
- (1) So that no exit is blocked.
 - (A) Placement of cribs, mats or cots, and beds shall not hinder entrance to or exit from the sleeping area.
 - (2) So that toilets, potty chairs, and handwashing sinks for children are near indoor and outdoor activity spaces.
 - (3) So there is a walkway and workspace between the sleeping furniture (cribs, mats or cots, and beds).

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- (A) Staff must be able to reach each child without having to step or reach over any other child.