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BECOMING ARF ADMINISTRATOR

Adult Residential Facility Administrator Certification (ages 18-59)

This course prepares you to operate an Adult Residential Facility in California for clients ages 18 -59 (not elderly). Course fees are non refundable and non transferable.

Make Up Session

If you are more than 15 minutes late you will have to arranged for a makeup session. Students, who are unable to attend a class session, may arrange to attend an upcoming class. You may view the course schedule here www.arf35.com.

Initial Administrator Test Protocol

Within 60 days upon completion of the 35 hour course, you must take the California State examination by registering for the test online here:

<http://www.cald.ca.gov/res/pdf/AdminExamInfo.pdf>

Bring the following items with you when you take the test: Proof of identification (ID) such as a valid California driver's license, DMV photograph, or military ID, and a copy of your certificate of completion from Smart Seminars.

Southern California Test Sites.

Culver City 6167 Bristol Parkway #210 Culver City 90230	310.568.1808 you must register online for the test
Monterey Park 1000 Corporate Center Dr Monterey Park 91754	323.981.3300 you must register online for the test
Orange 770 The City Drive Suite Orange 92868	714.703.2840 you must register online for the test
Riverside 3737 MainSt #200 Riverside, 92501	530.895.5033 you must register online for the test
San Diego 7557 Metropolitan Dr Sacramento 95833	619.767.2300

The Test

You must attain at least a score of 70% to pass. The test has 50 questions. You must get 35 correct answers or no more than 15 wrong answers.

This workbook has over 250 practice questions to assist you in studying for the test. Each question is referenced to the content in the workbook. Practice questions are not a substitute for studying the material.

You may take the test no more than three times during the 60 day period.

Test Results: <http://cclid.ca.gov/res/pdf/HowToCheckTestResults.pdf>

Once you pass the test you will receive the Initial Administrator Application from the ARF Administrator Certification section. You have thirty days to submit form LIC 9214 <http://cclid.ca.gov/res/pdf/LIC9214.pdf> . Items to include in your application:

1. \$100.00 fee
2. Copy of Certificate of Completion from this class
3. Copy of the CCL Department congratulatory letter verifying your passing test score.
4. Choose when you would like your certification to expire. Either 2 years from date of issue or on your birthday on the second calendar year following certification. If you choose your birthday your certificate may expire less than two years from when you receive it.

Remember you must collect 40 hours of continuing education within 2 years of the date that is one your certificate.

Criminal Record Clearance

ARF administrator applicants must obtain a criminal record clearance from the DOJ. To schedule your appointment by phone call 800.315.4507 and complete the <http://www.dss.cahwnet.gov/forms/english/LIC9163.pdf> . Or schedule your live scan appointment here <http://www.l1enrollment.com/state/?st=ca> Either way you will need the following information to schedule your appointment:

ORI Number: A0448

OCA Number:

Facility License

The license is separate from your administrator certification. The license is attached to the property and the administrator certificate is attached to you. You may download [CCL form LIC 281](#) to complete your ARF Facility License Application.

Regional Center

Each Regional Center requires you attend a Regional Center Service Orientation in order to become vendored as a residential care provider. Click [here](#) to view a list of links to the 21 Regional Centers in California. Regional Center requires you to write a letter of intent to become a vendor. Learn more about Regional Center by reviewing the chapter Residents and Regional Center.

Veterans

Many residential care providers wish to work with returning veterans from Iraq and Afghanistan. To become a provider to work with homeless veterans click [here](#). The VA will provide funds for the home if you are a non profit. You may also contact the Social Service Department of the Veterans Hospital nearest you.

Mental Health Clients

Many individuals wish to operate a Residential Care Facility for individuals who suffer from severe mental illness. These Adult Residential Care facilities are called "Board and Cares" and may have as many as 100 or 200 beds and are located on a commercial property. Reimbursement is usually the SSI amount the individual receives which is approximately \$1000.00. You must market your board and care to psychiatric hospitals, social workers, psychiatrists, and liaison with the County Department of Mental Health. Some counties offer contracts and supplemental funding. Click [here](#) to view a list of Mental Health Departments in California counties.

RESIDENTS AND REGIONAL CENTER

Residents and Regional Center

There are two major groups of clients that live in Adult Residential Facilities: The Developmentally Disabled and Mental Health Clients. Another emerging population are individuals with traumatic brain injury. Many of these individuals with brain injury are returning veterans from Iraq and Afghanistan.

Mental Health clients suffer from psychiatric disorders such as schizophrenia, bipolar disorder and depression; they are usually on medication. Mental health clients pay for their stay in the facility through their Social Security disability income. This amounts to approximately \$1000.00 per month. Mental Health clients are not managed by the Regional Center. To be successful, you must market your facility to hospitals, psychiatrists and others in the mental health community. Most residential programs for mental health clients are large commercial facilities with over 100 beds.

Mental Health services in California are regulated by the Department of Mental Health.

Developmentally Disabled

Services for developmentally disabled individuals are delivered through a network of 21 Regional Centers in California. These 21 regional Centers are funded and regulated by Title 17 through the California Department of Developmental Services. Each Regional Center covers a specific geographic region known as a catchment area. Developmentally Disabled individuals typically have mental retardation, autism or a seizure disorder and function at various levels of independence. Each Regional Center client has an Individual Program Plan that specifies the goals the client is working on. A typical goal might be “the consumer will learn to use city bus services,” or

“...reduce instances of wandering,” or “...will take a community college class.”

Becoming a Vendor with Regional Center

Working with Regional Center clients involves a considerable amount of work and commitment. Because of the unique needs of developmentally disabled individuals, Regional Center requires that the Administrator of the facility have experience working with the population. Each Regional Center interprets the experience requirement differently. Some Regional Centers require direct experience in a residential setting. Other Regional Centers may consider related experience as a nurse or health professional in evaluating experience. Many people satisfy the experience requirement by working in a residential setting on a part time basis. You can search for ARF facilities in California by clicking on this link. You may then contact homes to see if you can obtain a position working as a staff to satisfy the experience requirement. It is best to work for a larger company that has a training program and other benefits rather than a small family run business.

Regional Center Program Design *Letter of Intent*

To become a vendor with Regional Center you must write a ***letter of intent*** and attend an orientation at their local office and write a Program Design based on the principles of normalization. The Regional Center Program Design is different from the Community Care Licensing Application.

The Program Design requirements are specified in Title 17 (56013) and published by the Department of Developmental Services. Most Regional Centers develop their own requirements for how they want the Program Design prepared. Contact your local Regional

Center to request their current Program Design requirements. ***Smart Seminars can assist you in preparing your letter of intent and Regional Center Program Design.***

Students enrolled in our Administrator Course receive instruction in how to navigate the Regional Center system. An example of the vendorization steps for [Inland Regional Center](#) can be found [here](#). [South Central Regional Center](#) information can be found [here](#). Each Regional Center has different steps and requirements. Check with the Regional Center with which you wish to become vendors about their requirements.

Person Centered Planning

Working with developmentally disabled individuals requires a philosophical shift from the traditional medical model of care. Historically individuals with developmental disability have been treated like children, placing the care provider in the role of parent. Services were recommended and implemented by physicians, social workers and family, friends and care providers. [Person Centered Planning](#) turns this old medical model upside down by shifting

control to the individual who receives the services. The model is based on the simple idea that those who receive services have the right to chose which services they receive and by whom. Click [here](#) to learn more about [Person Centered Planning](#).

Direct Support Professional Training

Title 17 also requires all individuals who work in a residential setting to complete Direct Support Professional Training within 1 and 2 years of working in the facility. Some Regional Centers require DSPT training prior to being vendored. For a schedule of courses click [here](#) [DSPT Training](#)

LICENSE APPLICATION

Community Care Licensing Adult Residential Facility Application

Steps to opening a 6-bed Adult Residential Facility:

Component 1

Attend Component 1 Orientation at any Community Care Licensing Office in California. The office does not have to be in the geographical area where the property is located. You must pay a non refundable \$50.00 reservation fee two weeks in advance. You have 6 months to submit your application from the date you attend the orientation. This policy may no longer be in place. Call your local licensing office if you think you may need more than 6 months. A better strategy is to only attend the component I orientation when you are ready to submit your application.

Component I Online Orientation:

<http://www.cclid.ca.gov/res/pdf/RegistrationInstructions.pdf>

The application is organized as follows:

Part A:

Facility Type
Surety Bond: Required to protect client assets
Monthly Operating Budget
Personal Financial Information
Staff Schedule

Medical Evaluation of staff with TB Test
Fingerprint Clearance for all staff.
Emergency Disaster Plan
Facility Sketch
Relocation Sites
Fire Inspection
Administrator Qualifications

Part B:

Job Descriptions
Personnel Policies
Staff Training Program
Facility Program Description
House Rules
Admission Policies
Sample Menu
Control of Property (*You must have the title or the lease to the property to submit an application*)
Evidence of First Aid Card
Component 1 Orientation Attendance

Component II

After you submit your application you will be contacted by a licensed program analyst (LPA) who reviews your application. The regulations specify that the licensing office has 90 days to respond to your application. Component II is when the LPA interviews you at the licensing office and discusses your application with you. You will likely have corrections to make on your application.

Component III

The LPA will come to inspect the facility and discuss any final corrections. Your licensed is issues a few weeks later.

Basic Facility Requirements

300 foot rule: An Adult Residential Facility cannot be within 300 feet of another Adult Residential Facility. You can be within 300 feet of another Community Care Facility such as Elderly or Foster Care. To check your address to

determine 300 ft compliance login to [CCL website](#)

Fingerprint Clearance: You cannot operate a facility with criminal record other than minor traffic violation. Click here to obtain more information on fingerprint clearance.

If you have criminal convictions that include misdemeanors or felonies that occurred a long time ago you are eligible for an exemption .

Serious crimes such as robbery, sexual battery, child abuse, elder or dependent adult abuse, rape, arson are not eligible for exemption.

Application Assistance: For many people, completing the Part A and Part B of the application is overwhelming and would prefer to have someone do it for them. Click here on [consultation](#) to learn more.

Communication

Good communication skills are a giant part of being successful. Understanding the perspective and needs of others goes a long way. Many people are surprised when they receive a less than enthusiastic reception when they speak to agency representatives. Agencies such as Community Care Licensing and Regional Center are charged with the responsibility of insuring that the people who provide care and supervision do not exploit individuals for financial gain. Before you contact agencies and get too far along in the process, it is important to do your homework on what the mission of the agency is and how they implement it. Learn the basics of [Title 22](#) when communicating with Community Care Licensing. When communicating with Regional Center become familiar with [Title 17](#), developmental disability, [person centered planning](#) and the [philosophy of normalization](#). By focusing on the agency needs instead of your own you will be seen as a professional and a good communicator who shares a common goal and purpose: providing good care and supervision. It follows the old dictum; the more you give, the more you get.

Like the development of any small business, there are many steps involved. And whenever you deal with a government agency, there are hoops to jump through. Remember, California wants people to open up small residential homes. That is why the regulations and laws were created in the first place. My experience is that those individuals who are not deterred by disappointment and are not easily discouraged are the most successful.

LAWS AND REGULATIONS

Posting 70123

Laws & Regulations Question 33

The license or a copy of the license must be posted conspicuously in a prominent location within the licensed premises and accessible to public view.

Definitions 80001

Laws & Regulations Question 100; Physical Needs Question 18

(a)(1) "Activities of Daily Living" mean the following six activities: bathing, dressing, toileting, transferring, continence, and eating.

(a)(2) "Administrator" means the licensee, or the adult designated by the licensee to act in his/her behalf in the overall management of the facility.

Laws & Regulations Questions 31, 46

(a)(3) "Adult" means a person who is 18 years of age or older.

(a)(4) "Adult Community Care Facility" (Adult CCF) means adult residential facilities (ARF) and social rehabilitation facilities (SRF).

Laws & Regulations Questions 40, 101, 102

(a)(5) "Adult Residential Facility" means any facility of any capacity which provides 24-hour a day non-medical care and supervision to adults except elderly persons.

(a)(6) "Applicant" means any individual, firm, partnership, association, corporation, county, city, public agency or other governmental entity that has made application for a community care facility license, administrator certificate, or special permit.

(a)(7) "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.

(a)(8) "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 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.

(b)(2) "Basic Services" means those services required by applicable law and regulation to be provided by the licensee in order to obtain and maintain a community care facility license.

(c)(1) "California Clearance" means an individual has no felony or misdemeanor convictions reported by the California Department of Justice. However, the individual may have been arrested with no criminal conviction, convicted of a minor traffic offense or adjudicated as a juvenile.

Laws & Regulations Questions 2, 88, 103

(c)(2) "Capacity" means the maximum number of persons authorized to be provided care and supervision at any one time in any licensed facility.

Laws & Regulations Question 10; Physical Needs Question 15

(c)(3) "Care and Supervision" means any of the following provided by a person or facility to the clients:

- Dressing, grooming, bathing, personal hygiene
- Assistance with medication
- Assistance with medical and dental care
- Maintenance of house rules
- Supervision of client schedules/

activities

- Supervision of client cash resources or property
- Monitoring food intake or special diets
- Providing basic services, meaning

those required by law and regulation to be provided by the licensee in order to maintain a community care facility license

Admission & Retention Question 38

(c)(4) "Cash Resources" means monetary gifts, tax credits and/or refunds, earnings from employment or workshops, personal and incidental need allowances from funding sources including but not limited to SSI/SSP, allowances paid to children, and any other similar resources as determined by the licensing agency.

Management Question 53

(c)(5) "Certified administrator" means an administrator who has been issued a group home or adult residential facility certificate by the Department and whose certificate is current.

(c)(6) "Child" means a person who is under 18 years of age.

(c)(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, unless an incident is determined to be unfounded.

(c)(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.

(c)(9) "Child Care Center" means any facility of any capacity other than a family day care home as defined in section 102352f.(l) in which less than 24—hour per day nonmedical supervision is provided for children in a group setting.

(c)(10) "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 Facilities Act.

(c)(11) "Client Who Relies Upon Others To Perform All Activities of Daily Living" means a client who is unable to perform all six activities of daily living without physical assistance.

(c)(12) Close friend. "Close friend" means a person who is attached to another by feelings of personal regard as indicated by both parties involved.

(13) "Community Care Facility" means any facility, place or building where nonmedical care and supervision, as defined in section 80001(c) (2) are provided.

(14) "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.

(c)(15) "Completed Application" means 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; a criminal record clearance on the applicant and any other individuals specified in section 80019; and the licensing agency has completed a site visit to the facility.

Laws & Regulations Question 81

(c)(16) "Conservator" means a person appointed by the Superior Court to care for the person, estate, or person and estate of another

Laws & Regulations Question 13

(c)(17) "Consultant" means a person professionally qualified to provide expert information

Laws & Regulations Question 95

(c)(18) "Control of Property" means the right to enter, occupy, and maintain the operation of the facility property within regulatory requirements. Evidence may include:

- Grant Deed
- Lease or rental agreement
- Court order or similar document that shows the authority to control the

property pending outcome of a probate proceeding or estate settlement

(19) "Conviction" means a criminal conviction in California; or 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.

Management Question 54

(c)(20) "Criminal Record Clearance" means an individual has a California clearance and an FBI clearance.

(d)(1) "Day" means calendar day unless otherwise specified.

(d)(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 adopted by the Department pursuant to the Act.

(d)(3) "Delayed-Egress Device" means a special time-delay, egress control device as specified in Health and Safety Code Sections 1531.1(b), (e), and 1569.699(a).

(d)(4) "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.

(d)(5) "Department" is defined in Health and Safety Code section 1502(b).

Admission & Retention Question 3

(d)(6) "Developmental Disability" means a disability which originates before an individual attains age 18, continues, or can be expected to continue, indefinitely and constitutes a substantial handicap for such individual, as specified in Welfare and Institutions Code Section 4512(a).

Persons who are developmentally disabled shall include persons who have been diagnosed as having mental retardation, cerebral palsy, epilepsy, autism, or who have handicapping conditions found to be closely related to mental retardation or to require treatment similar to that required for mentally retarded individuals, but shall not include other handicapping conditions that are solely physical in nature.

(d)(7) "Dietitian" means a person who is a member of or registered by the American Dietetics Association.

(d)(8) "Director" is defined in Health and Safety Code section 1502(c).

(e)(1) "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.

Laws & Regulations Question 59

(e)(2) "Elderly Person" means, for purposes of admission into a Residential Care Facility for the Elderly, a person who is sixty (60) or older.

Laws & Regulations Questions 78, 94

(e)(3) "Emergency Approval to Operate" means a temporary approval to operate a facility for no more than 60 days pending the Department's decision to approve or deny.

(e)(4) "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.

(e)(5) "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.

Laws & Regulations Question 50

(e)(6) "Exception" means a written authorization issued by the licensing agency to use alternative means to meet the intent of a specific regulation and which are based on the unique needs or circumstances of a specific client or staff person. Exceptions are granted for particular clients or staff persons and are not transferable or applicable to other client), staff persons, facilities or licensees.

(e)(7) "Exemption" means an exception to the requirements of Health and Safety Code section 1522 and applicable regulations. Exemptions are not transferable.

(e)(8) "Existing Facility" means any community care facility operating under a valid, unexpired license on the date this chapter becomes effective.

(f)(1) "Federal Bureau of Investigation (FBI) Clearance" means an individual has no felony or misdemeanor convictions reported by the FBI.

However, the individual may have been arrested with no criminal conviction, convicted of a minor traffic offense or adjudicated as a juvenile.

(g)(1) "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).

(g)(2) "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 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 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, as specified in Section 80091 .

(h)(2) "Home Economist" means a person who holds a baccalaureate degree in home economics with a specialization in either foods and nutrition or dietetics.

(i)(l) "Infant" means a child under two years of age.

(i)(2) "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.

(3) "Interdisciplinary Team" (IDT) means a team that assists the Department in evaluating the need for relocating a client of an ARF or an

SRF when the client requests a review of the Department's Health Condition Relocation Order. This team consists of a nurse practitioner and a social worker, designated by the Department, with experience in the needs of the client population. Persons selected for an IDT shall not have been involved in the initial decision to issue a relocation order for the client in question.

(l)(1) "License" means authorization to operate a community care facility and to provide care and supervision. The license is not transferable.

(l)(2) "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, occupational therapists and respiratory therapists, who are operating within his/her scope of practice.

(l)(3) "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.

(l)(4) "Licensing Agency" means the State 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) "Medical Professional" means an individual who is licensed or certified in California to perform the necessary medical procedures within his/her scope of practice. This includes, but is not limited to, Medical Doctor (MD), Registered Nurse (RN) and Licensed Vocational Nurse (LVN).

(m)(2) "Mental Disorder" means any of the disorders set forth in the Diagnostic and Statistical Manual of Mental Disorders (Third 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 Code.

(n)(l) "Needs and Services Plan" means a written plan that identifies the specific needs of an individual client, including those items specified in Section 80068.2, and delineates those services necessary to meet the client's identified needs.

(n)(2) "Nonambulatory Person" means a person as defined in Health and Safety Code section 13131.

-A person who uses postural supports as specified in section 80072(a)(8) is deemed nonambulatory.

-A person is not deemed nonambulatory solely because he/she is deaf, blind, or prefers to use a mechanical aid.

(n)(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.

(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.

(p)(2) "Placement agency" is defined in Health and Safety Code Sections 1536.1 and 1569.47(a).

Medication Questions 4, 9

(p)(3) "PRN Medication" (pro re nata) means any nonprescription or prescription medication which is to be taken as needed.

(p)(4) "Provision" or "Provide" means whenever any regulation 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.

(p)(5) "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 80030.

(r)(l) "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.

(r)(2) "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.

(r)(3) "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 responsible person cannot act on behalf of a client unless authorized by law.

Laws & Regulations Question 23

(s)(1) "Serious deficiency" means any deficiency that presents an immediate or substantial threat to the physical or mental health or safety of the clients.

(s)(2) "Simplified Exemption" means an exemption granted on the Department's own motion, as authorized in Health and Safety Code Section 1522(c)(4), if the individual's criminal history meets specific criteria established by Department regulation.

(s)(3) "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.

(s)(4) "Social Rehabilitation Facility" means any facility which provides 24-hour-a-day nonmedical care and supervision in a group setting to adults recovering from mental illness who temporarily need assistance, guidance or counseling.

(s)(5) "Social Worker" means a person who has a graduate degree from an accredited school of social work.

(s)(6) "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 of California.

Laws & Regulations Question 39

(s)(7) "Substantial Compliance" means the absence of any serious deficiencies.

(s)(8) "Substantiated Complaint" means a complaint which has been investigated by the licensing agency, and as a result, a violation of regulations has been found.

(t)(l) "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.

Admission & Retention Question 39; Physical Needs Questions 2, 3

(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 handwashing 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 control guidelines:

(A) Hand-washing — Staff should wash their hands:

- After assisting with incontinent care or wiping a client's nose
- Before preparing or eating foods
- After using the toilet
- Before and after treating/bandaging a cut
- After wiping down surfaces, cleaning spills, or any other housekeeping
- After being in contact with any body fluids from another person, even if they wore gloves

(B) Gloves — Staff should always wear gloves:

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

(C) Cleaning with a disinfectant — Staff should clean with a disinfectant:

- On all surfaces and in the client's room and on an "as needed" basis on any surface that has come into contact with blood.
- Such as a basic bleach solution, made fresh daily by mixing 1/4 cup household liquid chloride 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 placing it in a plastic trash bag, tying it with a secure tie, and disposing of it out of reach of clients and children.

(u)(2) "Unlicensed Community Care Facility" means a facility as defined in Health and Safety Code section 1503.5.

(A) A facility which is "providing care and supervision" as defined in section 80001(c)(2) 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.

(B) A facility which is "held out as or represented as providing care or supervision" includes, but is not limited to:

- 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.
- A facility where a change of ownership has occurred and the same clients are retained.
- A licensed facility that moves to a new location.
- A facility which advertises as providing care and/or supervision.

(C) A facility which "accepts or retains residents who demonstrate the need for care or supervision" includes, but is not limited to:

- 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.
- A facility which houses unemancipated minors, even though the facility is providing board and room only, or board only, or room only.
- A facility where it is apparent that care and/or supervision are being provided by virtue of the client's needs being met.

(u)(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 change in facility location when clients are in need of services from the same operator at the new location.
- A change of facility ownership when clients are in need of services from a new operator

Laws & Regulations Questions 44, 65

(w)(1) "Waiver" means a nontransferable written authorization issued by the licensing agency to use alternative means to meet the intent of a specific regulation which are based on a facility-wide need or circumstance.

License Required 80005

Unless a facility is exempt from licensure as specified in 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.

Operation Without a License 80006

Laws & Regulations Question 10

An unlicensed facility is providing care and supervision as defined in section 80001u(2).

If the facility is alleged to be in violation of sections 1503.5 and/or 1508 of the Health and Safety Code, the licensing agency shall conduct a site visit and/or evaluation of the facility pursuant to Health and Safety Code 1538.

If the facility is operating without a license, the licensing agency shall issue a notice of operation in violation of law and shall refer the case for criminal prosecution and/or civil proceedings.

The licensing agency shall have the authority to issue an immediate civil penalty pursuant to

section 80058 and section 1547 of the Health and Safety Code.

These sections shall be applied pursuant to section 1549 of the Health and Safety Code.

The licensing agency shall notify the appropriate placement or protective service agency if either of the following conditions exist:

- (1) There is an immediate threat to the clients' health and safety.
- (2) The facility does not submit an application for licensure within 15 calendar days of being served a notice of operation in violation of law.

Exemption from Licensure 80007

The community care facility regulations contained in this division shall not apply to any of the following:

- (1) Any health facility, as defined by section 1250 of the Health and Safety Code.
- (2) Any clinic, as defined by section 1202 of the Health and Safety Code.
- (3) Any family day care home providing care for the children of only one family, in addition to the operator's own children.
- (4) Any juvenile placement facility approved by the California Youth Authority or any juvenile hall operated by a county.
- (5) Any facility conducted by and for the adherents of any well-recognized church or religious denomination for the purpose of providing facilities for the care or treatment of the sick who depend upon prayer or spiritual means for healing in the practice of the religion of such church or denomination.
- (6) Any school dormitory or similar facility where all of the following conditions exist:

- The school is certificated/registered by the State Department of Education.
- The school and the school dormitory are on the same grounds.
- All children accepted by the school are six years of age or older.
- The program operates only during normal school terms unless the academic program runs year-round.
- The school's function is educational only.
- The school program is not designated as providing rehabilitative or treatment services.

-The school's function does not promote intent to provide community care services, and the facility does not accept children who are in need of such services, including but not limited to children with developmental disabilities, mental disorders or physical handicaps; juveniles declared dependents of the court under Welfare and Institutions Code section 300, and juveniles declared wards of the court under Welfare and Institutions Code sections 601 and 602.

- The facility does not receive any public funds designated for care including but not limited to AFDC-FC and SSI/SSP. The facility shall be permitted to receive public funds intended for educational programs.
- No public or private agency, including but not limited to county welfare department and probation offices, provides social services to children in the facility.

(7) Any house, institution, hotel, homeless shelter, or other similar place that supplies board and room only, or room only, or board only, which provides no element of care and supervision, as defined in section 80001(c)(2).

(8) Any cooperative arrangement between parents for the day care of their children by one or more of the parents where no payment for the day care is involved, including but not limited to the exchange of child day care services between two or more families.

(9) Any care and supervision of persons by a relative, guardian or conservator.

(10) Any care and supervision of persons from only one family by a close friend of the parent, guardian or conservator, provided that such arrangement is not for financial profit and does not exceed 1 hours per week. Provision of longer hours of care shall not be precluded when provided for a brief period of time for reasons, including but not limited to family emergencies, vacation, and military leave.

(11) Any arrangement for the care and supervision of an adult or adults from only one family by a close friend, who is not a licensee or current employee of a Residential Care Facility for the Elderly or of an Adult Residential Facility, and whose friendship pre-existed a provider/recipient relationship, and all of the following are met:

- The care and supervision is provided in a home or residence chosen by the recipient, regardless of who owns the home or residence.
- The arrangement is not of a business nature, in that the provider does not represent himself or herself as being in the business of provision of care, and any compensation that may be paid to the provider is only for the value of the services rendered.
- The arrangement occurs and continues only as long as the needs for care and supervision of the recipient are being adequately met.

(12) Any facility exclusively used by a licensed homefinding agency and issued a certificate of approval by that agency. Such facilities shall not be required to obtain a license, but shall be in compliance with all other requirements set forth in this division. The facility's compliance with requirements shall be monitored through and assured by the homefinding finding agency. For the purposes of this section, an exclusive-use facility shall mean a nonlicensed residential facility that has been certified by a licensed homefinding agency as conforming to the

regulations pertaining to the small family home category. A facility in the exclusive use of a licensed homefinding agency shall accept only those children placed by that agency which certified the home.

(13) A home which meets all of the following criteria:

- Approved by a licensed adoption agency, or the Department, for the adoptive placement of a child, and
- The child is legally free for adoption, and
- The agency or the Department is providing supervision of the placement pending finalization of the adoption.

(14) A home which meets all of the following criteria:

- Placement for adoption by a birth parent, and
- A petition for adoption has been filed by the prospective adoptive parents, and is pending, and
- A final decision on the petition has not been rendered by the court.

(15) Any placement agency as defined in Health and Safety Code section 1536.1 or an individual who places individuals for care in a facility licensed to receive and care for such persons.

(16) A county probation or welfare department which places children in certified license pending homes as set forth in section 87007.1.

(17) Any housing project for elderly or disabled individuals that meets federal requirements specified in Health and Safety Code Section 1505(p).

(18) The Department.

(19) Any similar facility as determined by the Director.

Licensing of Integral Facilities 80008

(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 as determined by the licensing agency.

Limitations on Capacity and Ambulatory Status 80010

A licensee shall not operate a facility beyond the conditions and limitations specified on the license, including the capacity limitation.

Laws & Regulations Question 71

Facilities or rooms approved for ambulatory clients only shall not be used by non-ambulatory clients, including clients whose condition becomes non-ambulatory.

The licensing agency has the authority to require clients who use ambulatory sections of the facility to demonstrate that they are ambulatory.

Advertisements and License Number 80011

Laws & Regulations Question 70

Licensees must reveal each facility license number in all advertisements in accordance with

Health and Safety Code section 1514. Non-residential facilities are exempt from this requirement.

Correspondences are considered advertisements if the intent is to attract clients.

Licensees who operate more than one facility and use a common advertisement for these facilities must list each facility license number in accordance with Health and Safety Code section 1514.

False Claims 80012

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.

No licensee, officer, or employee of a licensee shall alter a license, or disseminate an altered license.

Nondiscrimination of Applicants 80017

Any adult shall be permitted to apply for a license regardless of age, sex, race, religion, color, political affiliation, national origin, disability, marital status, actual or perceived sexual orientation, gender identity, HIV status, or ancestry.

Application for License 80018

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 supplied by the licensing agency.

Prior to filing, the applicant must attend an orientation for the specific facility type and provided by the licensing agency. It shall cover the following areas:

- Completion of the application
- Scope of operation subject to regulation by the department

An applicant who is already licensed for a facility in the same category need not attend an orientation if the last orientation was for the same type and was within two years of the next scheduled orientation.

An applicant applying for more than one facility license in the same type must attend only one orientation.

The applicant/licensee will provide verification and documentation as requested by the agency.

Laws & Regulations Question 72

The application and supporting documents shall contain the following:

- (1) Name, residence, mailing address
- (2) If partnership, the name and principal business address of each partner
- (3) If corporation or association, name, title, and principal business address of each officer, executive director, and member of the governing board
- (4) If a corporation that issues stock, the name and address of each person owning more than 1% of stock
- (5) If a corporation or association, a copy of the articles of incorporation, constitution, and by-laws
- (6) If corporation, each member of the board of directors, executive director, and any office shall list the name of facilities which they have been licensed to operate, employed by, or a member of the board of directors, executive director, or an officer

- (7) Name and address of owner of facility, if applicant is leasing or renting
- (8) Procedures as required pursuant to Section 1524.5 of the Health and Safety Code
- (9) The category of facility to be operated
- (10) Maximum number of persons to be served
- (11) Age range, sex and the categories of persons to be served, including persons with developmental disabilities, mental disorders, physically handicapped and/or nonambulatory persons
- (12) Hours or periods of facility operation
- (13) Name of administrator, if applicable
- (14) Information required by Health and Safety Code Sections 1520(d) and 1520(e)
- (15) Name, address, and telephone number of the city or county fire department, the district providing fire protection, or the State Fire Marshal's Office having jurisdiction in the area of the facility.
- (16) A plan of operation as specified in 80022.
- (17) Fingerprint cards as specified in 80019.
- (18) Information required by Health and Safety Code Section 1522.1.
- (19) The bonding affidavit specified in 80025(a).
- (20) A health screening report on the applicant as specified in Section 80065(g).
- (21) The fee for processing the application by the requested capacity as specified in Section 80036.
- (22) Such other information as may be required pursuant to Section 1520(g) of the Health and Safety Code.

(23) The application shall be signed by the applicant. If a partnership, by each partner. If a firm, association, corporation, county, city, public agency, or other governmental entity, by the chief executive officer or authorized representative.

Laws & Regulations Question 36

(24) The application shall be filed with the licensing agency which serves the geographical area in which the facility is located.

Criminal Record Clearance 80019

Laws & Regulations Question 60

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.

Management Question 44

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:
 - 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.
 - The individual is providing time-limited specialized clinical care or services.
 - The individual is providing care or services within the individual's scope of practice.
 - 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:

-The individual is hired for a defined, time-limited job.

-The individual is not left alone with

clients

-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.

-The exemption does 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 residential care facility, or who are advising an individual client at the request of or with the permission of, the client.

-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:

-Members are not left alone with the

clients.

-Members do not transport clients off the facility premises.

-The same group does not conduct such activities more often than once a

month.

(6) The following persons in homes certified by licensed Foster Family Agencies:

(a) Adult friends and family of the certified foster parent, who come into the home to visit for a length of time no longer than one month, provided they are not left alone with the foster

children. However, the certified foster parent, acting as a reasonable and prudent parent, as defined in the Welfare and Institutions Code, may allow his or her adult friends and family to provide short-term care to the foster child and act as an appropriate occasional short-term babysitter for the child.

(b) Parents of a foster child's friends when the child is visiting the friend's home and the friend, certified foster parent or both are also present. However, the certified foster parent, acting as a reasonable and prudent parent, may allow the parent of the foster child's friends to act as an appropriate short-term babysitter for the child without the friend being present.

(c) Individuals who are engaged by any certified foster parent to provide short-term babysitting to the child for periods not to exceed 24 hours. Certified foster parents shall use a reasonable and prudent parent standard in selecting appropriate individuals to act as appropriate occasional short-term babysitters.

(7) The following persons in small family homes:

-Adult friends and family of the licensee who come into the home to visit, for a length of time no longer than one month, provided they are not left alone with the children

-Parents of a child's friends when the child is visiting the friend's home and the friend, foster parent or both are also present

(8) The following persons in adult residential and social rehabilitation facilities unless contraindicated by the client's individualized program plan (IPP), or needs and service plan:

(a) A spouse, significant other, relative, close friend of a client, or the attendant or facilitator who is not employed, retained or contracted by the licensee for a client with a developmental disability, as long as the person is visiting the resident or providing direct care and supervision to that client only.

(b) An attendant or facilitator for a client with a developmental disability if the attendant or facilitator is not employed, retained or contracted by the licensee.

(c) These exemptions apply only if the person is visiting the client or providing direct care and supervision to the client.

(9) 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.

Prior to the Department issuing a licensee, the applicant, administrator and any adult other than a client, residing in the facility shall obtain a California criminal record clearance or exemption as specified in Health and Safety Code Section 1522(a)(5).

All individuals subject to criminal record review shall be fingerprinted and sign a Criminal Record Statement (LIC 508 [Rev. 1/03]) under penalty of perjury.

A person signing the LIC 508 must:

-Declare whether he/she has been convicted of a crime, other than a minor traffic violation regardless of whether the individual was granted a pardon for the conviction, received an expungement pursuant to Penal Code 1203.4 or the individual's record was sealed as a result of a court order.

-If convicted of a crime other than a minor traffic violation, provide information regarding the conviction.

Management Questions 5, 40, 49, 50

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 80019(e), prior to the individual's employment, residence, or initial presence in the community care facility.

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.

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) Obtain a California clearance or a criminal record exemption as required by the Department OR
- (2) Request a transfer of a criminal record clearance OR
- (3) Request and be approved for a transfer of a criminal record exemption, unless, upon request for the transfer, the Department permits the individual to be employed, reside or be present at the facility.

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) A copy of the individual's:

- Driver's license, OR
- Valid identification card issued by the Department of Motor Vehicles, OR
- Valid photo identification issued by another state or the United States government if the individual is not a California resident.

(3) Any other documentation required by the Department [e.g., Criminal Record Statement — LIC 508, (Rev. 1/03) or for Foster Family Homes, Small Family Homes and Certified Family Homes an LIC 508D (Rev. 1/03) which are incorporated by reference, and job description].

Violation of the above will result in a citation of a deficiency and an immediate assessment of civil

penalties of \$100 per violation per day for a maximum of 5 days by the Department.

Subsequent violations within a 12-month period will result in a civil penalty of \$100 per violation per day for a maximum of 30 days.

The Department may assess civil penalties for continued violations as permitted by Health and Safety Code Section 1548.

Violation of the above may also result in a denial of the license application or suspension and/or revocation of the license.

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 a minor traffic violation for which the fine was less than \$300, and an exemption pursuant to Section 80019.1(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.

The licensee shall maintain documentation of criminal record clearances or criminal record exemptions of employees in the individual's personnel file.

Documentation shall be available for inspection by the Department.

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.

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.

Criminal Record Exemption 80019.1

(a) The Department will notify a licensee to immediately remove from the facility (or prevent from entering the facility) any person described below while the Department considers granting or denying an exemption.

- (1) Anyone who has been convicted or is awaiting trial for a sex offense against a minor
- (2) Anyone who has been convicted of a felony
- (3) Anyone who has been convicted of an offense in Sections 242.4, 273a, 273d, 273g, or 368 of the Penal Code or any other crime specified in Health and Safety Code Section 1522(c)(3)
- (4) Anyone who has been convicted of battery, shooting at inhabited dwelling, corporal injury on spouse/cohabitant, discharging firearm with gross negligence, exhibiting weapon/firearm, threat to commit a crime resulting in gross bodily injury or death, criminal threat to harm or injure another person, cruelty to animals, willful harm or injury to child
- (5) Any other person ordered to be removed by the Department

(b) In addition to the requirements of Section 80019.1(a), the licensee must return the

confirmation of removal form that is sent by the Department, within five 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:

(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 he/she has 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 80019.1(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 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 45 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, police reports and certified court documents to process the exemption request, pursuant to Section 80019.1(e).

(B) If the individual for whom the criminal record exemption is requested is an employee or resident other than a spouse or a dependent family member and the licensee/license applicant does not submit the information listed in the Department's written notice within 45 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, licensee, spouse or dependent family member and the licensee/license applicant does not submit the information listed in the Department's written notice within 45 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

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. All character references shall be on a Reference Request form (LIC 301 E — 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.

Documents include, but are not limited to:

-A Criminal Record Statement (LIC 508. [Rev. 1/03]) or for Foster Family Homes, Small Family Homes and Certified Family Homes an LIC 508D [Rev. 1/03]) and

-The individual's written statement/explanation of the conviction and the circumstances about the arrest.

(9) Evidence of honesty and faithfulness 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. Exemption denial notices shall specify the reason the exemption was denied.

(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:

-Material relevant to their application for a

criminal record clearance or exemption,

-His or her 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

-His or her criminal record clearance or

exemption status in order to obtain a

position with duties that are prohibited to

him/her by a conditional exemption; or

(2) Is on probation or parole. 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 80019. 1(j)(2). Section 80019. 1(j)(2) does not apply to Certified Family Homes.

(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 80019. 1(k)(1) through (6) and the individual provides the Department with substantial and convincing evidence of good character as specified in Section 80019. 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 1 5 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.

(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 80019.1(k)(l) 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 80019. 1(k)(l) through (6).

(m) The Department shall not grant an exemption if the individual has a conviction for any offense specified in Section 1 522(g)(1) of the Health and Safety Code.

(n) The Department shall consider granting a simplified criminal record exemption only if the individual has the criminal history profile outlined in Sections 80019. 1(n)(l) through (4) below:

(1) The individual does not have a demonstrated pattern of criminal activity;

(2) The individual has no more than one conviction;

(3) The conviction is a misdemeanor and is a crime that is nonviolent and does not pose a risk of harm to an individual; and

(4) It has been at least five consecutive years since the completion of the most recent period of incarceration or supervised probation.

(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 80019.1 (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 or certified home, unless either a petition or an exemption is granted.

(3) If an individual who has previously been denied an exemption reapplies after the relevant time period described in Section 80019.1(q)(1) above, the Department may, according to the provisions in Section 80019.1 et seq., grant or deny the subsequent request for an exemption.

(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 his/her 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 80019.1. 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) A copy of the individual's:
-Driver's license, or
-Valid identification card issued by the Department of Motor Vehicles, or

-Valid photo identification issued by another state or the United States Government if the individual is not a California resident.

-Any other documentation required by the Department (e.g., Criminal Record Statement — LIC 508, [Rev. 1/03] or for Foster Family Homes, Small Family Homes and Certified Family Homes and LIC 508D [Rev. 1/03] and job description).

(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.

(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.

Child Abuse Central Index 80019.2

(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 (LIC 198A [3/99] which is incorporated by reference, for state licensed facilities and LIC 198 [4/99] which is incorporated by reference, for county licensed facilities) 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 80019(c). 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 80019(e) or Section 80019.1(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.

(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 (LIC 198 A [3/99]), 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 (LIC 198A [3/99]), 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 80019(d).

(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 80019(e) or Section 80019.1(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.

Fire Clearance 80020

Laws & Regulations Questions 24, 43, 61

Request for fire clearance shall be made through and maintained by the licensing agency using form LIC 9054 Local Fire Inspection Authority.

Laws & Regulations Questions 9, 104; Admission & Retention Question 23

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 can be obtained prior to the acceptance of such clients:

- Persons 65 years of age and over.
- Persons who are non ambulatory.
- Persons who use postural supports pursuant to Section 80072(a)(8) are nonambulatory.

Water Supply Clearance 80021

Laws & Regulations Questions 73, 74

All community care facilities where water for human consumption is from a private source shall meet the following requirements:

(1) For initial licensure, the applicant must provide evidence of an onsite 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 will 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:

<u>Capacity</u>	<u>Required Analysis</u>
6 or fewer	Initial licensing, periodic 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

Plan of Operation 80022

Laws & Regulations Question 105

Each licensee shall have and maintain on file a current, written, definitive plan of operation containing:

- (1) Statement of purposes, and program methods and goals
- (2) Statement of admission policies and procedures regarding acceptance of clients
- (3) A copy of the admission agreement
- (4) Administrative organization, if applicable
- (5) Staffing plan, qualifications and duties, if applicable
- (6) Plan for inservice education of staff if required by regulations governing the specific facility category
- (7) 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.

Laws & Regulations Question 42

- (8) A sketch of the grounds showing buildings, driveways, fences, storage areas, pools, gardens, recreation areas and other space used by the clients. The sketch shall include the dimensions of all areas which will be used by the clients
- (9) Sample menus and a schedule for one calendar week indicating the time of day that meals and snacks are to be served
- (10) Transportation arrangements for clients who do not have independent arrangements
- (11) Rate setting policy including, but not limited to, policy on refunds
- (12) 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 80025 and 80026

(13) Consultant and community resource to be utilized by the facility as part of its program

(14) Statement of the facility's policy concerning family visits and communications with client pursuant to Health and Safety Code 1512

If the licensee of an ARF, Group Home (GH), small family home (SFH), foster family home (FFH), or certified family home (CFH) certified by a foster family agency (FFA) plans to use delayed egress devices as specified in Health and Safety Code section 1531.1(d), the plan must meet the requirements of Health and Safety Code Sections 1531.1(g) and (h)

Physical Needs Question 5

If the licensee intends to admit or care for clients who have a restricted health condition specified in Section 80092, the facility policies and a program description must be included. At a minimum, the following must be specified:

- (1) The type of restricted health condition
- (2) The licensee's plans for serving the client
- (3) The services that will be provided
- (4) Staffing adjustments if needed, including increased staffing, hiring staff with different qualifications, hiring licensed professionals as employees or consultants

If the licensee plans to admit clients who have a staph or other serious, communicable infection, the plan must include:

- (1) Statement that all staff will receive training in universal precautions within the first 10 days of employment and before providing care
- (2) Statement of how the licensee will ensure that the training is obtained, including the name and qualifications of the training provider

If the licensee plans to care for clients who rely on others to perform all activities of daily living, the plan of operation must also include a

statement that demonstrate's the licensee's ability to provide this care, which may include:

- (1) Licensee's experience providing care to these clients
- (2) Licensee's experience providing care to a family member with this condition
- (3) Licensee's plan to hire staff with this experience and documentation thereof
- (4) Documentation of training of the licensee or staff specific to these needs
- (5) History of continued placements by a Regional Center

If the licensee plans to admit clients with a propensity for harmful behaviors, the plan of operation must include a description of precautions to protect all clients.

Any changes in the plan of operation which affect service to clients are subject to agency approval and shall be reported as specified in Section 80061. The facility shall operate in accordance with the Plan of Operation and may be cited for not doing so.

Disaster and Mass Casualty Plan 80023

Laws & Regulations Question 17

Licensee must maintain a current, written disaster and mass casualty plan of action, which is subject to review by the licensing agency and must include:

- (1) Designation of administrative authority and staff assignments.

Laws & Regulations Questions 6, 38

- (2) Contingency plans for action during fires, floods, and earthquakes, including but not limited to the following:

- Means of exiting
- Transportation arrangements
- Relocation sites
- Arrangements for supervision of clients during evacuation or relocation
- Means of contacting local agencies

The licensee shall instruct all clients, staff, and members of the household in their duties and responsibilities under the plan.

Laws & Regulations Question 34

Disaster drills shall be conducted at least every six months. Completion of such drills shall not require travel away from the facility grounds or contact with local disaster agencies.

Laws & Regulations Question 80

The drills shall be documented and the documentation maintained in the facility for at least one year.

Waivers and Exceptions 80024

Unless prior written licensing agency approval is received per below, all licenses shall maintain continuous compliance with the licensing regulations.

The licensing agency has the authority to approve alternate concepts, programs, 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 will provide safe and adequate services and will not 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 waiver or exception along with substantiating evidence.

Within 30 days of receipt of a request, the licensing agency shall provide one of the following in writing:

- (1) The request has been received and accepted for consideration.
- (2) The request is deficient, describing additional information and time frame required.

Failure of the applicant or licensee to comply with the time specified in (2) shall result in denial.

Laws & Regulations Questions 25, 106

Within 30 days of receipt of an acceptable request, the licensing agency shall notify the applicant of approval or denial in writing.

Bonding 80025

The licensee shall submit an affidavit, on a form provided by the licensing agency, stating whether he/she 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.

All licensees, other than governmental entities, who are entrusted to care for and control clients' cash resources shall have on file with the licensing agency, a bond issued by a surety company to the State of California as principal.

Laws & Regulations Questions 35, 57, 90

(c) The amount of the bond shall be according to the following schedule:

Amount Safeguarded Per Month	Bond Required
\$750 or less	\$1,000
\$751 to \$1,500	\$2,000
\$1,501 to \$2,500	\$3,000

Every further increment of \$1,000 or fraction thereof shall require an additional \$1,000 on the bond.

The licensee must submit a new affidavit and bond to the licensing agency prior to the licensee safeguarding additional amounts of clients' cash resources.

When the agency determines that the amount of the bond is insufficient or the amount of any bond is impaired by any recover against the bond, the agency has the authority to require the licensee to file an additional bond in an amount it deems necessary.

The provisions of this section will not apply if the licensee meets the requirements specified in Section 1560 of the Health and Safety Code.

Safeguards for Cash Resources, Personal Property, and Valuables 80026

Admission & Retention Question 15

A licensee is not required to accept any client whose incapacities, as documented by initial or subsequent needs appraisals, require the licensee to handle the client's cash resources.

If such a client is accepted for care, his/her cash, personal property, and valuables not handled by a person outside the facility who has been designated by the client or his/her authorized representative shall be handled by the licensee or facility staff.

Except where provided for in approved continuing care agreements, no licensee or employee shall:

(1) accept appointment as guardian or conservator of the client or his/her estate

(2) accept any general or special power of attorney except for MediCal or Medicare claims

(3) Become the substitute payee for any client, except for 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 80026(i) with a resident

Cash resources, personal property, and valuables of clients handled by the licensee shall be free from any liability the licensee incurs.

Laws & Regulations Question 37

Cash resources, personal property, and valuables of clients shall be separate and intact, not commingled with facility funds or petty cash. This does not prohibit the licensee from providing loans or advances to clients from facility funds, documentations of which must be maintained in the facility.

The licensee or employee thereof shall not spend clients' cash for any basic services specified in these regulations or any basic services identified in a contract/admission agreement with the client. This does not apply to a representative payee appointed by the Social Security Administration.

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.

Each licensee shall maintain accurate records of accounts of cash resources, personal property, and valuables entrusted to his/her care:

-Records of cash resources as a drawing account, including current ledger accounting with columns for income, disbursements, and balance.

-Supporting receipts shall be filed in chronological order.

Admission & Retention Questions 1, 40

-Receipts for cash provided to any client from his/her account, including full signature of client or authorized representative and a statement acknowledging receipt as follows:

“(full signature) accepts (dollar amount) (amount written cursive), this date (date), from (payor).”

-The store receipt shall constitute the receipt for purchases made for the client

-The original receipt for cash resources, personal property, or valuables entrusted to the licensee shall be provided to the client or authorized representative

Admission & Retention Question 16

-Bank records for transactions of cash resources deposited in and drawn from the account specified in (i) below

(i) Immediately upon admission, a client’s cash resources entrusted to the licensee and not kept in the facility shall be deposited in any bank, savings and loan, or credit union meeting these requirements:

(1) The account shall be a trust account separate from the personal or business accounts of the licensee

(2) The account title shall clearly note that it contains client cash resources

(3) The licensee shall provide access to the cash resources upon demand by the client or authorized representative

(4) The account will be in a local bank, savings and loan, or credit union authorized to do business in California, the deposits of which are insured by a branch of the Federal Government

A local public agency shall have the authority to deposit such cash resources with the public treasurer.

Admission & Retention Question 41

Cash resources entrusted to the licensee and kept on the premises must be locked and secure.

Admission & Retention Question 17

Upon discharge, all cash, property, and valuables will be surrendered to the client or representative. The licensee will retain a receipt signed by the client or representative.

Admission & Retention Question 8

Upon death of a client, all cash, property, and valuables will be immediately safeguarded as follows:

(1) All cash resources placed in account as defined in (i) above

(2) The executor or administrator of the estate (if none, the authorized representative) shall be notified by the licensee and the cash, property, and valuables will be surrendered to said party in exchange for a signed, itemized receipt

(3) If the licensee is unable to notify a responsible party, the licensee shall give immediate written notice to the public administrator of the county as provided in Section 7600.5 of the California Probate Code

The following requirements shall be met when there is a proposed change of licensee:

(1) The licensee shall notify the licensing agency of pending change of licensee and shall provide an accounting of each client’s cash, property, and valuables entrusted, given on a form approved or provided by the licensing agency

(2) Provided the licensing agency approves the application, the form specified above shall be updated, signed by both the former and new licensee, and forwarded to the licensing agency

Admission & Retention Question 42

The licensee must maintain a record of all gifts, monetary and otherwise, exceeding an estimated value of \$100 provided by or on behalf of a client to the licensee, administrator or staff. The record must be attached to the account specified above

if the client's resources have been entrusted to the licensee. Monetary gifts or valuables given by the friends or relatives of a deceased client shall not be subject to the requirements specified above.

Initial Application Review 80027

(a) Within 90 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. 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.

(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.

(f) The application fees shall be nonrefundable as specified in Section 80036(d).

Capacity Determination 80028

Laws & Regulations Question 1

A license shall be issued for a specific capacity and shall take into consideration the following:

(1) The fire clearance specified in Section 80020.

(2) The licensee's/administrator's ability to comply with applicable law and regulation.

(3) Any other household members, including but not limited to persons under guardianship or conservatorship, who reside at the facility and their individual needs.

(4) Facilities which accept minor parents and his/her child(ren) shall have such children included in the facility's licensed capacity.

(5) Physical features of the facility, including available living space, which are necessary in order to comply with regulations.

(6) Number of available staff to meet the care and supervision needs of the clients.

(7) Any restrictions pertaining to the specific category of facility.

The licensing agency can issue a license for 1 fewer clients than is requested when the licensee's responsibilities to other persons in the home, including persons under guardianship and conservatorship, would preclude provision of the care required by these regulations

When the license is issued for fewer clients than requested, the licensee will be notified of the reasons and right to appeal in writing.

Laws & Regulations Question 32

The licensing agency can decrease existing licensed capacity when there is a change in any of the above factors.

If the licensee does not agree to the decrease, the licensing agency can initiate revocation.

Laws & Regulations Question 41

The licensing agency can restrict care to specific individuals; it must specify the names of the individuals to whom care and supervision is limited in a letter to the licensee.

Except when the limitation is requested by the licensee, the licensee will be notified in writing of the reasons for and right to appeal such limitation.

Withdrawal of Application 80029

(a) An applicant shall have the right to withdraw an application.

(1) Such withdrawal shall be in writing.

(2) The fee for processing the application shall be forfeited.

Provisional License 80030

Laws & Regulations Questions 18, 54, 107

(a) The licensing agency shall have the authority to issue a provisional license to an applicant, pending action under Sections 8003 1 or 80040 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 and regulation.

(2) An urgent need for licensure exists.

(3) A corporate applicant's board of directors, executive director and officer are eligible for licensure as specified in Health and Safety Code Section 1520.11(b).

(b) The capacity of a provisional license shall be limited to the number of clients for whom urgent need has been established, or the capacity established for the specific facility, whichever is less.

(c) The licensing agency shall have the authority to issue a provisional license for a maximum of six months when it determines that full compliance with licensing regulations will be achieved within that time period.

(d) The licensing agency shall have the authority to issue a provisional license for a maximum of 12 months when it determines, at the time of application, that more than six months is required to achieve full compliance with licensing regulations due to circumstances beyond the control of the applicant.

(e) If, during the provisional license period, the licensing agency discovers any serious deficiencies, the Department shall have the authority to institute administrative action or civil proceedings, or to refer the case for criminal prosecution.

(f) 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.

Issuance of License 80031

Laws & Regulations Questions 3, 4, 51

(a) Within 90 days of the date that a completed application, as defined in Section 80001c. (8),

has been received, the licensing agency shall give written notice to the applicant of one of the following:

- (1) The application has been approved.
- (2) The application has been denied. The notice of denial shall include the information specified in Section 80040.

(b) The licensing agency shall notify the applicant, in writing, of the issuance of the license. Issuance of the license itself shall constitute written notification of license approval.

(c) No limitation shall be imposed on the licensee or printed on the license solely on the basis that a licensee is a parent who has administered or will continue to administer corporal punishment, not constituting child abuse as defined in Section 1 165, subdivision (g) of the Penal Code, or Section 1531.5(c) of the Health and Safety Code, on his/her own child(ren).

(d) The licensing agency's completed review of an application for the two years immediately preceding this regulation has been approximately:

- (1) A minimum of 30 days.
- (2) A median of 90 days.
- (3) A maximum of 180 days.

New Application 80034

Laws & Regulations Question 75

A new application is required for a change in conditions or limitations described in current license such as:

- Location
- Sale or transfer of majority stock
- Separating from parent company
- Merger

- Change in Facility Category
- Increase in Capacity

Laws & Regulations Question 108

Licensing may grant capacity increases without new application. Must have review and fire clearance.

Permanent change in any client from ambulatory to non ambulatory status.

Laws & Regulations Question 8

A new application is required if the applicant fails to complete a new application within the time limit required.

Conditions for Forfeiture of Community Care Facility License 80035

Conditions may be found in Section 1524 of the Health and Safety Code.

Licensee Abandons the Facility, meaning licensing agency cannot determine licensee's whereabouts after:

- (1) Contacting facility's staff
- (2) Making at least one phone call per day for five consecutive workdays
- (3) Sending certified letter requesting licensee to contact agency and receiving no response within seven calendar days

Laws & Regulations Questions 20, 94

If the facility licensee dies, an adult relative who has control of the property may operate a previously licensed facility under an Emergency Approval to Operated provided:

- (1) The relative notifies the Department by telephone during the first working day after the licensee's death.

(2) The relative files with the Department within five days of the licensee's death an Application for License and evidence of the licensee's death. Department shall permit the relative to submit only the info on the front side of this form.

(3) The relative files with the CA Department of Justice within five calendar days of the licensee's death his/her fingerprint cards.

If the adult relative complies with the above, he/she is not considered to be operating an unlicensed facility pending the Department's approval of a provisional license.

Department shall make a decision within 60 days after the application is submitted. A provisional license will be granted only if the above conditions are satisfied and the health and safety of the residents will not be jeopardized.

Licensing Fees 80036

Laws & Regulations Question 30

An applicant or licensee will be charged the fees specified by Health and Safety Code Section 1523.1.

An additional fee will be charged when the licensee requests an increase or decrease in capacity as specified in 1523.1(b)(1)(C).

When a licensee moves a facility, the relocation shall be as specified in 1523.1 (b)(1)(A).

To qualify for the relocation fee:

- The licensee has notified the licensing agency before relocating
- The categorical type of facility shall remain the same
- The fee shall be by requested capacity at the new location
- The fees shall be nonrefundable

Denial of Initial License 80040

Except as specified in Section 80030, 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 and regulation.

The licensing agency shall have the authority to deny an application for an initial license if the applicant has failed to pay any civil penalty assessments pursuant to Section 80058 and in accordance with a final judgment issued by a court of competent jurisdiction, unless payment arrangements acceptable to the licensing agency have been made.

An application for initial licensure shall not be denied solely on the basis that the applicant is a parent who has administered or will continue to administer corporal punishment, not constituting child abuse.

An application for licensure shall be denied as specified in health and Safety Code Sections 1.520.1 1(b), (d) and 1550.

Laws & Regulations Question 28

If the application for initial license is denied, the licensing agency must mail the applicant a written notice of denial, which informs the applicant of reasons for denial and right to appeal. The application processing fee shall be forfeited.

An applicant shall have the right to appeal the denial pursuant to Health and Safety Code Section 1526.

Notwithstanding appeal action, the facility is unlicensed and shall not operate pending adoption by the director of a decision on the denial.

Revocation of Suspension of License 80042

(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.

(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 Section 1551.

Inspection Authority of the Licensing Agency 80044

Laws & Regulations Question 76, 86, 96

The licensing agency has the inspection authority specified in the Health and Safety Code 1526.5, 1533, 1534, and 1538

The licensing agency has the authority to interview clients, including children, or staff members without prior consent. The agency will ensure the interviews are private.

The licensing agency has the authority to inspect, audit, and copy client or facility records upon demand during normal business hours, and records may be removed if necessary. Removal of records is subject to Sections 80066 and 80070.

The licensee will ensure that provisions are made for the examination of all records relating to the operation of the facility.

The licensing agency has the authority to observe the physical condition of the client, including conditions that may indicate abuse, neglect, or inappropriate placement, and to have a licensed medical professional examine the client.

Evaluation Visits 80045

Community care facilities will be evaluated according to Health and Safety Code sections 1534 and 1548.

Laws & Regulations Question 52, 64

The Licensing agency may make any number of visits to a facility to determine compliance with law and regulations.

Exclusions 80046

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.

Deficiencies in Compliance 80052

(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. 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. 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 or regulation 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 or regulation, 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. In determining the date for correcting a deficiency, the evaluator shall consider the following factors:

- The potential hazard presented by the deficiency.

- The number of clients affected.

- The availability of equipment or personnel necessary to correct the deficiency.

- The estimated time necessary for delivery, and for any installation, of necessary equipment.

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. 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. The evaluator shall require correction of the deficiency within 24 hours and shall specify on the notice the date by which the correction must be made whenever penalties are assessed pursuant to sections 80054(c), (d) and (e).

(5) The amount of penalty being assessed and the date the penalty begins.

(6) The address and telephone number of the licensing office responsible for reviewing notices of deficiencies for the area in which the facility is located.

Follow-Up Visits to Determine Compliance 80053

A follow-up visit will be conducted to determine compliance with the plan of correction specified in the notice of deficiency.

Laws & Regulations Questions 27 & 109

At a minimum, the follow-up visit will occur within ten working days following the dates of corrections specified in the notice, unless the licensee has already demonstrated correction.

No penalty will be assessed if the follow-up visit does not occur.

If a follow-up visit indicates non-correction of the deficiency, the evaluator will issue notice of penalty, which will be in writing and include:

- (1) The amount of penalty and date due

- (2) The name and address of the agency responsible for collection

When an immediate penalty has been assessed and correction is made when the evaluator is present, a follow-up visit is not required.

Penalties 80054

Laws & Regulations Question 63

A penalty of \$50 per day, per cited violation shall be assessed for serious deficiencies not corrected by the date specified in the notice, up to \$150/day.

An immediate penalty of \$100 per cited violation per day for up to 5 days will be assessed if

anyone required to be fingerprinted under Health and Safety Code 1522(b) has not obtained a California clearance or a criminal record exemption, requested a transfer of a criminal record clearance or requested and be approved for a transfer of an exemption prior to working, residing, or volunteering in the facility as specified in 80019.

Subsequent violations within a 12-month period will result in a civil penalty of \$100 per violation per day for up to 30 days.

The Department may assess civil penalties for continued violations as permitted by Health and Safety Code 1548.

Progressive civil penalties specified below shall not apply.

An immediate penalty of \$150/day will be assessed for sickness, injury, or death of client as result of deficiency.

When a facility is cited for a deficiency and violates the same regulation subsection within 1-2 months, the facility will be cited an immediate penalty of \$150 per cited violation for one day only. Thereafter, the penalty is \$50 per day, per violation until corrected.

When a facility that was cited for a deficiency subject to an immediate penalty assessment violates the same subsection within 12 months, the facility will be cited with an immediate penalty of \$150 per violation for one day only. Thereafter, a penalty of \$150 per day, per cited violation will be assessed until corrected.

If any deficiency is not corrected by the date specified, a penalty will be assessed for each day late until compliance has been demonstrated.

Immediate penalty assessment will begin on the day the deficiency is cited.

If a licensee or representative reports to the agency that a deficiency has been corrected, the penalty will cease that day.

-If the deficiency has not been corrected, civil penalties will continue to accrue from the original date

-If it can be verified that the correction was made prior to the date of notification, the penalty will cease as of the earlier date

If necessary, a site visit will be made within five working days to confirm correction.

If an immediate civil penalty is assessed and the deficiency is correct on the same day, the penalty will still be assessed for that day.

Unless otherwise ordered by the Department, all penalties are due upon receipt of notice for payment and will be paid by check or money order to the agency indicated.

The licensing agency has the authority to file a claim in a court of competent jurisdiction or to take other appropriate action for failure to pay penalties.

Administrative Review 80055

Laws & Regulations Question 83

A licensee or representative may request a review of a notice of deficiency and/or notice of penalty within 10 working days of receipt of such notice.

If the deficiency has not been corrected, civil penalties will accrue during the review process.

The review will be conducted by a higher level staff person than the evaluator who issued the notice.

If the reviewer determines that the notice of deficiency or penalty was not issued or assessed in accordance with applicable statutes and regulations of the Department, or that other circumstances existed, he/she may amend or dismiss the notice.

The reviewer may extend the date specified for correction if warranted.

The licensee is responsible for paying civil penalties.

Unless otherwise provided, the transfer, surrender, forfeiture, or revocation of a license will not affect the licensee's responsibility or paying any civil penalties accrued while the license was in effect.

The Department has the authority to deny or revoke and license for failure to pay civil penalties.

The Department has the authority to approve payment arrangements, including the form of payment.

Laws & Regulations Question 29

The licensee's failure to pay penalties pursuant to a payment plan approved by the Department may result in denial or revocation of any license or any other appropriate action.

Any denial or revocation of license for failure to pay penalties may be appealed as provided by Health and Safety Code Section 1551.

Exemption from Civil Penalties 80056

Civil penalties shall not be assessed against any governmental entity, including a state, or city, holding a community care facility license.

Unlicensed Facility Penalties 80058

(a) A penalty of \$200 per day shall be assessed for the operation of an unlicensed facility under either of the following conditions:

(1) The operator has not submitted a completed application for licensure within 15 calendar days of issuance of the Notice of Operation in

Violation of Law pursuant to Section 80006, and continues to operate. For purposes of this section, an application shall be deemed completed if it includes the information required in Section 80018. The completed application shall be deemed to be submitted when received by the licensing agency.

(2) Unlicensed operation continues after denial of the initial application. Notwithstanding any appeal action, facility operation must cease within 10 calendar days of the mailing of the notice of denial or upon receipt of the denial notice by the operator, whichever occurs first.

(b) The \$200 per day penalty shall be assessed for the continued operation of an unlicensed facility as follows:

(1) On the 16th calendar day after the operator has been issued the Notice of Operation in Violation of Law, and has not submitted a completed application as required. The \$200 per day penalty shall continue until the operator ceases operation, or submits a completed application pursuant to Sections 80058(a)(1)(A) and (B).

(2) Within 10 calendar days of the mailing of the notice of denial or upon receipt of the denial notice by the operator, whichever occurs first. The \$200 per day penalty shall continue until the operator ceases operation.

(c) If the unlicensed operator or his/her representative reports to the licensing agency that unlicensed operation, as defined in Section 1503.5 of the Health and Safety Code, has ceased, the penalty shall cease as of the day the licensing agency receives the notification.

(1) A site visit shall be made immediately or within five working days to verify that the unlicensed facility operation has ceased.

(2) Notwithstanding (c) above, if the unlicensed facility operation has not ceased, penalties shall continue to accrue without interruption from the date of initial penalty assessment.

(d) All penalties shall be due and payable upon receipt of the Notice for Payment from the licensing agency, and shall be paid by check or money order made payable to the agency indicated in the notice.

(e) The licensing agency shall have the authority to file a claim in a court of competent jurisdiction or to take other appropriate action for failure to pay penalties as specified in (d) above.

Unlicensed Facility Administrative Appeal 80059

(a) An unlicensed facility operator or his/her representative shall have the right to appeal the penalty assessment within 10 working days after service of the penalty assessment. If the unlicensed facility operation has not ceased, the \$200 per day penalty shall continue to accrue during the appeal process.

(b) The appeal review shall be conducted by a higher level staff person than the evaluator who issued the penalty.

(c) If the reviewer of the appeal determines that the penalty assessment was not issued in accordance with applicable statutes and regulations of the Department, he/she shall have the authority to amend or dismiss the penalty assessment.

Reporting Requirements 80061

Each licensee or applicant must provide to the agency reports as required by the Department, including those specified below.

Laws & Regulations Questions 82, 84; Admission & Retention Question 36

If during the operation of the facility and of the events specified below occur, 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 below must be submitted to the licensing agency within seven days following the occurrence.

Events Reported:

(1) Death of a client

(2) In a residential facility, death of a client as a result of injury, abuse, or other non-natural causes, regardless of where it occurred. This includes a death outside the facility.

-The licensee must obtain and maintain in files a certified copy of the death certificate as soon as it is available, and send it to the Department immediately.

-For Regional Center clients, the licensee must also send a copy to the Regional Center.

(3) In an adult CCF, the use of an Automated External Defibrillator

(4) Any injury to a client that requires medical treatment

(5) Any unusual incident or client absence that threatens the emotional health or safety of any client

(6) Any suspected physical or psychological abuse of a client

(7) Epidemic outbreaks

(8) Poisonings (must also be reported to local fire authority or State Fire Marshal within 24 hours)

(9) Catastrophes, including fires or explosions

Any event (1)-(8) must also be reported to the client's authorized representative.

Any event (5)-(7) must also be reported to the local health officer when appropriate pursuant to title 17, California Administrative Code, sections 2500, 2502, and 2503.

Information provided:

- (1) Client's name, age, sex, date of admission
- (2) Date and nature of event
- (3) Attending physician's name, findings, and treatment
- (4) Disposition of the case

Laws & Regulations Questions 91, 93

The below must be reported to the licensing agency within 10 working days following the occurrence:

- (1) The organizational changes specified in 80034
- (2) Any change in the licensee's or applicant's mailing address
- (3) Any change of the CEO of a corporation or association, including the CEO's name, address, and fingerprints as specified in 80019
- (4) Any changes in the plan of operation that affect the services to client

Licensees must send copies of all substantiated complaints to board members of the licensed facility, parents, legal guardians, conservators, client right advocates or placement agencies, as designated in each client's placement agreement in accordance with Health and Safety Code section 1538.5.

Finances 80062

(a) The licensee shall meet the following financial requirements:

- (1) Development and maintenance of a financial plan which ensures resources necessary meet operating costs for care and supervision of clients.

- (2) Maintenance of financial records.

(3) Submission of financial reports as required upon the written request of the department or licensing agency. Such request shall explain the necessity for disclosure. 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.

Accountability 80063

The licensee, whether an individual or other entity, is accountable for the general supervision of the licensed facility, and for the establishment of policies concerning its operation. If the licensee is a corporation or an association, the governing body shall be active and functioning in order to ensure such accountability.

Administrator Qualifications and Duties 80064

(a) The administrator shall have the following qualifications:

- (1) Attainment of at least 18 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 and regulation.
- (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.

(b) Each licensee shall make provision for continuing operation and carrying out of the administrator's responsibilities during any absence of the administrator.

(c) The licensee, if an individual, or any member of the governing board of the licensed corporation or association, shall be permitted to be the administrator provided that he/she meets the qualifications specified in this section, and in applicable regulations in Chapters 2 through 7.

Personal Rights 80072

Laws & Regulations Question 58

Except for children's residential facilities, each client has the following personal rights:

(1) Dignity in personal relationships with staff/others

(2) Safe, healthful, comfortable accommodations, furnishings, and equipment to meet his/her needs

(3) Be free from corporal or unusual punishment, infliction of pain, humiliation, ridicule, coercion, threat, mental abuse, or other actions of a punitive nature, including: interference with daily living functions, including eating, sleeping, or toileting; or withholding of shelter, clothing, medication or aids to physical functioning.

(4) To be informed (or have representative informed) by the licensee of the provisions of law regarding complaints, including the address and phone number of the complaint receiving unit of the licensing agency, and of information regarding confidentiality.

(5) To be free to attend religious services and receive visits from a spiritual advisor of his/her

choice. Attendance at religious services in or outside the facility shall be completely voluntary.

(6) To leave or depart the facility at any time. The licensee may set curfews or other house rules for the protection of clients. This right does not apply to minors or other clients who have a guardian, conservator, or other legal authority.

(7) Not to be locked in any room, building, or premises by day or night. The licensee may lock exterior doors and windows and establish house rules for the protection of clients as long as clients may exit the facility. The licensee may use means other than locking to secure doors and windows only with prior approval of the agency.

(8) Not to be placed in any restraining device. Postural supports may be used under the following conditions.

Physical Needs Question 32

Postural supports are limited to:

- Braces
- Spring Release Trays
- Soft ties

Postural Supports Used For:

- Body position and balance
- Improve a client's mobility and independent functioning
- To position rather than restrict movement to prevent falling out of bed, a chair, etc.

Physical Needs Question 33

Physician-prescribed orthopedic devices such as braces or casts for support of a weakened body part or correction of body parts are considered postural supports.

Physical Needs Question 31

A written order from the client's physician indicating the need for the postural support shall be maintained in the client's record. Postural supports shall be fastened or tied in a manner that permits quick release by the client.

Prior to the use of postural supports that cause the client to become non-ambulatory, the licensee shall ensure that a fire clearance, as required by Section 80020, has been secured.

Under no circumstances shall postural supports include tying of, or depriving or limiting the use of, a client's hands or feet.

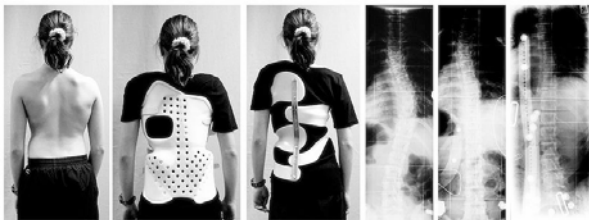
Laws & Regulations Questions 19, 89



A bed rail that extends from the head half the length of the bed and used only for assistance with mobility shall be allowed.

Laws & Regulations Questions 5, 48

A bed rail that extends from the head half the length of the bed and used only for assistance



with mobility shall be allowed. Bed rails that extend the entire length of the bed are prohibited except for clients who are currently receiving hospice care and have a hospice care plan that specifies the need for full bed rails.

(9) To receive or reject medical care or services, except for minors and other clients who have a guardian, conservator, or other legal authority.

(10) To be informed of the facility's policy concerning family visits and other communication as specified in Health and Safety Code section 1512.

At admission, the client and representative will be personally advised and given a list of the rights specified in Sections 80072 and in the applicable Personal Rights sections of chapters 2-7. This information and the visiting policy shall be prominently posted in an accessible area. The licensee will ensure each client is accorded the personal rights in this section and in chapters 2-7.

Telephones 80073

All facilities shall have telephone service on the premises.

Alterations to Existing Buildings or New Facilities 80086

(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.

Buildings and Grounds 80087

The facility shall be clean, safe, sanitary and in good repair at all times.

The licensee shall take measures to keep the facility free of flies and other insects.

The licensee shall provide for the safe disposal of water and other chemicals used for cleaning purposes.

All clients shall be protected against hazards within the facility through provision of the

protective devices including but not limited to nonslip material on rugs.

All outdoor and indoor passageways, stairways, inclines, ramps, open porches and other areas of potential hazard shall be kept free of obstruction.

General permanent or portable storage space shall be available for the storage of facility equipment and supplies. Facility equipment and supplies shall be stored in this space and shall not be stored in space used to meet other requirements.

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.

Fences must 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, 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.

If licensed prior to June 1, 1995, facilities with existing pool fencing shall be exempt from the fence requirements specified above until such fence is replaced or structurally altered.

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 above.

All in-ground pools, and above-ground pools which cannot be emptied after each use shall have an operative pump and filtering system.

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.

Storage areas for poisons, and firearms and other dangerous weapons shall be locked.

Laws & Regulations Question 97

In lieu of locked storage of firearms, the licensee may use trigger locks or remove the firing pin.

Firing pins and ammunition shall be stored and locked separately from firearms.

Medicines shall be stored as specified in Section 80075 and separately from other items specified above.

The items specified above shall not be stored in food storage areas or in storage areas used by or for clients.

Fixtures, Furniture, Equipment, and Supplies 80088

Laws & Regulations Questions 22, 67, 99

Must maintain comfortable temperature for clients, between 68 and 85 degrees Fahrenheit. In areas of extreme heat, the maximum temperature is 30 degrees below the outside temperature.

This regulation does not prohibit clients from adjusting individual thermostatic controls.

Window screens must be in good repair, free of insects, dirt, and debris.

Fireplaces and open-faced heaters must be inaccessible to clients.

The licensee must provide lamps or lights as necessary in all rooms for comfort and safety of all persons.

Faucets used by clients for personal care must provide hot water.

Laws & Regulations Questions 21, 66

Hot water temperature controls must automatically regulate temperature to attain a temperature of no less than 105 degrees and not more than 120 degrees.

Laws & Regulations Question 92

Taps delivering water at or above 125 degrees must be prominently identified by warning signs.

All toilets, handwashing, and bathing facilities must be safe and sanitary. Additional equipment, aids, and conveniences shall be provided in facilities accommodating physically handicapped clients who require such items.

Solid waste must be stored, located, and disposed of in a manner that will not transmit communicable diseases or odors, create a nuisance, or breed insects or rodents.

All containers that store solid waste shall have tight-fitting covers, be in good repair, and be leakproof and rodent-proof.

Solid waste containers receiving putrescible waste must be emptied at least once per week.

Each movable bin shall provide for suitable access and a drainage device to allow complete cleaning at the storage area.

The licensee shall provide various linens to meet the needs of the program of services being offered.

General 85000

(a) Adult residential facilities, as defined in section 80001. a.(5) shall be governed by the provisions specified in this chapter and in chapter 1: General Requirements.

Definitions 85001

In addition to Section 80001, the following shall apply.

(a)(1) "Adult protective services agency" means a county welfare department, as defined in Welfare and Institutions Code Section 15610. 1 3.

(a)(2) "Advance Health Care Directive" means a written instruction that relates to the provision of health care when the individual is incapacitated. An Advance Health Care Directive includes, but is not limited to, a Power of Attorney for Health Care; an Individual Health Care Instruction; a Request to Forego Resuscitative Measures; or a Do-Not-Resuscitate form. In this written instruction, a person states choices for medical treatment and/or designates who should make treatment choices if the person creating the advance directive should lose decision-making capacity.

(a)(3) "Allowable Health Condition" means any health condition that the licensee is allowed to care for either in accordance with a specific regulation or with an exception approved by the licensing agency.

(a)(4) "Appropriately Skilled Professional" means an individual that has training and is licensed to perform the necessary medical procedures prescribed by a physician. This term includes, but is not limited to, the following: Registered Nurse (RN); Licensed Vocational Nurse (LVN); Physical Therapist (PT); Occupational Therapist (OT); and Respiratory Therapist (RT). These professionals may include, but are not limited to,

those persons employed by a home health agency, the resident, or adult residential facilities.

(c)(1) "Certificate holder" means a person who has a current administrator's certificate issued by the Department regardless of whether the person is employed as an administrator in an adult residential facility.

(c)(2) "Certified administrator" means a person who has been issued an Administrator Certification by the Department and whose certification is current.

(c)(3) "Classroom Hour" means 60 minutes of classroom instruction with or without a break. It is recommended that no more than 20 minutes of break time be included every four hours of instruction. No credit is given for meal breaks.

(c)(4) "Co-locate" means that a vendor applicant is approved for more than one program type, i.e., ARF, RCFE, GH, and has received approval to teach specific continuing education courses at the same time and at the same location. Co-location is allowed for Continuing Education Training Program vendors only.

(c)(5) "Complete Request" means the vendor applicant has submitted and the Department has received all required information and materials necessary to approve or deny the request for certification program and/or course approval.

(c)(6) "Continuing Education Training Program Vendor" means a vendor approved by the Department to provide Continuing Education training courses to adult residential facility administrators and certificate holders to qualify them for renewal of their adult residential facility administrator certificate.

(c)(7) "Course" means either, (1) a quarter-or-semester-long structured sequence of classroom instruction covering a specific subject, or (2) a one-time seminar, workshop or lecture of varying duration.

(d)(1) "Do-Not-Resuscitate (DNR) Form" means the pre-hospital do-not-resuscitate forms developed by the California Emergency Medical Services Authority and by other local emergency medical services agencies. These forms, when properly completed by a client or, in certain instances, a client's Health Care Surrogate Decision Maker, and by a physician, alert pre-hospital emergency medical services personnel to the client's wish to forego resuscitative measures in the event of the client's cardiac or respiratory arrest.

(f)(1) "Facility Hospice Care Waiver" means a waiver from the limitation on retention of clients who require more care and supervision than ordinarily would be permitted in an Adult Residential Facility, and clients who are bedridden other than for a temporary illness. This waiver granted by the Department will permit the licensee to retain a designated maximum number of terminally ill clients who are receiving services from a Hospice Agency. The waiver will apply only to those clients who are receiving hospice care in compliance with a Hospice Care Plan meeting the requirements of Section 85075.1.

(h)(1) "Health Care Provider" means that person or persons described in Probate Code Section 4621.

(h)(2) "Health Care Surrogate Decision Maker" means an individual who participates in health care decision-making on behalf of an incapacitated client. This individual may be formally appointed (e.g., by the client in an Advance Health Care Directive or by a court in a conservatorship proceeding) or be recognized by virtue of a relationship with the client (e.g., the client's next of kin). The licensee or any staff member of the facility shall not be appointed by any client to be a Health Care Surrogate Decision Maker.

(h)(3) "Hospice or Hospice Agency" means an entity that provides hospice services to terminally ill persons. This entity is Medicare certified and holds either a Hospice license or a Home Health Agency license from the California

Department of Health Services. The definition includes any organization(s), appropriately skilled professional(s), or other professional person(s) or entity(ies) that are subcontracted by the hospice to provide services to the client. The hospice agency providing services in an Adult Residential Facility shall not subcontract with the licensee or any facility staff for the provision of services.

(h)(4) "Hospice Care Plan" means the hospice's written plan of care for a terminally ill client. The hospice shall retain overall responsibility for the development and maintenance of the plan and quality of hospice services delivered.

(i)(1) "Initial Certification Training Program Vendor" means a vendor approved by the Department to provide the initial 35 hour certification training program to persons who do not possess a valid adult residential facility administrator certification.

(2) "Initial Vendor Application" means the application form, LIC 9141, used to request approval from the Department to become a vendor for the first time.

(l)(1) "Licensed Mental Health Professional" means a licensed clinical psychologist; a psychiatrist; a licensed clinical social worker; or a licensed marriage, family and child counselor.

(n)(1) "Needs and Services Plan" means a written plan that identifies the specific needs of an individual client, including those items specified in Sections 80068.2 and 85068.2, and delineates those services necessary to meet the client's identified needs.

(r)(1) "Renewal Vendor Application" means the application form, LIC 9141, used to request approval from the Department to continue another two (2) years as an approved vendor.

(t)(1) "Terminally 111 Client" means a client who has a prognosis by his/her attending physician that the client's life expectancy is six months or less if his/her illness or condition runs its normal course.

(v)(1) "Vendor" means a Department-approved institution, association, individual(s), or other entity that assumes full responsibility or control over a Department-approved Initial Certification Training Program and/or a Continuing Education Training Program.

(v)(2) "Vendor Applicant" means any institution, association, individual) or other entity that submits a request for approval of an Initial Certification Training Program and/or a Continuing Education Training Program.

Definitions -- Forms 85002

The following forms, which are incorporated by reference, apply to the regulations in Title 22, Division 6, Chapter 6 (Adult Residential Facilities).

(a) LIC 9139 (2/01) — Renewal of Continuing Education Course Approval, Administrator Certification Program.

(b) LIC 9140 (6/01) — Request for Course Approval, Administrator Certification Program.

(c) LIC 9141 (5/01) — Vendor Application/Renewal, Administrator Certification Program.

(d) LIC 9142a (2/01) — Roster of Participants — For Vendor Use Only — 35/40 Hour Initial Or CEU Courses, Administrator Certification Program.

Posting of License 85009

Laws & Regulations Question 33

In facilities with a licensed capacity of seven or more, the license shall be posted in a prominent, publicly accessible location in the facility.

Laws & Regulations Question 98

In facilities with a licensed capacity of six or fewer the license shall be retained in the facility and be available for review upon request.

Application for License 85018

Each applicant must submit a financial plan of operation on forms approved or provided by the department.

Laws & Regulations Question 77

Start-up funds shall be available which include funds for the first three months of operation.

The licensing agency has the authority to require written verification of the availability of the funds required.

Laws & Regulations Question 26

Each applicant must submit the name, residence, and mailing addresses of the facility administrator, a description of his/her background and qualifications, and documents verifying education and administrator certification.

Plan of Operation 85022

In addition to Section 80022, the following shall apply. The plan of operation shall contain written evidence of arrangements for any consultants and community resources which are to be utilized to meet regulatory requirements or requirements of the facility's plan of operation.

Basic Services 85060

(a) For SSI/SSP recipients who are residents, the basic services shall be provided and/or made available at the basic rate with no additional charge to the resident.

(1) This shall not preclude the acceptance by the facility of voluntary contributions from relatives or others on behalf of an SSI/SSP recipient.

(2) An extra charge to the resident shall be allowed for a private room if a double room is made available but the resident prefers a private room, provided the arrangement is documented in the admissions agreement and the charge is limited to 10% of the Board and Room portion of the SSI/SSP grant.

(3) An extra charge to the resident shall be allowed for provision of special food services or products beyond that specified in Section 80076(a)(2) and (a)(4) when the resident wishes to purchase the services and agrees to the extra charge in the admissions agreement.

Reporting Requirements 85061

(a) In addition to Section 80061, the following shall apply.

(b) The licensee shall notify the Department, in writing, within 30 days of a change of administrator. The notification shall include the following:

(1) Name, and residence and mailing addresses of the new administrator.

(2) Date he/she assumed his/her position.

(3) Description of his/her background and qualifications, including documentation of required education and administrator certification. A photocopy of the documentation shall be permitted.

Personnel Requirements 85065

The licensee must employ staff as necessary to ensure provision of care and supervision to meet client needs.

The licensee must employ support staff as necessary to perform office work, cooking, house cleaning, laundering, and maintenance of buildings, equipment and grounds.

The licensee will ensure that the following personnel requirements are met in the provision of planned activities:

Management Question 13

(1) In facilities with a licensed capacity of 16 to 49 clients, one employee shall be designated by the administrator to have primary responsibility for the organization, conduct and evaluation of planned activities.

-The designated employee must have at least six months of experience in organizing and providing planned group activities.

(2) In facilities with a licensed capacity of 50 or more clients, one employee will have full-time responsibility for the organization, conduct and evaluation of planned activities, and shall be given assistance as necessary in order to ensure that all clients participate in accordance with their interests and abilities.

-The designated employee must have at least one year of experience in organizing and providing planned group activities, and must be knowledgeable in the evaluation of client needs, the supervision of other employees, and the training of volunteers.

(3) Participation of volunteers in planned activities must be encouraged. Such volunteers shall be under the direction and supervision of the employee designated as responsible for the activity program.

The licensee must ensure that the following personnel requirements are met in the provision of food service:

(1) Employment, training and scheduling of food service personnel shall ensure that client's food service needs are met by the facility.

Management Question 27

(2) In facilities with a licensed capacity of 16 or more clients an employee will be designated to have primary responsibility for food planning, preparation and service.

-The designated employee shall receive on-the-job training or shall have related experience as evidenced by safe and effective job performance.

Management Question 2

(3) In facilities with a licensed capacity of 50 or more clients, and which provide three meals per day, an employee will be designated to have full-time responsibility for the operation of the food service program and must possess either:

-One year of experience in food preparation and service accommodating 50 or more people

-Two years of experience in food preparation and service accommodating 16-49 people

Physical Needs Question 26

(4) If the employee designated in a facility for 50 or more clients is not a nutritionist, dietitian, or a home economist, provision there must be regular consultation from a person so qualified. Such consultation must be during at least one meal preparation and service, on the day of the consultation, and must include review and approval of the facility's food planning, preparation and service procedures. A written record of the frequency, nature and duration of the consultant's visits must be secured from the consultant and maintained in the facility. The licensing agency may require more frequent consultation when it determines a need.

The licensee must ensure that all direct services to clients requiring specialized skills are performed by personnel who are licensed or certified.

Where no license or certification is available for a particular skill, prior approval of the licensing agency shall be required in order to have the service provided by an unlicensed or uncertified person.

Laws & Regulations Question 110; Management Questions 22, 38

Day-Staff Client Ratio

Whenever a client who relies upon others to perform all activities of daily living is present, the following minimum staffing requirements must be met:

(1) For Regional Center clients, staffing shall be maintained as specified by the Regional Center but no less than one direct care staff to three such clients.

(2) For all other clients, there shall be a staff-client ratio of no less than one direct care staff to three such clients.

Night Supervision

Night supervisory staff must meet the personnel requirements specified in Section 80065, and the requirements below.

Management Questions 12, 36, 43, 51

Employees providing night supervision from 10:00 p.m. to 7:00 a.m. must be available to assist in the care and supervision of clients in the event of an emergency, and must have received training in the following:

- (1) The facility's planned emergency procedures
- (2) First aid, as specified in Section 80075

Management Question 34

In facilities providing care and supervision for 15 or fewer clients, there must be at least one person on call on the premises.

In facilities providing care and supervision for 16 to 100 clients, there must be at least one person

on duty, on the premises and awake. Another person must be on call and capable of responding within 30 minutes.

In facilities providing care and supervision for 101 to 200 clients, at least one person must be on call, on the premises; another qualified person shall be on duty, on the premises and awake; and another person must be on call and capable of responding within 30 minutes.

In facilities providing care to seven or more clients who rely upon others to perform all activities of daily living, there must be at least one person on duty, on the premises and awake.

-For every additional 14 such clients, there must be one additional person on duty, on the premises and awake.

In facilities providing care to Regional Center clients who rely upon others to perform all activities of daily living, night supervision must be maintained as required by the Regional Center, but no less than the staff-client ratio specified previously.

For every additional 100 clients, or fraction thereof, for whom care and supervision is being provided, there must be one additional person on duty, on the premises and awake.

Management Question 9

In facilities required to have a signal system, at least one staff person must be responsible for responding to the signal system.

Eviction Procedures 85068.5

Admission & Retention Questions 14, 18

The licensee can evict a client by serving a 30-day written notice for any of the following reasons:

- (1) Nonpayment within ten days of due date

- (2) Failure of client to comply with law after receiving notice of violation
- (3) Failure of client to comply with facility policies
- (4) It is determined that the client's needs cannot be met and the client has been given an opportunity to relocate as specified in Section 85068.3
- (5) Change of use of the facility.

The licensee can evict with 3-day written notice if the following requirements are met:

- (1) Licensing agency has granted prior written/ documented approval for the eviction
 - Licensing agency shall reply to a request within two days; if not, non- response shall be considered approval.
- (2) Client's behavior is a threat to mental or physical health or safety or that of others.

Licensee must include in the notice the reasons for the eviction, including specific facts. Licensee must mail a copy of the notice to the client's authorized representative if any.

Laws & Regulations Question 16

A written report of any eviction must be sent to licensing agency within five days of the eviction.

Personal Rights 85072

Laws & Regulations Question 7

The licensee shall insure that each client is accorded these personal rights:

- (1) To visit the facility with his/her relatives or authorized representative prior to admission
- (2) To have the facility inform relatives and authorized representative of any activities related to care and supervision, including modifications

to the needs and services plan

- (3) To have communications to the facility from relatives and authorized representative answered promptly and completely
- (4) To have visitors, including advocacy representatives, visit privately during waking hours, as long as this does not infringe upon the rights of other clients
- (5) To wear his/her own clothes
- (6) To possess and use his/her own personal items, including toiletries
- (7) To possess and control his/her own cash resources
- (8) Access to individual storage space for private use
- (9) To have access to telephones to make and receive confidential calls, so long as it does not infringe upon the rights of other clients or restrict availability of the telephone during emergencies. The licensee can require reimbursement from the client or authorized representative for long distance calls. In the event that required reimbursement is not received, the licensee may prohibit long distance calls.
- (10) To mail and receive unopened correspondences
- (11) To receive assistance in exercising the right to vote
- (12) To move from the facility in accordance with the Admission Agreement

Personal Services 85077

Laws & Regulations Question 112

Licensees shall provide necessary personal assistance and care, as indicated in the needs and services plan, with activities of daily living

including but not limited to dressing, eating, and bathing.

Licensees shall provide basic laundry services, including washing and drying of clients' personal clothing.

Responsibility for Providing Care and Supervision 85078

In addition to Section 80078, the following shall apply. The licensee shall provide those services identified in the client's needs and services plan as necessary to meet the client's needs.

Buildings and Grounds 85087

Laws & Regulations Questions 68, 85

Not more than two clients shall sleep in a bedroom.

Bedrooms must be large enough to allow for easy passage and comfortable use of any required client-assistive devices, including but not limited to wheelchairs, walkers, or oxygen equipment, between beds and other items of furniture specified in Section 85088(c).

No room commonly used for other purposes shall be used as a bedroom for any person.

Laws & Regulations Question 45

No client bedroom shall be used as a public or general passageway to another room, bath or toilet.

Stairways, inclines, ramps, open porches, and areas of potential hazard to clients whose balance or eyesight is poor shall not be used by clients unless such areas are well lighted and equipped with sturdy hand railings.

Laws & Regulations Question 55

Facilities shall meet the following requirements in laundry areas:

- Space and equipment for washing, ironing and mending of personal clothing
- Space used for soiled linen and clothing shall be separated from the clean linen and clothing storage and handling area

In facilities with a licensed capacity of 16 or more clients, space used to do the laundry shall not be part of an area used for storage of any item other than items necessary for laundry activities.

Laws & Regulations Questions 87, 111

Facilities with a licensed capacity of 16 or more clients shall meet the following requirements:

- There shall be space available in the facility to serve as an office for business, administration and admission activities.
- There shall be a private office in which the administrator may conduct private interviews.
- There shall be a reception area and a restroom facility designated for use by visitors.

Dining rooms or similar areas for food service shall be provided as specified in Section 85076.

Outdoor Activity Space 85087.2

- (a) Outdoor activity areas shall be provided which are easily accessible to clients and protected from traffic.
- (b) The outdoor activity area shall provide a shaded area, and shall be comfortable, and furnished for outdoor use.

Indoor Activity Space 85087.3

As a condition of licensure, there shall be common rooms, including a living room, dining room, den or other recreation/activity room, which provide the necessary space and/or separation to promote and facilitate the program of planned activities specified in Section 85079, and to prevent such activities from interfering with other functions.

At least one such room shall be available to clients for relaxation and visitation with friends and/or relatives.

Fixtures, Furniture, Equipment, and Supplies 85088

Laws and Regulations Questions 49, 69

At least one toilet and washbasin for each six persons residing in the facility, including clients, family and personnel.

At least one bathtub or shower for each ten persons.

Laws and Regulations Question 47

Toilets and bathrooms must be near client bedrooms.

Individual privacy shall be provided in all toilet, bath and shower areas.

Laws and Regulations Question 53

An individual bed, except that couples shall be allowed to share one double or larger sized bed, maintained in good repair, and equipped with good bed springs, a clean mattress and pillow(s).

Laws and Regulations Questions 14, 56

Fillings and covers for mattresses and pillows shall be flame retardant.

No adult residential facility shall have more beds for client use than required for the maximum capacity approved by the licensing agency.

-This requirement does not apply to beds made available for illness or separation of others in the isolation room or area as required by Section 80075.

Laws and Regulations Question 15

Bedroom furniture including, in addition to the above, for each client: a chair, a night stand, and a lamp or lights necessary for reading.

Two clients sharing a bedroom shall be permitted to share one night stand.

Portable or permanent closets and drawer space in each bedroom to accommodate the client's clothing and personal belongings.

A minimum of two drawers or eight cubic feet (. 2264 cubic meters) of drawer space, whichever is greater, shall be provided for each client.

Clean linen in good repair, including lightweight, warm blankets and bedspreads; top and bottom bed sheets; pillow cases; mattress pads; rubber or plastic sheeting, when necessary; and bath towels, hand towels and wash cloths.

The quantity of linen provided shall permit changing the linen at least once each week or more often when necessary to ensure that clean linen is in use by clients at all times.

If the facility operates its own laundry, necessary supplies shall be available and equipment shall be maintained in good repair.

The use of common towels and washcloths shall be prohibited.

Feminine napkins, non-medicated soap, toilet paper, toothbrush, toothpaste, and comb. Clients must have access to at least one washing machine and iron for their personal laundry, provided it can be safely used by the clients.

If necessary, clients on SSI/SSP shall be provided with coins or tokens and laundry supplies.

The licensee shall be permitted to designate a safe location and/or times in which clients shall be permitted to iron.

Admission & Retention Question 45

Emergency lighting, which shall include at a minimum working flashlights or other battery-powered lighting, shall be readily available in areas accessible to clients and staff. No open flame.

Laws and Regulations Question 79

Night lights shall be maintained in hallways and passages to non-private bathrooms.

In all facilities with a licensed capacity of 16 or more clients, and all facilities having separate floors or separate buildings without full-time staff there shall be a signal system which has the ability to meet the following requirements:

- Operation from each client's living unit.
- Transmission of a visual and/or

auditory signal to a central location, or production of an auditory signal at the client's living unit which is loud enough to summon staff.

- Identification of the specific client's living unit from which the signal originates.

Facilities having more than one wing, floor or building shall be allowed to have a separate signal system in each component, as long as they meet the above criteria.

The licensee shall provide and maintain the equipment and supplies necessary to meet the requirements of the planned activity program:

- Daily newspapers, current magazines and a variety of reading materials
- Special Equipment and supplies

necessary to accommodate physically handicapped persons or other persons with special needs shall be provided to meet the needs of the handicapped clients

When not in use, recreational equipment and supplies shall be stored where they do not create

a hazard to clients.

Initial Certification Training Program Approval Requirements 85090

(a) Initial Certification Training Programs shall be approved by the Department prior to being offered to applicants seeking certification.

(b) Any vendor applicant seeking approval of an Initial Certification Training Program shall submit a written request to the Department using forms LIC 9140 and LIC 9141, or a replica. The request shall be signed under penalty of perjury and contain the following:

(1) Name, address and phone number of the vendor applicant requesting approval and the name of the person in charge of the program.

(2) Subject title, classroom hours, proposed dates, duration, time, location and proposed instructor of each component.

(3) Written description and educational objectives for each component.

(4) Qualifications of each proposed instructor as specified in Section 85090(i)(6) below.

(5) Geographic areas in which the Training Program will be offered.

(6) Types of records to be maintained, as required by Section 85090(i)(4) below.

(7) A statement of whether or not the vendor applicant held or currently holds a license, certification or other approval as a professional in a specified field and the certificate or license number(s).

(8) A statement of whether or not the vendor applicant held or currently holds a community care facility license or was or is employed by a licensed community care facility and the license number.

(9) A statement of whether or not the vendor applicant was the subject of any administrative, legal or other action involving licensure, certification or other approvals as specified in Sections 85090(b)(7) and (8) above.

(10) A processing fee of one hundred-fifty dollars (\$150).

(c) Initial Certification Training Program approval shall expire two (2) years from the date the program is approved.

(d) A written request for renewal of the Initial Certification Training Program shall be submitted to the Department using forms LIC 9 140 and LIC 9141 , or a replica, and shall contain the information and processing fee specified in Section 85090(b) above.

(e) If a request for approval or renewal of an Initial Certification Training Program is incomplete, the Department shall, within 30 days of receipt, give written notice to the vendor applicant that:

(1) The request is deficient, describing what documents are outstanding and/or inadequate, and informing the vendor applicant that the information must be submitted within thirty (30) days of the date of notice.

(f) If the vendor applicant does not submit the requested information within 30 days, the request for approval or renewal shall be deemed withdrawn provided that the Department has not denied or taken action to deny the request.

(g) Within thirty (30) days of receipt of a complete request for an approval, the Department shall notify the vendor applicant in writing whether the request has been approved or denied.

(h) The Initial Certification Training Program shall consist of the following components:

(1) A minimum of thirty-five (35) classroom hours on a uniform Core of Knowledge with the following basic curriculum:

-Six (6) hours of instruction in laws, including residents' personal rights, regulations, policies, and procedural standards that impact the operations of adult residential facilities.

-Three (3) hours of instruction in business operations.

-Three (3) hours of instruction in management and supervision of staff.

-Four (4) hours of instruction in the psychosocial needs of the facility residents.

-Three (3) hours of instruction in the use of community and support services to meet residents' needs.

-Four (4) hours of instruction in the physical needs of facility residents.

-Four (4) hours of instruction in the administration, storage, use, prevention of misuse and interaction of drugs commonly used by facility residents.

-Four (4) hours of instruction on admission, retention, and assessment procedures.

(1) Four (4) hours of instruction on nonviolent crisis intervention techniques and reporting requirements.

(2) A standardized test administered by the Department.

-Individuals completing an Initial Certification Training Program must pass the test with a minimum score of seventy percent (70%).

-The test questions shall reflect the hour value of the nine (9) Core of Knowledge areas specified in Section 85090(h)(1)(A) through (I) above.

(i) Initial Certification Training Program vendors shall:

(1) Offer all thirty-five (35) of the classroom hours required for certification. A minimum of ten (10) hours of instruction must be provided by instructor(s) who meets the criteria specified in Section 85090(i)(6)(D).

-Where good faith efforts to employ an instructor who meets the criteria specified

in Section 85090(i)(6)(D) are unsuccessful, vendors may apply to the administrator certification section for a waiver of this requirement.

(2) Establish a procedure to allow participants to make up any component necessary to complete the program.

(3) Submit to the Department within seven (7) days of determination the names of individuals who have completed thirty-five (35) hours of classroom instruction.

(4) Maintain and ensure that written records are available for review by Department representatives. Records shall be maintained for three (3) years. The records shall include the following information:

- Course schedules, dates and descriptions.
- List of instructors and documentation of qualifications of each, as specified in Section 85090(i)(6) below.
- Names of registered participants and documentation of completion of the program.
- Evaluations by participants of courses and instructors.

(5) Ensure that all classes are open to monitoring and inspection by Department representatives.

(6) Have instructors who have knowledge and/or experience in the subject area to be taught and who meet at least one of the following criteria:

- Possession of a four (4) year college degree and two (2) years experience relevant to the course(s) to be taught, or
- Four (4) years experience relevant to the course(s) to be taught, or
- Be a professional in a related field with a valid license to practice in California, or
- Have at least four (4) years experience in California as an administrator of an adult residential facility, within the last eight (8) years, and with a record of administering facilities on substantial compliance, as defined in Section 80001s.(6).

(j) Initial Certification Training Program Vendors shall allow Department representatives to monitor and inspect training programs.

(k) Initial Certification Training Program vendors shall not instruct or "co-locate" more than one program type (ARF, RCFE, GH) at one time.

(l) Initial Certification Training Program vendors that are also seeking certification shall not be permitted to receive credit for attending the vendor's own Initial Certification Training Program.

Denial of Request for Approval of an Initial Certification Training Program 85090.1

(a) The Department may deny a request for approval of an Initial Certification Training Program in accordance with Section 1562.3(h)(1) of the Health and Safety Code. The Department shall provide the applicant with a written notice of the denial.

(b) The applicant may appeal the denial of the application in accordance with Section 1551 of the Health and Safety Code.

(c) Any request for approval submitted by a vendor applicant whose application has been previously denied shall be processed by the Department in accordance with the provisions of Health and Safety Code Section 1520.3(b).

Revocation of an Initial Certification Training Program 85090.2

(a) The Department may revoke an Initial Certification Training Program approval and remove the vendor from the list of approved vendors if the vendor does not provide training consistent with Section 85090, or:

(1) Is unable to provide training due to lack of staff, funds or resources, or

- (2) Misrepresents or makes false claims regarding the training provided, or
- (3) Demonstrates conduct in the administration of the program that is illegal, inappropriate, or inconsistent with the intent or requirements of the program, or

(4) Misrepresents or makes false statements in the vendor application.

(b) The vendor may appeal the revocation in accordance with Health and Safety Code Section 1551.

(c) Any application for approval of an Initial Certification Training Program submitted by a vendor applicant whose approval has been previously revoked shall be processed by the Department in accordance with the provisions of Health and Safety Code Section 1520.3.

Continuing Education Training Program Vendor Requirements 85091

(a) Any vendor applicant seeking approval as a vendor of a Continuing Education Training Program shall obtain vendor approval by the Department prior to offering any course to certificate holders.

(b) Any vendor applicant seeking approval to become a vendor of a Continuing Education Training Program shall submit a written request to the Department using the Initial Vendor Application form, LIC 9141, or a replica. The request shall be signed under penalty of perjury and contain the following:

(1) Name, address and phone number of the vendor applicant requesting approval and the name of the person in charge of the Program.

(2) A statement of whether or not the vendor applicant held or currently holds a license, certification or other approval as a professional in

a specified field and the license or certificate number.

(3) A statement of whether or not the vendor applicant held or currently holds a community care facility license or was or is employed by a licensed community care facility and the license number.

(4) A statement of whether or not the vendor applicant was the subject of any administrative, legal or other action involving licensure, certification or other approvals as specified in Section 8509 1 (b)(2) and (3) above.

(5) A processing fee of one hundred dollars (\$100).

(c) Continuing Education Training Program vendor approval shall expire two (2) years from the date the vendorship is approved by the Department.

(d) A written request for renewal of the Continuing Education Training Program shall be submitted to the Department using the Renewal Vendor Application form, LIC 9141, or a replica, and shall contain the information and processing fee specified in Section 85091(b) above.

(e) If a request for approval or renewal of a Continuing Education Training Program is incomplete, the Department shall, within thirty (30) days of receipt, give written notice to the vendor applicant that:

(1) The request is deficient, describing which documents or information are outstanding and/or inadequate and informing the vendor applicant that the information must be submitted within thirty (30) days of the date of the notice.

(f) If the vendor applicant does not submit the requested information above within thirty (30) days, the request for approval or renewal shall be deemed withdrawn, provided that the Department has not denied or taken action to deny the request.

(g) Within thirty (30) days of receipt of a complete request for an approval or renewal, the Department shall notify the vendor applicant in writing whether the request has been approved or denied.

(h) Continuing Education Training Program vendors shall:

(1) Maintain and ensure that written records are available for review by Department representatives. Records shall be maintained for three (3) years. The records shall include the following:

- Course schedules, dates and descriptions.
- List of instructors and documentation of qualifications of each, as specified in Section 85091(h)(2) below.
- Names of registered participants and documentation of completion of the courses.
- Evaluations by participants of courses and instructors.

(2) Have instructors who have knowledge and/or experience in the subject area to be taught and who meet at least one of the following criteria:

- Possession of a four (4) year college degree and two (2) years experience relevant to the course(s) to be taught, or
- Four (4) years experience relevant to the course to be taught, or
- Be a professional, in a related field, with a valid license to practice in California, or
- Have at least four (4) years experience in California as an administrator of an adult residential facility, within the last eight (8) years, and with a record of administering facilities in substantial compliance as defined in Section 80001s. (6).

(i) Courses approved for continuing education credit shall require the physical presence of the certificate holder in a classroom setting, except that: The Department may approve courses where technology permits the simultaneous and interactive participation of the certificate holder,

provided that such participation is verifiable.

(j) Any changes to courses previously approved by the Department must be submitted and approved by the Department prior to being offered.

(k) Continuing Education Training Program vendors shall allow Department representatives to monitor and inspect Training Programs.

(l) Continuing Education Training Program vendors who teach courses that the Department has approved for more than one program type (ARF, RCFE, GH), may provide "multiple crediting," that is, more than one certification for the course, to those who complete the course satisfactorily.

(m) Continuing Education Training Program vendors that the Department has approved for more than one program type (ARF, RCFE, GH), may "co-locate" or instruct specified courses for more than one program type.

(n) Continuing Education Training Program vendors who are also certificate holders shall not be permitted to receive credit for attending the vendor's own Continuing Education Training Program courses.

Continuing Education Training Program Course Approval Requirements 85091.1

(a) Any Continuing Education Training Program course shall be approved by the Department prior to being offered to certificate holders. At the sole discretion of the Department, continuing education credit may be granted for training provided by the Department's licensing staff.

(b) Any vendor seeking approval of a Continuing Education Training Program course shall submit a written request to the Department using the Request for Course Approval form, LIC 9140, or a replica. The request shall be signed under penalty of perjury and contain the following:

(1) Subject title, classroom hours, scheduled dates, duration, time, location, and proposed instructor of each course.

(2) Written description and educational objectives for each course, teaching methods, course content and a description of evaluation methods.

(3) Qualifications of each proposed instructor, as specified in Section 85091(h)(2).

(4) Types of records to be maintained, as required by Section 85091(h)(1).

(5) A statement of whether or not the proposed instructor held or currently holds a license, certification, or other approval as a professional in a specified field and the license or certificate number.

(6) A statement of whether or not the proposed instructor held or currently holds a community care facility license or was or is employed by a licensed community care facility and the license number.

(7) A statement of whether or not the proposed instructor was the subject of any administrative, legal, or other action involving licensure, certification or other approvals as specified in Sections 85091.1(b)(5) and (6) above.

(c) Course approval shall expire on the expiration date of the vendor's Continuing Education Training Program vendorship approval, as provided in Section 85091(c).

(1) To renew a course, the vendor shall submit a written request to the Department, using the Renewal of Continuing Education Course Approval form, LIC 9139, or a replica.

(d) If a request for approval or renewal of a Continuing Education Training Program course is incomplete, the Department shall, within thirty (30) days of receipt, give written notice to the vendor that:

(1) The request is deficient, describing which documents or information are outstanding and/or inadequate and informing the vendor applicant that the information must be submitted within thirty (30) days of the date of the notice.

(e) If the vendor applicant does not submit the requested information within thirty (30) days, the request for approval or renewal shall be deemed withdrawn, provided that the Department has not denied or taken action to deny the request.

(f) Within thirty (30) days of receipt of a complete request for an approval or renewal, the Department shall notify the vendor applicant in writing whether the course has been approved or denied.

(g) Any changes to previously approved courses must be submitted to the Department for approval prior to being offered, and the request for the change shall contain the information specified in Section 85091.1(b).

(h) Continuing Education Training Program vendors shall allow Department representatives to monitor and inspect training courses.

Administrative Review of Denial or Revocation of a Continuing Education Course 85091.2

(a) A vendor may seek administrative review of the denial or revocation of course approval as follows:

(1) The vendor must request an administrative review in writing, within ten (10) days of receipt of the Department's notice denying or revoking course approval.

(2) The administrative review shall be conducted by a higher-level staff person than the person who denied or revoked course approval.

(3) If the reviewer determines that the denial or revocation of course approval was not issued in accordance with applicable statutes and regulations of the Department, or that other

circumstances existed, that would have led to a different decision, he/she shall have the authority to affirm, amend or reverse the denial or revocation of course approval. The Department shall give written notice of its decision within 10 working days.

(4) The decision of the higher-level staff person shall be final.

Denial of a Request for Approval of a Continuing Education Training Program 85091.3

(a) The Department may deny a request for approval of a Continuing Education Training Program in accordance with Health and Safety Code Section 1562.3(h)(1). The Department shall provide the applicant with a written notice of the denial.

(b) The vendor applicant may appeal the denial in accordance with Health and Safety Code Section 1551.

(c) Any request for approval submitted by a vendor applicant whose application has been previously denied shall be processed by the Department in accordance with the provisions of Health and Safety Code Section 1520.3(b).

Revocation of a Continuing Education Training Program 85091.4

(a) The Department may revoke a Continuing Education Training Program approval and remove the vendor from the list of approved vendors if the vendor does not provide training consistent with Sections 85091 and 85091.1, or:

(1) Is unable to provide training due to lack of staff, funds or resources; or

(2) Misrepresents or makes false claims regarding the training provided; or

(3) Demonstrates conduct in the administration of the program that is illegal, inappropriate, or inconsistent with the intent of the program; or

(4) Misrepresents or makes false statements in the vendor application.

Nonambulatory Person H&S 13131

Laws & Regulations Question 11

"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.

Laws & Regulations Question 12

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.

ADMISSION & RETENTION

Admission Agreements 80068

Admission & Retention Question 29

The licensee shall complete an individual written admission agreement with each client and the client's authorized representative, if any.

Prior to admitting a developmentally disabled adult recommended by a Regional Center, the licensee of an ARF or SRF shall obtain from the Regional Center written certification which states that there was no objection to the placement by any persons specified in Welfare and Institutions Code Section 4803.

The licensee shall maintain a copy of the certification in the client's file.

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 he/she is deaf, hearing-impaired, or otherwise disabled.

Admission & Retention Question 6

Admission agreements must specify the following:

- (1) Basic services
- (2) Available optional services
- (3) Payment provisions, including the following:
 - Basic rate
 - Optional services rates
 - Payor
 - Due date
 - Frequency of payment

Admission & Retention Question 35

(4) Modification conditions, including requirement for provision of at least 30 calendar days prior written notice to the client or his/her authorized

representative of any basic rate change. It shall be acceptable for agreements involving clients whose care is funded at government-prescribed rates to specify that the effective date of a government rate change shall be considered the effective date for basic service rate modifications and that no prior notice is necessary.

(5) Refund conditions

(6) Right of the licensing agency to perform the duties authorized in Section 80044(b) and (c)

(7) Conditions under which the agreement may be terminated. The client's refusal to cooperate with the licensee's implementation of his/her Restricted Health Condition Care Plan and his/her Needs and Services Plan must be one of the conditions.

(8) The facility's policy concerning family visits and other communication with clients, pursuant to Health and Safety Code Section 1512.

(9) If the client in an ARF or SRF has a restricted health condition, the admission agreement must contain a statement that he/she agrees to comply with the Restricted Health Condition Care Plan developed for him/her.

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 **seven calendar days following admission**.

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 above.

The licensee shall retain in the client's file the original of the initial admission agreement and all subsequent modifications.

The licensee shall provide a copy of the current admission agreement to the client and the client's authorized representative, if any.

The licensee shall comply with all terms and conditions set forth in the admission agreement.

Admission & Retention Questions 10, 22, 30

The admission agreement shall be automatically terminated by the death of the client. No liability or debt shall accrue after the date of death.

Needs and Services Plan 80068.2

(a) The licensee shall complete a Needs and Services Plan for each client as required in Sections 81068.2, 82068.2, 82568.2, or 85068.2.

(b) If the client has an existing needs appraisal or individual program plan (IPP) completed by a placement agency, or a consultant for the placement agency, the Department may consider the plan to meet the requirements of this section provided that:

(1) The needs appraisal or IPP is not more than one year old.

(2) The licensee and the placement agency agree that the client's physical, mental and emotional status has not significantly changed since the assessment.

(c) The written Needs and Services Plan specified in Section 80068.2(a), shall be maintained in the client's file.

Modifications to Needs and Services Plan 80068.3

(a) The licensee shall ensure that each client's written Needs and Services Plan is updated as often as necessary to assure its accuracy, but at least annually. These modifications shall be maintained in the client's file.

(b) If the licensee determines that the client's needs cannot be met, the licensee shall inform the client, and his/her authorized representative, if any, and the placement agency, if any, and request that the client relocate to a facility that can provide the needed services. If the client refuses to relocate, the licensee may evict the client in accordance with Section 80068.5.

Eviction Procedures 80068.5

Admission & Retention Questions 26, 27, 37

Except for children's residential facilities, the licensee may, upon 30 days written notice to the client, evict the client only for one or more of the following reasons:

(1) Nonpayment of the rate for basic services within ten days of the due date

(2) Failure of the client to comply with state or local law after receiving written notice of the alleged violation

(3) Failure of the client to comply with general facility policies that are documented in the facility admission agreement, and are for the purpose of making it possible for clients to live together. For a SRF, failure of the client to participate in the services and activities specified in the treatment/rehabilitation plan to the extent of his/her ability

(4) Inability to meet the client's needs. A Needs and Services Plan modification must have been performed, which determined that the client's needs cannot be met by the facility and the client has been given the opportunity to relocate

(5) The client refuses to comply with his/her Restricted Health Condition Care Plan

(6) Change of use of the facility.

The licensee shall obtain prior written approval from the Department to evict the client upon three days written notice to quit and upon

a finding of good cause. Good cause exists if the client engages in behavior that threatens the mental and/or physical health or safety of himself/herself or others.

Failure of the Department to reply to the request for approval within two working days shall be considered approval.

The notice to quit shall state the reasons for the eviction, with specific facts supporting the reason for the eviction, including the date, place, witnesses, if any, and circumstances.

Admission & Retention Question 43

When serving the client with either a 30-day or a 3-day notice to quit, the licensee shall, on the same day, overnight mail or fax a copy of the notice to the client's authorized representative, if any, or responsible person if there is no authorized representative.

The licensee shall mail or fax to the Department a copy of the 30-day written notice in accordance with the above within five days of giving the notice to the client.

Upon request of a client or his/her authorized representative or responsible person, the Department will investigate the reasons for the eviction pursuant to the provisions of Sections 1538 and 1569.35 of the Health and Safety Code.

Nothing in this section precludes the licensee or client from invoking any other available remedy.

Client Medical Assessments 80069

(a) Except for licensees of ARFs and SRFs, prior to or within 30 calendar days following the acceptance of a client, the licensee shall obtain a written medical assessment of the client, as specified in Section (c), which enables the licensee to determine his/her ability to provide necessary health related services to the client. The assessment shall be used in developing the

Needs and Services Plan. The assessment shall be performed by a licensed physician or designee, who is also a licensed professional, and the assessment shall not be more than one year old when obtained.

(b) In ARFs and SRFs, prior to accepting a client into care, the licensee shall obtain and keep on file documentation of the client's medical assessment. Such assessment shall be performed by a licensed physician, or designee, who is also a licensed professional, and the assessment shall not be more than one year old when obtained.

(c) The medical assessment shall include the following:

(1) The results of an examination for communicable tuberculosis and other contagious/infectious diseases.

(2) Identification of the client's special problems and needs.

(3) Identification of any prescribed medications being taken by the client.

(4) A determination of the client's ambulatory status, as defined by Section 8000 I(n)(2).

(5) Identification of physical restrictions, including any medically necessary diet restrictions, to determine the client's capacity to participate in the licensee's program.

(d) In addition to Section 80069(c), the medical assessment for clients in ARFs and SRFs shall include the following:

(1) A physical examination of the person, indicating the physician's primary diagnosis and secondary diagnosis, if any.

(2) Identification of other medical conditions, including those described in Section 80092 which are restricted and Section 80091, which would preclude care of the person by the licensee.

(3) Documentation of prior medical services and history.

(4) Current medical status including, but not limited to, height, weight, and blood pressure.

(5) 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.

Functional Capabilities Assessment 80069.2

(a) In order to determine whether the facility's program meets a client's service needs, the licensee of an ARF or SRF shall assess the client's need for personal assistance and care by determining his/her functional capabilities. The assessment shall be in writing, shall be used in developing the Needs and Services Plan, and shall include, but not be limited to the following activities:

(1) Bathing:

- Does not bathe or shower self.
- Performs some bathing or showering tasks.
- Bathes or showers self independently.

(2) Dressing:

- Does not dress self.
- Puts on some clothing by self.
- Dresses self completely.

(3) Grooming:

- Does not tend to own personal hygiene.
- Tends to some personal hygiene tasks.
- Tends to own personal hygiene.

(4) Toileting:

- Not toilet trained.

-Does not toilet by self.

-Goes to toilet by self.

(5) Transferring:

- Unable to move in and out of a bed or chair.
- Needs assistance to transfer.
- Is able to move in and out of a bed or chair.

(6) Repositioning:

- Unable to reposition.
- Repositions from side to side.
- Repositions from front to back and back to front.

(7) Wheelchair:

- Unable to sit without support.
- Sits without support.
- Needs assistance moving wheelchair.
- Moves wheelchair independently.
- Does not use wheelchair.

(8) Continence:

- No bowel and/or bladder control.
- Some bowel and/or bladder control.
- Use of assistive devices, such as a catheter.
- Complete bowel and/or bladder control.

(9) Eating:

- Does not feed self.
- Feeds self with assistance from another person.
- Feeds self completely.

(b) Assessment of the client's need for assistance shall include consideration of his/her physical condition affecting participation in his/her own care, including:

(1) Vision:

- Severe/profound impairment.
- Mild/moderate impairment.
- No vision impairment.

(2) Hearing:

- Severe/profound loss.

- Mild/moderate loss.
- No hearing loss.

(3) Communication:

- Does not express nonverbally.
- Does not express verbally.
- Expresses by sounds or movements.
- Expresses self well, both verbally and nonverbally.

(4) Walking:

- Does not walk.
- Walks with support.
- Walks well alone.

(5) Medical history and conditions.

(6) Need for prescribed and non-prescribed medications.

(c) Assessment of the client's need for assistance and care shall include consideration of the following:

- (1) Mental and emotional conditions.
- (2) Socialization and cognitive status.
- (3) Propensity for behaviors that result in harm to self or others and that require supervision,
- (4) Ability to manage his/her own finances and cash resources.

Client Records 80070

The licensee shall ensure that a separate, complete, and current record is maintained in the facility for each client.

Admission & Retention Questions 21, 25

Each record must contain information including but not limited to the following:

- (1) Name of client
- (2) Birthdate

(3) Sex

(4) Date of Admission

(5) Names, addresses, and telephone numbers of the authorized representative

(6) A signed copy of the admission agreement

(7) Name, address and telephone number of physician and dentist, and other medical and mental health providers, if any

(8) Medical assessment, including ambulatory status

(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 his/her necessary medical and dental needs.

(10) Record of current medications, including the name of the prescribing physician, and instructions, if any, regarding control and custody of medications.

(11) Restricted Health Condition Care Plan, if required for the client

(12) Functional assessment

(13) Mental health assessment

(14) Date of termination of services

(15) An account of the client's cash resources, personal property, and valuables entrusted

All information and records obtained from or regarding clients shall be confidential. The licensee shall be responsible for safeguarding the confidentiality of record contents.

Except as specified below, or as otherwise authorized by law, the licensee and all employees shall not reveal or make available confidential information.

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:

-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.

-Name, address, and telephone number of the authorized representative

-Name, address, and telephone number of a client's physician and dentist, and any other medical and mental health providers

-Medical assessment, including ambulatory status

-Record of any current illness or injury

-Record of current medications

-Restricted Health Condition Care Plan

-Functional assessment

-Mental health assessment

-Any other records containing current emergency or health-related information for current clients.

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.

Licensing representatives shall return the records undamaged and in good order within three business days following the date the records were removed.

A client's records shall be open to inspection by the client's authorized representative(s), if any.

The information specified above must be updated as necessary to ensure the accuracy of the client's record.

Admission & Retention Question 34

Original client records or photographic reproductions shall be retained for at least three years following termination of service to the client.

Register of Clients 80071

In all licensed facilities, the following shall apply:

Admission & Retention Question 5

The licensee shall maintain in the facility a register of all clients. The register shall be immediately available to, and copied for, licensing staff upon request, and must contain current information on the following:

-Client's name and ambulatory status

-Name, address and telephone number of client's attending physician

-Authorized representative information

-Client's restricted health condition(s)

The licensee may keep a separate client register with this information.

The licensee shall keep the register in a central location at the facility.

Registers are confidential.

Responsibility for Providing Care and Supervision 80078

The licensee shall provide care and supervision as necessary to meet the client's need.

In any instance where the Department does not suspend the facility license and the licensing agency requires that a client/resident be relocated, the licensee shall prepare a written relocation plan. The plan shall contain all necessary steps to be taken to reduce stress to the client/resident which may result in transfer trauma.

The written relocation plan shall include, but not be limited to the following:

Admission & Retention Questions 31

(1) A specific date for beginning and a specific date for completion of the process of safely relocating the client/resident. The time frame for relocation may provide for immediate relocation but shall not exceed 30 days or 30 days after the date of the written conclusion of the client's appeal of the relocation order, if appealed.

(2) A specific date when the client/resident and the client's/resident's authorized representative, if any, shall be notified of the need for relocation.

(3) A specific date when consultation with the client's/resident's physician shall occur to obtain a current medical assessment of the client's/resident's health needs, to determine the appropriate facility type for relocation and to ensure that the client's/resident's health care needs continue to be met at all times during the relocation process.

(4) The method by which the licensee shall participate in the identification of an acceptable relocation site with the client/resident and the authorized representative if any. The licensee shall advise the client/resident and/or the authorized representative that if the client/resident is to be moved to another nonmedical community care facility, a determination must be made that the client's/resident's needs can be legally met in the new facility before the move is made. If the client's/resident's needs cannot be legally met in the new facility, the client/resident must be moved to a facility licensed to provide the necessary care.

(5) A list of contacts made or to be made by the licensee with community resources, including but not limited to, social workers, family members, Long Term Care Ombudsman, clergy and others as appropriate to ensure that services are provided to the client/resident before, during and after the move. The need for the move shall be discussed with the client/resident and the client/resident assured that support systems will

remain in place.

(6) Measures to be taken until relocation to protect the client/resident and/or meet the client's/resident's health and safety needs.

(7) An agreement to notify the licensing agency when the relocation has occurred, including the client's/resident's new address, if known.

The relocation plan shall be submitted in writing to the licensing agency within the time set forth in the written notice by the licensing agency that the client/resident requires health services that the facility cannot legally provide.

Any changes in the relocation plan shall be submitted in writing to the licensing agency. The licensing agency shall have the authority to approve, disapprove or modify the plan.

If relocation of more than one client/resident is required, a separate plan shall be prepared and submitted in writing for each client/resident.

The licensee shall comply with all terms and conditions of the approved plan. No written or oral contract with any other person shall release the licensee from the responsibility specified above for relocating a client/resident who has a health condition(s) which cannot be cared for in the facility and/or requires inpatient care in a licensed health facility, nor from taking necessary actions to reduce stress to the client/resident.

In cases where the licensing agency determines that the resident is in imminent danger because of a health condition(s) which cannot be cared for in the facility or which requires inpatient care in a licensed health facility, the licensing agency shall have the authority to order the licensee to immediately relocate the resident.

In all cases when a client or resident must be relocated, the licensee shall not obstruct the relocation process and shall cooperate with the licensing agency in the relocation in process. Such cooperation shall include, but not be limited to, the following activities:

- (1) Identifying and preparing for removal of the medications, MediCal or Medicare or other medical insurance documents, clothing, safeguarded cash resources, valuables and other belongings of the client or resident
- (2) Contacting the authorized representative of the client/resident to assist in transporting him or her, if necessary
- (3) Contacting other suitable facilities for placement, if necessary
- (4) Providing access to client's/resident's files when required by the Department.

Admission Agreements 85068

- (a) In addition to Section 80068, the following shall apply.
 - (b) The admission agreement must specify the following:
 - (1) Payment provisions, including the client's funding source. Such disclosure shall be at the client's discretion.
 - (2) General facility policies which are intended to ensure that no client, in the exercise of his/her personal rights, infringes upon the personal rights of any other client.
 - (3) The current arrangement with the client regarding the provision of food service.

Admission Procedures 85068.1

The licensee shall develop, maintain, and implement admission procedures which shall meet the requirements specified in this section.

No client may be admitted prior to a determination of the facility's ability to meet the needs of the client, which must include an

appraisal of his/her individual service needs as specified in Sections 80068.2 and 85068.2.

Admission & Retention Questions 12, 28

Prior to accepting a client for care and supervision, the person responsible for admissions shall:

- (1) Interview the prospective client, and his/her authorized representative, if any. The interview shall provide the prospective client with information about the facility, including the information contained in the Admission Agreement and any additional policies and procedures, house rules, and activities.
- (2) Develop a Needs and Services Plan.

The facility shall obtain the medical assessment, performed as specified in Section 80069.

Admission & Retention Question 2

If admission is agreed to, the facility shall obtain the signature of the client, or his/her authorized representative, if any, on the Admission Agreement.

Needs and Services Plan 85068.2

- (a) Prior to admission, the licensee shall determine whether the facility's program can meet the prospective client's service needs.
- (b) If the client is to be admitted, then prior to admission, the licensee shall complete a written Needs and Services Plan, which shall include:
 - (1) The client's desires and background, obtained from the client's family or his/her authorized representative, if any, and licensed professional, where appropriate, regarding the following:
 - Entrance to the facility.
 - Specific service needs, if any.

-The written medical assessment specified in Section 80069.

-Mental and emotional functioning.

-The written mental health intake assessment, if any, specified in Section 85069.3.

-The written functional capabilities assessment specified in Section 80069.2.

(2) Facility plans for providing services to meet the individual needs identified above.

(c) If the client has a restricted health condition specified in Section 80092, the Needs and Services Plan must include the Restricted Health Condition Care Plan specified in Section 80092.2.

(d) The licensee shall involve the following persons in the development of the Needs and Services Plan:

(1) The client, or his/her authorized representative, if any.

(2) Any relative participating in the placement.

(3) The placement or referral agency, if any.

(4) The person responsible for facility admissions.

Modifications to Needs and Services Plan 85068.3

The written Needs and Services Plan specified in Section shall be updated as frequently as necessary to ensure its accuracy, and to document significant occurrences that result in changes in the client's physical, mental and/or social functioning.

If modifications to the plan identify an individual client service need which is not being met by the general program of facility services, the following requirements shall be met:

Admission & Retention Question 13

(1) Consultation shall be secured from a dietitian, physician, social worker, psychologist, or other consultant as necessary to assist in determining if such needs can be met by the facility within the facility's program of services.

(2) If it is determined that the client's needs can be met, the licensee in conjunction with the consultant shall develop and maintain in the facility a written Needs and Services Plan that must include the following:

-Objectives, within a time frame, that relate to the client's problems and/or needs.

-Plans for meeting the objectives.

-Identification of any individuals or agencies responsible for implementing and evaluating each part of the plan.

-Method of evaluating progress.

Admission & Retention Question 9

(3) If it is determined that the client's needs cannot be met, the licensee shall inform the client and/or his/her authorized representative, if any, or responsible person, if there is no authorized representative, of this fact and shall request that the client relocate.

If the client refuses to relocate, the licensee may evict the client.

Acceptance and Retention Limitations 85068.4

Admission & Retention Questions 7, 11, 19

The licensee shall not accept or retain the following:

(1) Persons with prohibited health conditions specified in Section 80091

(2) Persons who require inpatient care in a health facility

(3) Persons who have needs which are in conflict with other clients or the program of services offered

(4) Persons who require more care and supervision than is provided by the facility

(5) Any person whose primary need is acute psychiatric care due to a mental disorder

The licensee shall not admit, but may retain, persons who are over 59 years of age whose needs are compatible with other clients, if they require the same level of care and supervision as do the other clients in the facility, and the licensee is able to meet their needs.

Licensees are not required to obtain an exception for clients over the age of 59 as long as the number of persons over the age of 59 does not exceed 50 percent of the census in facilities with the capacity of six and under.

Licensees are not required to obtain an exception for clients over the age of 59 as long as the number of persons over the age of 59 does not exceed 25 percent of the census in facilities with a capacity of over six.

Retention of clients shall be in accordance with the client's Needs and Services Plan.

Client Records 85070

Admission & Retention Question 4

In addition to Section 80070, each client record must contain the following information:

(1) Last known address

(2) Religious preference, and name and address of clergyman or religious advisor, if any

(3) Needs and Services Plan and any modifications thereto.

Activities 85079

The licensee shall ensure that planned recreational activities, which include the following, are provided for the clients:

(1) Activities that require group interaction

(2) Physical activities including but not limited to games, sports and exercise

Each client who is capable shall be given the opportunity to participate in the planning, preparation, conduct, clean-up and critique of the activities.

The licensee shall ensure that clients are given the opportunity to attend and participate in community activities including but not limited to the following:

(1) Worship services and activities of the client's choice

(2) Community Service activities

(3) Community events, including but not limited to concerts, tours, dances, plays, and celebrations of special events

(4) Self-help organizations

(5) Senior citizen groups, sports leagues and service clubs

Admission & Retention Question 32

In facilities with a licensed capacity of seven or more clients, notices of planned activities shall be posted in a central facility location readily accessible to clients, relatives, and representatives of placement and referral agencies. Copies of such notices shall be retained in facility files for at least six months.

In facilities with a licensed capacity of 50 or more clients, a current, written program of activities shall be planned in advance and made available to all clients.

Activities shall be encouraged through provision of the space, equipment and supplies specified in Sections 85087.2, 85087.3 and 85088(g).

Resident Councils 85080

Each facility, at the request of a majority of its residents, shall assist its residents in establishing and maintaining a resident-oriented facility council.

The licensee shall provide space and post notice for meetings, and shall provide assistance in attending council meetings for those residents who request it.

If residents are unable to read the posted notice because of a physical or functional disability, the licensee shall notify the residents in a manner appropriate to that disability including but not limited to verbal announcements.

Admission & Retention Question 33

The licensee shall document notice of meetings, meeting times, and recommendations from council meetings.

In order to permit a free exchange of ideas, at least part of each meeting shall be conducted without the presence of any facility personnel.

Residents shall be encouraged, but shall not be compelled to attend council meetings.

The licensee shall ensure that in providing for resident councils the requirements of Section 1520.2 of the Health and Safety Code are observed.

Requirements for Emergency Adult Protective Services Placements 85081

(a) The licensee shall be permitted to accept emergency placements by an adult protective services (APS) agency, if the licensee has received approval from the Department to provide emergency shelter services.

(1) To obtain approval, the licensee shall submit a written request to the Department. The request shall include, but not be limited to, the following:

-A letter of interest from the county APS agency stating that if the request to provide emergency shelter services is approved, the APS agency may enter into an agreement with the licensee to provide such services. A copy of the written agreement between the APS agency and the licensee, listing the responsibilities of each party, shall be sent to the Department within seven calendar days of signing.

-A written addendum to the Plan of Operation, specified in Sections 80022 and 85022, that includes procedures for the intake of an APS emergency placement. The addendum shall specify how the licensee will meet the needs of a client placed on an emergency basis, such as on-call staff, additional staff and training. The procedures shall include, but not be limited to, provisions for a private room.

-The licensee shall provide a private room for the client until an individual program plan or a Needs and Services Plan has been completed, specified in Sections 80068.2 and 85068.2.

-The Department may approve an alternative to a private room, such as awake or additional staff, but an alternative shall not be approved if it displaces staff or other clients of the facility.

-A licensee of an adult residential facility may accept an elderly client, 60 years of age or older, for emergency placement under the following conditions:

-The APS agency has written a statement indicating a local need exists for the licensee to accept elderly emergency placements. The licensee attaches this APS statement of local need [Section 85081(a)(l)(C)]. to the written request, specified in Section 85081(a)(1). The licensee must request a statement each year from the APS agency, indicating a local need still exists as specified in Section 85081(a)(l)(C)., and submit the statement to the Department.

(b) The Department shall provide written approval or denial of a licensee's request to provide emergency shelter services within 15 working days of its receipt.

(c) The licensee shall comply with the regulations in Title 22, Division 6, Chapter 1 (General Licensing Requirements) and Chapter 6 (Adult Residential Facilities), unless otherwise stated in Section 85081. These regulations include, but are not limited to, the following:

(1) The licensee shall not exceed the capacity limitations specified on the license and shall not allow rooms approved only for ambulatory clients to be used by nonambulatory clients, as specified in Section 80010.

(2) The licensee shall meet the requirements in Section 80020(b) on fire clearance if the licensee has accepted a nonambulatory client, defined in Section 80001n.(2).

(d) The licensee shall not accept the following persons as APS emergency placements:

(1) Individuals who use metered-dose and dry powder inhalers [Section 80075(a)(2)(A)].

(2) Individuals who require oxygen [Section 80075(h)].

(3) Individuals who rely upon others to perform all activities of daily living [Section 80077.2].

(4) Individuals who lack hazard awareness or impulse control [Section 80077.3].

(5) Individuals who have contractures [Section 80077.5].

(6) Individuals who have prohibited health conditions [Section 80091].

(7) Individuals who have restricted health conditions [Section 80092].

(8) Individuals who require inpatient care in a health facility [Section 85068.4(a)(2)].

(9) Any individual whose primary need is acute psychiatric care due to a mental disorder [Section 85068.4(a)(5)].

(10) Individuals who are receiving hospice care.

(e) The licensee shall not admit an APS emergency placement unless the APS worker is present at the facility at the time of admission.

(f) Prior to acceptance of an APS emergency placement, the licensee shall obtain and keep on file the following information received from the APS worker:

(1) Client' s name.

(2) Client's ambulatory status.

(3) Name(s) and telephone number(s) of the client's physician(s).

(4) Name(s), business address(es), and telephone number(s) of the APS worker responsible for the client's placement and the APS case worker, if known.

(5) Name, address, and telephone number of any person responsible for the care of the client, if available.

(g) At the time of the APS emergency placement, the licensee shall ensure receipt of a mental health intake assessment, specified in Section

85069.3, for mentally ill clients.

(h) Within seven calendar days of an APS emergency placement, the licensee shall obtain other client information specified in Sections 80070 and 85070.

(1) The client must have a tuberculosis test [Section 80069(c)(1)] by the seventh day of placement even though the test results may not be available by the seventh day of placement.

(i) The licensee shall contact the client's attending physician or the person authorized to act for the physician to identify all of the client's prescribed medications and usage instructions [Section 80069(c)(3)] by the next working day, but no later than 72 hours from the initial APS emergency placement.

(1) The attending physician or the person acting for the physician shall have access to the client's records to determine whether the full medication regimen is accounted for and accurate.

(2) If medication verification, as specified in Section 8508 I(i), has not been obtained within 72 hours from the client's initial placement, the licensee shall contact the APS worker to request that the client be relocated, as specified in Section 8508 I(j).

(j) The licensee shall contact the APS worker to request that the client be relocated immediately when the licensee identifies that needs cannot be met or that the client has a condition specified in Section 85081(d).

(1) The licensee cannot retain a client aged 60 years or older beyond 30 calendar days from initial placement by the APS agency unless the following requirement is met: The licensee must request an exception, specified in Section 80024(b)(2), within 30 calendar days of initial placement, but the client must be relocated if the Department denies the request.

(k) Within seven calendar days of the licensee making any changes to an agreement with an

APS agency, the licensee shall notify the Department in writing of these changes, which may include a renewed agreement, amended language and/or notification of a terminated agreement.

(l) All emergency placements are subject to the same record requirements as set forth in Section 80070(f).

MEDICATION

Health-Related Services 80075

The licensee shall ensure that each client receives first aid and other needed medical or dental services, including transportation to the nearest services.

Clients must be assisted as needed with self-administration of prescription and non-prescription medications.

In adult CCFs, facility staff who receive training may assist clients with metered-dose inhalers, and dry powder inhalers if:

(1) In ARFs and SRFs, facility staff must receive training from a licensed professional

-Licensee must obtain written documentation from licensed professional outlining the procedures and names of facility staff who have been trained

-Licensee ensures that the licensed professional reviews staff performance as the professional deems necessary, but at least once a year

(2) All staff training must be documented in the facility personnel files

Medication Question 3

Facility staff, except those authorized by law, shall not administer injections but staff designated by the licensee are authorized to assist clients with self-administration of injections as needed.

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

If the client's physician has stated in writing that the client can determine and communicate his/her need for a prescription or nonprescription PRN medication, facility staff may assist the client with self-administration of their PRN medication.

Physical Needs Question 8

If the client's physician has stated in writing that the client is unable to determine his/her own need for nonprescription PRN medication, but can communicate his/her symptoms clearly, facility staff designated by the licensee may assist the client with self-administration, provided all of the following requirements are met:

(1) There is written direction from a physician, on a prescription blank, specifying the name of the medication, all information specified below (regarding the physician's order and label), instructions regarding a time or circumstance (if any) when it should be discontinued, and an indication of when the physician should be contact for a medication re-evaluation.

(2) Once ordered by the physician the medication is given according to the physician's directions.

(3) A record of each does 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.

If the client cannot determine his/her own need for a prescription or nonprescription PRN medication, and is unable to communicate his/her 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:

(1) 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.

(2) 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.

(3) 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.

(4) 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:

- The specific symptoms which indicate the need for the use of the medication.

- The exact dosage.

- The minimum number of hours between doses.

- The maximum number of doses allowed in each 24-hour period.

The isolation room or area specified in Section 80087(d) shall be used where separation from others is required.

There shall be privacy for first aid treatment of minor injuries and for examination or treatment by a physician if required.

In adult CCFs, when a client requires oxygen the licensee is responsible for the following:

(1) Monitoring the client's ongoing ability to operate and care for the equipment in accordance with the physician's instructions, or if the client is unable to do so:

- Ensuring that an adequate number of facility staff persons are designated to operate and care for the equipment.

- The licensee shall comply with all of the requirements for training specified above.

(2) Ensuring that the following conditions are met if oxygen equipment is in use:

- The licensee makes a written report to the local fire jurisdiction that oxygen is in use at the facility.

- "No Smoking - Oxygen in Use" signs shall be posted in appropriate areas.

- Smoking is prohibited where oxygen is in use.

- All electrical equipment is checked for defects that may cause sparks.

- Oxygen tanks that are not portable are secured either in a stand or to the wall.

- Plastic tubing from the nasal canula (mask) to the oxygen source is long enough to allow the client movement within his/her room but does not constitute a hazard to the client or others.

- Clients use oxygen from a portable source when they are outside of their rooms or when walking in a day care setting.

- Equipment is operable.

- Facility staff have knowledge and ability to operate and care for the oxygen equipment.

- Equipment is removed from the facility when no longer in use by the client.

Management Question 37

Staff responsible for providing direct care and supervision shall receive training in first aid from persons qualified by agencies including but not limited to the American Red Cross.

If the facility has no medical unit on the grounds, first aid supplies shall be maintained and be readily available in a central location in the facility. The supplies shall include at least the following:

(1) 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

- (2) Sterile first aid dressings
- (3) Bandages or roller bandages
- (4) Adhesive tape
- (5) Scissors
- (6) Tweezers
- (7) Thermometers
- (8) Antiseptic solution

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.

When a client requires prosthetic devices, or vision or hearing aids, the staff shall be familiar with the use of these devices and aids and shall assist the client with their utilization as needed.

Medication Question 6

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

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 below.
- (3) All medications shall be labeled and maintained in compliance with label instructions and state and federal laws.

Medication Questions 5, 8

- (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:
 - The name of the client for whom prescribed.
 - The name of the prescribing physician.
 - The drug name, strength and quantity.
 - The date filled.
 - The prescription number and the name of the issuing pharmacy.
 - Expiration date.

- Number of refills.
- Instructions, if any, regarding control and custody of the medication.

Medication Questions 1, 7

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 one other adult who is not a client. Both shall sign a record, to be retained for at least one year, which lists the following:

- (1) Name of the client
- (2) The prescription number and the name of the pharmacy
- (3) The drug name, strength and quantity destroyed
- (4) The date of destruction

**Automated External Defibrillators
80075.1**

(a) In an adult community care facility, a licensee is permitted to maintain and operate an AED at the facility if all of the following requirements are met:

- (1) The licensee shall notify the licensing agency in writing that an AED is in the facility and will be used in accordance with all applicable federal and other state requirements.
- (2) The AED shall be used in accordance with all applicable federal and other state requirements.
- (3) The licensee shall maintain at the facility the following:
 - A copy of the required physician's prescription for the AED.
 - A training manual from an American Heart Association- or American Red Cross-recognized AED training class.

- A log of checks of operation of the AED containing the dates checked and the name of person checking.
- A copy of a valid AED operator's certificate for any employee(s) authorized by the licensee to operate the AED. The certificate shall indicate that the AED training course completed complies with the standards of the American Heart Association or the American Red Cross. If it does not, then other evidence indicating that the AED training course completed complies with the standards of the American Heart Association or the American Red Cross shall be available at the facility.
- A log of quarterly proficiency demonstrations for each holder of an AED operator's certificate who is authorized by the licensee to operate the AED. The log shall contain the dates of the demonstrations and the manner of demonstration.

- (4) A supply kit shall be maintained at the facility and be readily available for use with the AED. The kit shall contain at least the following:
 - A back-up battery set.
 - An extra set of pads.
 - A safety razor for shaving chest hair when necessary to apply the pads.
 - A cardiovascular pulmonary resuscitation barrier (a face shield or mask) for protection from transmission of infectious disease.
 - Two pairs of unused medical examination gloves (latex or non-latex).

(5) Use of an AED shall be reported as specified in Section 80061.

Medication Procedures

PRN medications include prescription and over-the-counter medications. PRN medications must always be ordered by a physician. Community Care Licensing has established specific

requirements for staff to assist individuals with self-administration of PRN

Licensee must maintain record of each dosage given that includes the date, time and dosage taken and the individual's response.

For individuals who can determine and clearly communicate the need for the PRN medication there must be:

(1) Signed and dated written order by the physician

(2) Written physician statement that indicates that the individual can determine and clearly communicate the need for the medication

(3) Physician order and medication label that includes

- Specific symptoms indicating need for PRN
- Exact dosage
- Minimum hours between dosage.
- Maximum doses to be given in a 24 hour period

For individuals who cannot indicate the need for the PRN medication, but can communicate symptoms there must be:

(1) Signed and dated written order by the physician

(2) Written physician statement that the individual cannot indicate the need for the PRN medication but can communicate his or her symptoms clearly

(3) Physician order and medication label that includes:

- Specific symptoms indicating need for PRN
- Exact dosage
- Minimum hours between dosage
- Maximum doses to be given in a 24 hour period

For individuals who cannot determine the need and cannot communicate the symptoms for the need for the PRN medication there must be:

(1) A signed and dated written order by the Physician that includes:

- Specific symptoms indicating need for medication
- Exact dosage
- Minimum hours between dosage
- Maximum doses to be given in a 24 hour period

(2) The facility must: contact the individual's physician before giving each dose, describe the individual's symptoms, and receive direction to assist the individual with each dose.

(3) The facility must record the date and time of each contact with the physician and the physician's directions and maintain in the individual's record.

(4) Record each dosage given that includes the date, time and dosage taken and the individual's response

Medication Label must include:

- Patient's Name
- Prescriber's Name
- Date prescribed (or filled)
- Name of the medication
- Strength
- Directions for how to use the medication
- Quantity in the prescription
- Expiration date
- Other information (e.g., Prescription #; pharmacy; refills; etc.)

If a label doesn't have all the necessary information, ask the pharmacist (or the physician) to add the needed information. Do not "scratch out" or write over or change a drug label in any way. Labeling may only be carried out by a licensed pharmacist according to Federal and State Guidelines.

The Five Rights of Assisting with Self-Administration of Medication include:

- (1) Right Person
- (2) Right Medication
- (3) Right Dose
- (4) Right Time
- (5) Right Route

To avoid errors, it is advised that pre-made labels from the pharmacy be placed on the Medication Log. Some pharmacies may also provide the medication log with the prescriptions already typed on the sheet. This is also acceptable. When possible, appropriate pre-made warning labels will also be placed on the Medication Log (such as "take with food"). A new prescription and label must be obtained each time a medication dosage is increased or decreased.

There are several types of Medication Logs. Whatever type your agency uses, the Five Rights should be easily identified on the form. This information must be clearly written on the pre-made label from the pharmacy. The Medication Log will usually have a box or place for the DSP who is assisting with administration of medication to sign his or her initials. This must be done at the time the medication is taken by the individual, not before, and not hours later.

Generally, if a medication is ordered only once a day, it is usually given in the morning, around 8:00 or 9:00, unless it is ordered at bedtime. Some medications may be ordered before or after meals. It is important to check every medication.

Often medications ordered twice a day are given in the morning and around dinner time, but some may be given in the morning and at bedtime. Again it is important to check the order.

Three times a day are often 9 a.m., 1 :00 p.m. and 5:00 p.m.

Four times a day are frequently 9 a.m., 1:00 p.m., 5:00 p.m. and 9:00 p.m.

Always check the order. Medications ordered every 6 hours, must be given 6 ~ hours apart, such as 6 a.m., 12:00 noon, 6 p.m. and 12 :00 midnight.

You may always ask the pharmacist to write the suggested times on the pre-made labels.

Incident Report be sent to Community Care Licensing and the Regional Center.

Side effects are usually undesired effects of the drug. Whether or not the desired effect occurs, for example, control of seizures, there is always the possibility that undesired side effects will occur. Side effects may be predictable, for example, drowsiness with seizure medication, or a side effect may be c entirely unexpected and unpredictable.

Side effects may be harmless, such as urine discoloration when taking Dilantin.

Side effects, such as a severe allergic reaction to penicillin, may also be potentially fatal. **WHEN A PERSON HAS A KNOWN ALLERGY TO A MEDICATION, ALL RECORDS MUST BE MARKED.**

Some examples of side effects include: dizziness, drowsiness, confusion, insomnia, psychosis, slurred speech, blurred vision, nervousness, constipation, tics, restlessness, dry mouth. As you can see, these side effects are a combination of physical and behavioral changes. Physical and behavioral changes that are due to the effects of the medication (side effects) are often difficult to sort out from those that are not due to the medication.

Interpretation (deciding the meaning) of a sign or symptom is the responsibility of the physician. Your responsibility is to consistently and accurately observe, report and record any change in physical conditions or behavior.

As the Administrator you need to know what medications are being used by people in the home where you work and learn about them. Know what possible side effects may occur, and be sure to ask the .physician what kind of reactions should be brought immediately to his attention.

(1) IDENTIFY and Report Symptoms Accurately and Completely

- (2) **KNOW THE PERSON!** This includes the person's past medical and life history, medications used in the past, what worked and what didn't.
- (3) **UNDERSTAND** what drug(s) is being used and why
- (4) **HAVE KNOWLEDGE** about possible drug side effects and interactions with other drugs and food
- (5) **CONTINUOUSLY** Observe the person's condition and evaluate response to the treatment program

Technical Support Program Medications

Medication handling represents an area of great responsibility. If not managed properly, medications intended to help a client's/resident's health condition may place that individual's health and safety at risk. The information contained in this handout outlines medication procedures you are required to perform by regulation, as well as some procedures not required by regulation which, if implemented, will provide additional safeguards in the management of medications in your facility. If you operate a Community Care Facility (CCF), the specific medication regulations you must comply with are in section 80075. If you operate a Residential Care Facility for the Elderly (RCFE), the specific medication regulations you must comply with are in section 87575. This guide cannot be used as a substitute for having a good working knowledge of all the regulations.

WHAT YOU (CARE PROVIDERS) SHOULD DO WHEN:

(1) Client/resident arrives with medication:

- Contact the physician(s) to ensure that they are aware of all medications currently taken by the client/resident.

- Verify medications that are currently taken by the client/resident and dispensing instructions.

- Inspect containers to ensure the labeling is accurate.

- Log medications accurately on forms for client/resident records. The Centrally Stored Medication and Destruction Record (LIC 622) is available for this purpose.

- Discuss medications with the client/resident or the responsible person/authorized representative.

- Store medications in a locked compartment.

(2) Medication is refilled:

- Communicate with the physician or others involved (for example, discuss procedures for payment of medications, who will order the medications, etc. with the responsible person.)

- Never let medications run out unless directed to by the physician.

- Make sure refills are ordered promptly.

- Inspect containers to ensure all information on the label is correct.

- Note any changes in instructions and/or medication (for example, change in dosage, change to generic brand, etc.)

- Log medication when received on the LIC 622.

- Discuss any changes in medications with the client/resident, responsible person/authorized representative and appropriate staff.

(3) A dosage is changed between refills:

-Confirm with the physician. Obtain written documentation of the change from the physician or document the date, time, and person talked to in client's/resident's record.

-Prescription labels cannot be altered by facility staff.

-Have a facility procedure (i.e., card file/cardex, notebook, and/or a flagging system) to alert staff to the change.

-Discuss the change with client/resident and/or responsible person/authorized representative.

(4) Medication is permanently discontinued:

-Confirm with the physician. Obtain written documentation of the discontinuation from the physician or document the date, time, and person talked to in client's/resident's record.

-Discuss the discontinuation with the client/resident and/or responsible person/authorized representative.

-Have a facility procedure (i.e., card file/cardex, notebook, and/or a flagging system) to alert staff to the discontinuation.

-Destroy the medications. Medication must be destroyed by the facility administrator or designee and one other adult who is not a client/resident. (See destruction requirements for pre-packaged medications in section #17.)

-Sign the medication destruction record/log. (The reverse side of LIC 622, Centrally Stored Medication Record, may be used for this purpose.)

(5) Medications are temporarily discontinued ("dc") and/or placed on hold:

-Medications temporarily discontinued by the physician may be held by the facility.

-Discuss the change with client/resident and/or responsible person/authorized representative.

-Obtain a written order from the physician to HOLD the medication, or document in the client's/resident's file the date, time, and name of person talked to regarding the HOLD order.

-Have a facility procedure (i.e., card file/cardex, notebook, and/or a flagging system) to alert staff to the discontinuation and restart date.

-Without altering the label, mark or identify in a consistent manner medication containers that have HOLD orders.

-Be sure to contact the physician after the discontinuation/hold order expires to receive new instructions regarding the use of the medication.

(6) Medication reaches expiration date:

-Check containers regularly for expiration dates.

-Communicate with physician and pharmacy promptly if a medication expires.

-Do not use expired medications. Obtain a refill as soon as possible if needed.

-Over-the-counter medications and ointments also have expiration dates (for ointments the expiration date is usually at the bottom of the tube).

-Destroy expired medications according to regulations.

-Log/record the destruction of prescription medications as required. The LIC 622 may be used for this purpose.

(7) Client/resident transfers, dies, or leaves medication behind:

-All medications, including over-the-counters, should go with client/resident when possible.

-If the client/resident dies, prescription medications must be destroyed.

-Log/record the destruction as required. The LIC 622 may be used for this purpose.

-Document when medication is transferred with the client/resident. Obtain the signature of the person accepting the medications (i.e., responsible person/authorized representative.)

-Maintain medication records for at least 3 years (RCFE) section 87575 (h)(6),(i) or 1 year (CCF) section 80075 (n)(7),(o).

(8) Client/resident missed or refused medications:

-No client/resident can be forced to take any medication.

-Missed/refused medications must be documented in the client's/resident's medication record and the prescribing physician contacted immediately.

-Notify the responsible person/authorized representative.

-Refusal of medications may indicate changes in the client/resident that require a reassessment of his/her needs. Continued refusal of medications may require the client's/resident's relocation from the facility.

(9) Medications need to be crushed or altered:

-Medications may be crushed or altered to enhance swallowing or taste, but never to disguise or "slip" them to a client/resident without his or her knowledge.

-The following written documentation must be in the client's/resident's file if the medication is to be crushed or altered:

1. A physician's order specifying the name and dosage of the medication to be crushed

2. Verification of consultation with a pharmacist or physician that the medication can be safely crushed, identification of foods and liquids that can be mixed with the medications, and instructions for crushing or mixing medications

3. A form consenting to crushing the medication signed by the client/resident. If the client/resident has a conservator with authority over his/her medical decisions, the consent form must be signed by that conservator.

(10) Medications are PRN or "as needed": Facility staff may assist the client/resident with self-administration of his/her prescription and nonprescription PRN medication, when:

-The client's/resident's physician has stated in writing that the client/resident can determine and clearly communicate his/her need for a prescription or nonprescription PRN medication.

-The physician provides a signed, dated, written order for the medication on a prescription blank or the physician's business stationery which is maintained in the client's/resident's file.

-The physician's order and the PRN medication label identify the specific symptoms that indicate the need for use of the medication, exact dosage, minimum hours between doses, and maximum doses to be given in a 24-hour period. Most nonprescription labels display this information.

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Facility staff may also assist the client/resident with self-administration of his/her nonprescription PRN medication if the client/resident cannot

determine his/her need for a nonprescription PRN medication, but can communicate his/her symptoms clearly, when:

-The client's/resident's physician has stated in writing that the client/resident cannot determine his/her need for nonprescription medication, but can communicate his/her symptoms clearly.

-The client's/resident's physician provides a signed, dated, written order on a prescription blank or the physician's business stationery which is maintained in the client's/resident's file.

-The written order identifies the name of the client/resident, the name of the PRN medication, instructions regarding when the medication should be stopped, and an indication when the physician should be contacted for re- evaluation.

--The physician's order and the PRN medication label identify the specific symptoms that indicate the need for use of the medication, exact dosage, minimum hours between doses, and maximum doses to be given in a 24-hour period. Most nonprescription medication labels display this information.

--A record of each dose is maintained in the client's/resident's record and includes the date, time, and dosage taken, and the client's/resident's response.

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Facility staff may also assist the client/resident with self-administration of his/her prescription or nonprescription PRN medication if the client/resident cannot determine his/her need for a prescription or nonprescription PRN medication, and cannot communicate his/her symptoms when:

-Facility staff contact the client's/resident's physician before giving each dose, describe the client's/resident's symptoms, and receive permission to give the client/resident each dose.

-The date and time of each contact with the physician and the physician's directions are

documented and maintained in the client's/resident's facility record.

-The physician provides a signed, dated, written order on a prescription blank or the physician's business stationery which is maintained in the client's/resident's file.

-The physician's order and the PRN medication label identify the specific symptoms that indicate the need for use of the medication, exact dosage, minimum hours between doses, and maximum doses to be given in a 24-hour period.

-A record of each dose is maintained in the client's/resident's records and includes the date, time, and dosage taken, and the client's/resident's response.

SMALL FAMILY HOMES AND CERTIFIED FAMILY HOMES

Small Family Home staff may assist a child with prescription or nonprescription PRN medication without contacting the child's physician before each dose if the child cannot determine and/or communicate his/her need for a prescription or nonprescription PRN medication when (section 83075 (d)):

-The child's physician has recommended or prescribed the medication and provided written instructions for its use on a prescription blank or the physician's letterhead stationery.

-Written instructions include the name of the child, the name of the PRN medication, instructions regarding when the medication should be stopped, and an indication when the physician should be contacted for re-evaluation.

-The physician's order and the PRN medication label identify the specific symptoms that indicate the need for use of the medication, exact dosage, minimum hours between doses, and maximum doses allowed in a 24-hour period. Most nonprescription medication labels display this information.

-The date, time, and content of the physician contact made to obtain the required information is documented and maintained in the child's file.

-The date, time, dosage taken, symptoms for which the PRN medication was given and the child's response are documented and maintained in the child's records.

(11) Medications are injectables:

-Injections can only be administered by the client/resident or by a licensed medical professional. Licensed medical professional includes Doctors of Medicine (M.D.), Registered Nurses (R.N.), and Licensed Vocational Nurses (L.V.N.) or a Psychiatric Technician (P.T.). P.T.s can only administer subcutaneous and intramuscular injections to clients/residents with developmental or mental disabilities and in accordance with a physician's order.

-Family members are not allowed to draw up or administer injections in CCFs or RCFEs unless they are licensed medical professionals.

-Facility personnel who are not licensed medical professionals cannot draw up or administer injections in CCFs or RCFEs.

-Licensed medical professionals may not administer medications/insulin injections that have been pre-drawn by another licensed medical professional.

-Injections administered by a licensed medical professional must be provided in accordance with the physician's orders.

-The physician's medical assessment must contain documentation of the need for injected medication.

-If the client/resident does administer his/her own injections, physician verification of the client's/resident's ability to do so must be in the file.

-Sufficient amounts of medications, test equipment, syringes, needles, and other supplies

must be maintained in the facility and stored properly.

-Syringes and needles should be disposed of in a "container for sharps", and the container must be kept inaccessible to clients/residents (locked).

-Only the client/resident or the licensed medical professional can mix medications to be injected or fill the syringe with the prescribed dose.

-Insulin and other injectable medications must be kept in the original containers until the prescribed single dose is measured into a syringe for immediate injection.

-Insulin or other injectable medications may be packaged in pre-measured doses in individual syringes prepared by a pharmacist or the manufacturer.

-Syringes may be pre-filled under the following circumstances:

1. Clients of Adult Residential, Social Rehabilitation, Adult Day and Adult Day Support Centers can self-administer pre-filled syringes prepared by a registered nurse, pharmacist or drug manufacturer.
2. Residential Care Facilities for the Elderly, Group Homes and Small Family Homes must obtain exceptions from the licensing office for clients/residents to use pre-filled syringes prepared by a registered nurse.
3. The registered nurse (R.N.) must not set up insulin syringes for more than seven days in advance.

-Injectable medications that require refrigeration must be kept locked.

(12) Over-the-counter (OTC) medications, including herbal remedies, are present:

-OTC medications (e.g., aspirin, cold medications, etc.) can be dangerous.

-They must be centrally stored to the same extent that prescription medications are centrally stored (see criteria for central storage in section 80075 (m) for CCFs and section 87575 (h) for RCFEs.)

-Over-the-counter medication(s) that are given on a PRN basis must meet all PRN requirements. (See section #10)

-Physicians must approve the use of all OTC medications that are or may be taken by the client/resident on a regular basis (e.g., aspirin for heart condition, vitamins, etc.) as well as those used on a PRN basis. Have documentation.

-Client's/resident's name should be on the over-the-counter medication container when: (1) it is purchased for that individual's sole use; (2) it is purchased by client's/resident's family or (3) the client's/resident's personal funds were used to purchase the medication.

(13) You "set up" or "pour" medications:

-Have clean, sanitary conditions. (i.e., containers, counting trays, pill cutters, pill crushers and storage/setup areas.)

-Pour medications from the bottle to the individual client's/resident's cup/utensil to avoid touching or contaminating medication.

-Medications must be stored in their original containers and not transferred between containers.

-The name of the client/resident should be on each cup/utensil used in the distribution of medications.

-Have written procedures for situations such as spillage, contamination, assisting with liquid medication, interactions of medications, etc.

-Have written procedures for facility staff regarding assisting with administration of

medication, required documentation, and destruction procedures.

(14) Assisting with medications (passing):

-Staff dispensing medications need to ensure that the client/resident actually swallows the medication (not "cheeking" the medication); mouth checks are an option for staff.

-Cups or envelopes containing medications should not be left unattended in the dining room, bathrooms, bedrooms or anywhere in the facility.

(15) You designate staff to handle medications:

-Have written policies and procedures.

-Train all staff who will be responsible for medications.

-Ensure that staff know what they are expected to do (i.e., keys, storage, set up, clean-up, documentation, notification, etc.)

-Ensure designated staff know what procedures can and cannot be done (i.e., injections, enemas, suppositories, etc.)

(16) Medications are received or destroyed:

-Every prescription medication that is centrally stored or destroyed in the facility must be logged.

-A record of prescription medications that are disposed of in the facility must be maintained for at least 3 years in a Residential Care Facility for the Elderly and 1 year in a Community Care Facility (Group Homes, Adult Residential Facilities, etc.)

-A record of centrally stored medications for each client/resident must be maintained for at least 1 year.

(17) Medications are prepackaged:

-Prepackaged medications (bubble packs, trays, cassettes, etc.) are allowed if they are packed and labeled by a pharmacy.

-Licensees and/or facility staff cannot remove discontinued medications from customized medication packages.

-Multi-dose packages must be returned to the pharmacy for changes in doses or discontinuation of a medication.

-Facilities should have procedures in case one dose is contaminated and must be destroyed.

-Facilities (EXCEPT RCFEs) utilizing prepackaged medications must obtain a waiver from the licensing office if medications are to be returned to the pharmacy for disposal.

-RCFEs do not need to obtain a waiver if the medications are returned to the issuing pharmacy or disposed of according to the approved hospice procedures.

(18) Sample medications are used:

-Sample medications may be used if given by the prescribing physician.

-Sample medications must have all the information required on a regular prescription label except pharmacy name and prescription number.

(19) Transferring medications for home visits, outings, etc.

-When a client/resident leaves the facility for a short period of time during which only one dose of medication is needed, the facility may give the medications to a responsible person/authorized representative in an envelope (or similar container) labeled with the facility's name and address, client's/resident's name, name of

medication(s), and instructions for administering the dose.

-If client/resident is to be gone for more than one dosage period, the facility may:

1. Give the full prescription container to the client/resident or responsible person/authorized representative,
OR

2. Have the pharmacy either fill a separate prescription or separate the existing prescription into two bottles,
OR

3. Have the client's/resident's family obtain a separate supply of the medication for use when the client/ resident visits the family.

-If it is not safe to give the medications to the client/resident, the medications must be entrusted to the person who is escorting the client/resident off the facility premises.

-If medications are being sent with the client/resident off the facility premises, check the Physician's Report (LIC 602 or 602a) to ensure that they are given only to clients/residents whose doctors have indicated that they may control their own medications.

-Always have the person entrusted with the medications sign a receipt which identifies the number and type of medications sent out and returned.

(20) House medications/stock supplies of over-the-counter medications are used:

-Centrally stored, stock supplies of over-the-counter medications may be used in CCFs and in RCFEs.

-Licensees cannot require clients/residents to use or purchase house supply medications.

-Clients/residents may use personal funds to purchase individual doses of OTC medications from the licensee's stock if each dose is sold at the licensee's cost and accurate written records are maintained of each transaction.

All regulations regarding the use of OTC medications must be followed (see section #12).

-Be sure to verify that the client's/resident's physician has approved the use of the OTC before giving him/her a dose from the house supply.

(21) Clients/residents use emergency medication(s) (e.g., nitroglycerin, inhaler, etc.)

Clients/residents who have a medical condition requiring the immediate availability of emergency medication may maintain the medication in their possession if all of the following conditions are met:

-The physician has ordered the PRN medication, and has determined and documented in writing that the client/resident is capable of determining his/her need for a dosage of the medication and that possession of the medication by the client/resident is safe.

-This determination by the physician is maintained in the individual's file and available for inspection by Licensing.

-The physician's determination clearly indicates the dosage and quantity of medication that should be maintained by the client/resident.

-Neither the facility administrator nor the Department has determined that the medications must be centrally stored in the facility due to risks to others or other specified reasons.

-If the physician has determined it is necessary for a client/resident to have medication immediately available in an emergency but has also determined that possession of the medication by the client/resident is dangerous, then that client/resident may be inappropriately

placed and may require a higher level of care.

(22) Blood pressure and pulse readings are taken:

The following persons are allowed to take blood pressure and pulse readings to determine the need for medications:

1. The client/resident when his/her physician has stated in writing that the client/resident is physically and mentally capable of performing the procedure.
2. A physician or registered nurse.
3. A licensed vocational nurse under the direction of a registered nurse or physician.
4. A psychiatric technician under the direction of a physician, surgeon, psychiatrist, or registered nurse. Psych Techs may take blood pressure and pulse readings of clients/ residents in any community care licensed facility. The Psych Tech injection restrictions noted in section #11 do not apply to taking vital signs.

-The licensee must ensure that the following items are documented when the client's/resident's vital signs are taken to determine the need for administration of medications:

- (1) The name of the skilled professional who takes the reading.
- (2) The date and time and name of the person who gave the medication.
- (3) The client's/resident's response to the medication.

-Lay staff may perform vital sign readings as long as the readings are not used to determine a need for medication.

(23) Clients/residents need assistance with the administration of ear, nose and eye drops:

- The client/resident must be unable to self-administer his/her own eye, ear or nose drops due to tremors, failing eyesight or other similar conditions.
- The client's/resident's condition must be chronic and resistant to sudden change (stable) or temporary in nature and expected to return to a condition normal for the client/resident.
- The client's/resident's Needs and Services Plan (CCF), Pre-Admission Appraisal (RCFE) or Individual Services Plan (RCF-CI) must state that he/she cannot self administer his/her own drops and specify how staff will handle the situation.
- The client's/resident's physician must document in writing the reasons that the client/resident cannot self-administer the drops, the stability of the medical condition and must provide authorization for the staff to be trained to assist the client/resident.
- Staff providing the client/resident with assistance must be trained by a licensed professional and names of trained staff must be maintained in the staff files. This training must be completed prior to providing the service, must include hands-on instruction in general and client/resident specific procedures, and must be reviewed and updated by the licensed professional at least annually or more often if the condition changes.
- Staff must be trained by a licensed professional to recognize objective symptoms observable by a lay person and to respond to the client's/resident's health problem.
- Staff must be trained in and follow universal precautions and any other procedures recommended by the licensed professional.
- Written documentation outlining the procedures to be used in assisting the client/resident with the drops and all aspects of care to be performed by

the licensed professional and facility staff must be maintained in the client's/resident's file.

Prior to providing ongoing client/resident assistance with drops, facility staff should consider the use of assistive devices, such as an eye cup, which would enable the client/resident to self-administer the drops.

(24) Medications need to be stored:

- All medications, including over-the-counters, must be locked at all times.
- All medications must be stored in accordance with label instructions (refrigerate, room temperature, out of direct sunlight, etc.).
- Medication in refrigerators needs to be locked in a receptacle, drawer, or container, separate from food items. (Caution should be used in selecting storage containers as metal may rust.)
- If one client/resident is allowed to keep his/her own medications, the medications need to be locked to prevent access by other clients/residents.

(25) Miscellaneous:

- Medications are one of the most potentially dangerous aspects of providing care and supervision.
- Educate yourself and staff (signs, symptoms, side effects).
- Train staff.
- Develop a plan to evaluate staff's ability to comply with the facility's medication procedures.
- Communicate with physicians, pharmacists, and appropriately skilled professionals.
- Develop a system to communicate changes in client/resident medications to staff and to the client/resident.

-Staff should be trained on universal precautions to prevent contamination and the spread of disease.

-Document.

-Know your clients/residents.

-Be careful.

PHYSICAL NEEDS

Food Service 80076

In facilities providing meals to clients, the following shall apply:

Physical Needs Question 23

(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.

Physical Needs Questions 10, 20

(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. 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 requirements above for all clients who, in their admission agreement, elect meal service.

(4) Between meal nourishment or snacks shall be available for all clients unless limited by dietary restrictions prescribed by a physician.

Physical Needs Questions 14, 21, 25

(5) Menus shall be written at least one week in advance and copies of the menus as served shall be dated and kept on file for at least 30 days. Menus shall be made available for review by the clients or their authorized representatives and the licensing agency upon request.

Physical Needs Question 7

(6) Modified diets prescribed by a client's physician as a medical necessity shall be provided. The licensee shall obtain and follow instructions from the physician or dietitian on the preparation of the modified diet.

(7) 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.

(8) Where indicated, food shall be cut, chopped or ground to meet individual needs.

Physical Needs Question 27

(9) 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.

(10) 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.

(11) All home canned foods shall be processed in accordance with standards of the University of California Agricultural Extension Service. Home canned foods from outside sources shall not be used.

(12) If food is prepared off the facility premises, the following shall apply:

- The preparation source shall meet all applicable requirements for commercial food services.

-The facility shall have the equipment and staff necessary to receive and serve the food and for cleanup.

-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.

(13) All persons engaged in food preparation and service shall observe personal hygiene and food services sanitation practices which protect the food from contamination.

Physical Needs Question 6

(14) 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 or less.

(15) 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.

(16) Soaps, detergents, cleaning compounds or similar substances shall be stored in areas separate from food supplies.

(17) 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.

(18) All food shall be protected against contamination. Contaminated food shall be discarded immediately.

(19) All equipment, fixed or mobile, dishes, and utensils shall be kept clean and maintained in safe condition.

Physical Needs Questions 4, 13

(20) 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.

-Dishwashing machines shall reach a temperature of 165 degrees F during the washing and/or drying cycle to ensure that dishes and utensils are cleaned and sanitized.

-Facilities not using dishwashing machines shall clean and sanitize dishes and utensils by an alternative comparable method.

(21) Equipment necessary for the storage, preparation and service of food shall be provided, and shall be well-maintained.

(22) Tableware and tables, dishes, and utensils shall be provided in the quantity necessary to serve the clients.

(23) Adaptive devices shall be provided for self-help in eating as needed by clients.

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 in this Division.

The licensing agency shall specify in writing the written information required from the licensee.

Care for Clients who Rely Upon Others to Perform All Activities of Daily Living 80077.2

(a) A licensee of an adult CCF may accept or retain a client who relies upon others to perform all activities of daily living for them.

(b) Prior to accepting a client into care, the licensee shall complete the following:

(1) An approved plan of operation demonstrating the licensee's ability to care for these clients as specified in Section 80022(e).

(2) A Needs and Services Plan, as required by the facility-specific regulations, that includes all of the following:

- A plan to monitor the client's skin condition, including:
 - Specific guidelines for turning the client, (time, method, acceptable positions).
 - Skin breakdown.
 - Objective symptoms, observable by a lay person, indicating when a licensed professional must be contacted.
- A method for feeding the client and providing him/her with hydration.
- A method for determining the client's needs.
- A method for communicating with the client.
- A list of emergency contacts and a list of readily observable conditions that indicate when emergency intervention is necessary.
- A list of persons to contact in the event of non-emergency client distress or discomfort and a list of readily observable conditions that indicate when the licensee is to contact those persons.
- A description of the client-specific training that facility staff will receive.
 - The training must be provided by the client's health care provider (physician or nurse) the client's physical or mental health therapist, social worker, and placement worker, within their individual scopes of practice.
 - The training must include the client's needs and objective symptoms that indicate when the licensee is to obtain health care or other type of assistance.
- In an ARF or SRF, an agreement, signed by the placement agency, or authorized representative, to review the client's care at least once a month.

A copy of the agreement shall be maintained in the client's file.

-The licensee's agreement to document significant occurrences that result in changes in the client's physical, mental, and/or functional capabilities. This documentation must be retained in the client's record in the facility and be readily available for review by the client's health care providers and the Department.

(c) The Department may require any additional information it considers necessary to ensure the safety of clients.

Care for Clients Who Lack Hazard Awareness or Impulse Control 80077.3

(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 80072.

(2) The licensee of an ARF, GH, SFH, FFH, or CFH may use a delayed-egress device if the client lacks hazard awareness or impulse control and only as specified in Health and Safety Code Section 1531.1.

(3) The following initial and continuing requirements must be met for the licensee to utilize delayed egress devices on exterior doors or perimeter fence gates:

- The licensee shall notify the Department immediately after determining the date that the device will be installed.

-The licensee shall ensure that the fire clearance includes approval of delayed egress devices.

-Following the disaster and mass casualty plan specified in Section 80023, fire and earthquake drills shall be conducted at least once every three months on each shift and shall include, at a minimum, all facility staff who provide or supervise client care and supervision.

-Without violating Section 80072(a)(6), facility staff shall attempt to redirect a client who lacks hazard awareness or impulse control and who attempts to leave the facility.

-Clients who continue to indicate a desire to leave the facility following an egress delay shall be permitted to do so.

-Without violating Section 80072(a)(6), facility staff shall ensure the continued safety of clients when they leave the facility.

-The licensee shall report to the Department, to the client's responsible representative, if any, and to any family member who has requested notification, each incident in which a client leaves the facility unassisted. The report shall be made by telephone no later than the next working day and in writing within seven calendar days.

Care for Clients with Incontinence 80077.4

(a) A licensee of an adult CCF may accept or retain a client who has bowel and/or bladder incontinence.

(b) If a licensee accepts or retains a client who has bowel and/or bladder incontinence, the licensee is responsible for all of the following:

(1) Ensuring that incontinent care products appropriate to the needs of the client are used whenever they are needed.

(2) Ensuring that clients who can benefit from scheduled toileting are assisted or reminded to go to the bathroom at regular intervals rather than being diapered.

(3) Assisting the client with self-care.

(4) Ensuring that clients with incontinence are kept clean and dry, and that the facility remains free of odors.

(5) Ensuring that, where prescribed, bowel and/or bladder programs are designed by a licensed professional or designee. The person designing the program must have training and experience in care of persons with bowel and/or bladder dysfunction and development of retraining programs for establishing normal patterns of continence.

-The licensee shall ensure that clients are assisted with a structured bowel and/or bladder retraining program if one has been designed for the client.

-The licensee shall ensure that facility staff responsible for implementing the program receive training from the licensed professional or designee who designed the program.

-The licensee obtains from the licensed professional or designee written instructions to facility staff outlining the procedures and shall document the names of facility staff who received the training.

-The licensee shall ensure that the licensed professional or designee evaluates the effectiveness of the program and staff as the licensed professional or designee deems appropriate, but at least annually.

(6) Ensuring that the condition of the skin exposed to urine and stool is evaluated regularly to ensure that skin breakdown is not occurring.

(7) Ensuring privacy when care is provided.

(8) Providing needed incontinence supplies when the client or a third party is unable to do so.

(9) Ensuring that fluids are not withheld to control incontinence.

(10) Ensuring that a client with incontinence is not catheterized to control incontinence for the convenience of the licensee or facility staff.

Care for Clients with Contractures 80077.5

Physical Needs Question 17

A licensee of an adult CCF may accept or retain a client who has contractures.

If a licensee accepts or retains a client who has contractures, the licensee is responsible for all of the following:

(1) Monitoring the client's ongoing ability to care for his/her contractures in accordance with the physician's instructions.

(2) Ensuring that care is provided by a licensed professional or trained facility staff when the client is unable to provide self-care.

-The licensee shall ensure that facility staff responsible for assisting with range of motion exercises or other exercise(s) prescribed by the physician or therapist receive supervision and training from a licensed professional.

-The licensee obtains from the licensed professional written documentation outlining the procedures for the exercises and the names of facility staff who received the training.

-The licensee shall ensure that the licensed professional reviews staff performance as the licensed professional deems necessary, but at least once a year.

In addition to the above, in an ARF or SRF, the licensee shall ensure that there is a plan of care for the contractures that is developed by a

licensed professional.

Health and Safety Services 80090

(a) The provisions of this article are applicable to adult CCFs.

(b) Waivers or exceptions will not be granted to accept or retain clients who have health conditions prohibited by Section 80091.

(c) The Department may grant an exception allowing acceptance or retention of a client who has a medical or health condition not listed in Section 80092 if all of the following requirements are met:

(1) Either the condition is chronic and stable or it is temporary in nature and is expected to return to a condition normal for that client.

(2) The client must be under the medical care of a licensed professional.

(3) The licensee has developed a plan of care for the client as specified in Sections 80068.2 and 80092.2.

(4) The client is able to care for all aspects of the condition for himself/herself or assistance in the care of the condition is provided either by an appropriately skilled and licensed professional or by facility staff who receive supervision and training from a licensed professional.

-Training shall include hands-on instruction in both general procedures and client-specific procedures.

-The licensee obtains from the licensed professional written documentation outlining the procedures and the names of facility staff who received the training.

-The licensee ensures that the licensed professional reviews staff performance as the licensed professional deems necessary, but at least once a year.

(5) The licensee agrees in writing to comply with all aspects of the client's care plans.

Prohibited Health Conditions 80091

Physical Needs Question 1

In adult CCFs clients who require health services or have a health condition including, but not limited to, those specified below shall not be admitted or retained.

- (1) Naso-gastric and naso-duodenal tubes
- (2) Active, communicable TB
- (3) Conditions that require 24-hour nursing care and/or monitoring
- (4) Stage 3 and 4 dermal ulcers
- (5) Any other condition or care requirements which would require the facility to be licensed as a health facility as defined by Sections 1202 and 1250 of the Health and Safety Code.

Restricted Health Conditions 80092

Adult CCFs may accept or retain clients who have the conditions listed in this section only if all requirements of Article 8 are met.

Physical Needs Questions 9, 19

Care for the following health conditions must be provided only as specified in Sections 80092.1 through 80092.1

- (1) Use of inhalation-assistive devices as specified in Section 80092.3
- (2) Colostomy/ileostomies as specified in Section 80092.4
- (3) Requirement for fecal impaction removal, enemas, or suppositories only as specified in Section 80092.5

(4) Use of catheters only as specified in Section 80092.6

(5) Staph or other serious, communicable infections as specified in Section 80092.7

(6) Insulin-dependent Diabetes as specified in Section 80092.8

(7) Stage 1 and 2 dermal ulcers as specified in Section 80092.9

(8) Wounds as specified in Section 80092.9

(9) Gastrostomies as specified in Section 80092.10

(10) Tracheostomies as specified in Section 80092.11

General Requirements for Restricted Health Conditions 80092.1

(a) A client with a restricted health condition specified in Section 80092 may be admitted or retained in an adult CCF if all requirements in Sections 80092.1(b) through (o) are met.

(b) The licensee is willing to provide the needed care.

(c) Care is provided as specified in this article.

(d) Either the client's medical condition is chronic and stable, or is temporary in nature and is expected to return to a condition normal for that client, and

(e) The client must be under the medical care of a licensed professional.

(f) Prior to admission of a client with a restricted health condition specified in Section 80092, the licensee shall:

(1) Communicate with all other persons who provide care to that client to ensure consistency of care for the medical condition.

(2) Ensure that facility staff who will participate in meeting the client's specialized care needs complete training provided by a licensed professional sufficient to meet those needs.

-Training shall include hands-on instruction in both general procedures and client-specific procedures.

(g) All new facility staff who will participate in meeting the client's specialized care needs shall complete the training prior to providing services to the client.

(h) The licensee shall ensure that facility staff receive instruction from the client's physician or other licensed professional to recognize objective symptoms observable by a lay person, and how to respond to that client's health problems, including who to contact.

(i) The licensee shall monitor the client's ability to provide self-care for the restricted health condition, document any change in that ability, and inform the persons identified in Section 80092.2(a)(1) of that change.

(j) Should the condition of the client change, all staff providing care and services shall complete any additional training required to meet the client's new needs, as determined by the client's physician or a licensed professional designated by the physician.

(k) If the licensed health professional delegates routine care, the following requirements must be met for health conditions specified in Sections 80092.3, 80092.4 and 80092.6 through 80092.11:

(1) The licensee shall obtain written documentation from the licensed professional outlining the procedures and the names of the facility staff who have been trained in those procedures.

(2) The licensee ensures that the licensed professional reviews staff performance as often as necessary, but at least annually.

(l) All training shall be documented in the facility personnel files.

(m) The licensee of an ARF or SRF shall develop and maintain, as part of the Needs and Services Plan, a Restricted Health Condition Care Plan as specified in Section 80092.2.

(1) The care plan shall neither require nor recommend that the licensee or any facility personnel or any other person providing care, other than a physician or licensed professional, implement any health care procedure that may legally be provided only by a physician or licensed professional.

(n) The licensee shall ensure that the client's health-related service needs are met and shall follow the approved plan for each client.

(o) The licensee shall document any significant occurrences that result in changes in the client's physical, mental and/or functional capabilities and report these changes to the client's physician and authorized representative.

(p) The licensee shall demonstrate compliance with the restricted health condition care plan by maintaining in the facility all relevant documentation.

(q) The licensee shall report any substantive deviation from the care plan to the client's authorized representative.

(r) The duty established by this section does not infringe on a client's right to receive or reject medical care or services, as allowed in Section 80072.

(1) If a client refuses medical services specified in the care plan, the licensee shall immediately notify all persons identified in Section 80092.2(a)(1) and shall participate in developing a plan for meeting the client's needs.

(2) If unable to meet the client's needs, the licensee shall issue an eviction notice as specified in Section 80068.5.

Restricted Health Care Condition Care Plan 80092.2

(a) If the licensee of an ARF or SRF chooses to care for a client with a restricted health condition, as specified in Section 80092, the licensee shall develop and maintain, as part of the Needs and Services Plan, a written Restricted Health Condition Care Plan. The plan must include all of the following:

(1) Documentation that the client and the client's authorized representative, if any, the client's physician or a licensed professional designated by the physician, and the placement agency, if any, participated in the development of the plan.

(2) Documentation by the client's physician or a licensed professional designated by the physician, of the following:

- Stability of the medical conditions.
- Medical conditions that require services or procedures.
- Specific services needed.
- Client's ability to perform the procedures.
- The client does not require 24-hour

nursing care and/or monitoring.

(3) Identification of a licensed professional who will perform procedures if the client needs medical assistance.

(4) Identification of the person who will perform incidental medical assistance that does not require a licensed professional.

(5) Name and telephone number of emergency medical contacts.

(6) A date specified by the client's physician or designee, who is also a licensed professional, when the plan must be reviewed by all parties identified in Section 80092.2(a)(1).

(7) A signed statement from the client's attending physician that the plan meets medical scope of practice requirements.

(8) For clients of a placement agency, a signed statement from a representative of the placement agency, that they have reviewed and approved the plan and that the placement agency will monitor implementation of the plan.

(b) The Restricted Health Condition Care Plan shall neither require nor recommend that the licensee or any facility personnel or any other person providing care, other than a physician or licensed professional, implement any health care procedure that may legally be provided only by a physician or licensed professional.

Inhalation-Assistive Devices 80092.3

(a) A licensee of an adult CCF may accept or retain a client who requires the use of an inhalation-assistive device if all of the following conditions are met:

(1) The licensee is in compliance with Section 80092.1.

(2) The licensee monitors the client's ongoing ability to operate and care for the device in accordance with the physician's instructions.

(3) The licensee ensures that either:

-The device is operated and cared for by a licensed professional when the client is unable to operate the device, or determine his/her own need.

-The device can legally be operated by an unlicensed person and is cared for by facility staff who receive training from a licensed professional as specified in Sections 80092.1(k) through (k)(2).

(4) The licensee ensures that:

-The device is functional.

-The device is removed from the facility when no longer prescribed for use by the client.

(5) The licensee ensures that the room containing the device is large enough both to accommodate it and to allow easy passage of clients and staff.

(6) The licensee ensures that facility staff have the knowledge of and ability to care for the device.

Colostomy/Ileostomy 80092.4

(a) A licensee of an adult CCF may accept or retain a client who has a colostomy or ileostomy if all of the following conditions are met:

(1) The client is mentally and physically capable of providing all routine care for his/her ostomy, and the physician has documented that the ostomy is completely healed.

(2) A licensed professional provides assistance in the care of the ostomy.

(3) The licensee is in compliance with Section 80092.1.

(4) The licensee monitors the client's ongoing ability to provide care for his/her ostomy in accordance with the physician's instructions.

(5) The licensee ensures that:
-A licensed professional provides ostomy care when the client is unable to provide self-care.

-The ostomy bag and adhesive may be changed by facility staff who receive training from the licensed, professional as specified in Sections 80092.1 (k) through (2).

(6) The licensee ensures that used bags are discarded as specified in Section 80088(f)(2).

(7) The licensee ensures privacy when ostomy care is provided.

Fecal Impaction Removal, Enemas, or Suppositories 80092.5

A licensee of an adult CCF may accept or retain a client who requires manual fecal impaction removal, enemas, or use of suppositories if all of the following conditions are met:

(1) The licensee is in compliance with 80092.1.

(2) The licensee monitors the client's ongoing ability to provide his/her own routine care in accordance with the physician's instructions.

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(3) The licensee ensures that a licensed professional administers the fecal impaction removal, enemas, or suppositories when the client is unable to do so for himself/herself.

(4) The licensee ensures that a licensed professional performs manual fecal impaction removal whenever it is necessary.

(5) The licensee ensures privacy when care is being provided.

Indwelling Urinary Catheter/ Catheter Procedure 80092.6

(a) A licensee of an adult CCF may accept or retain a client who requires an indwelling catheter if all of the following conditions are met:

(1) The client is physically and mentally capable of caring for all aspects of the condition except insertion, removal and irrigation.

-Irrigation shall only be performed by a licensed professional in accordance with the physician's orders.

-Insertion and removal shall only be performed by a licensed professional.

(2) The licensee is in compliance with Section 80092.1.

(3) The licensee monitors the client's ongoing ability to care for his/her catheter in accordance with the physician's instructions.

(4) The licensee ensures that either catheter care is provided by a licensed professional when the client is unable to provide self-care, or the catheter bag and tubing are changed and bags are emptied by facility staff who receive training from the licensed professional as specified in Sections 80092.1(k) through (k)(2).

(5) The licensee ensures that insertion, removal and irrigation of the catheter, or any other required catheter care other than that specified in Section 80092.6(a)(4) are performed by a licensed professional.

(6) The licensee ensures that waste materials are disposed of as specified in Section 80088(f)(2).

(7) The licensee ensures privacy when care is provided.

Staph or Other Serious, Communicable Infections 80092.7

(a) A licensee of an adult CCF may accept or retain a client who has a staph or other serious communicable infection if all of the following conditions are met:

(1) The licensee is in compliance with Section 80092.1.

(2) The licensee has obtained a statement from the client's physician that the infection is not a risk to other clients.

(3) The licensee monitors the client's ongoing ability to care for his/ her own condition by complying with the instructions of the licensed professional who is managing the client's care.

-The licensed professional may delegate certain aspects of the care providing the facility staff responsible for providing the care receive training from a licensed professional as specified in Sections 80092.1 (k) through (k)(2) prior to providing care.

(4) The licensee ensures that a licensed professional assesses the infection and evaluates the treatment at intervals set by the physician or a licensed professional designated by the physician.

(5) The licensee ensures that prior to providing care, staff are trained in and follow Universal Precautions and any other procedures recommended by the licensed professional for protection of the client who has the infection, other clients and staff.

(6) The licensee ensures that all aspects of care performed in the facility by the licensed professional and facility staff are documented in the client's file.

Diabetes 80092.8

(a) A licensee of an adult CCF may accept or retain a client who has diabetes if all of the following conditions are met:

(1) The licensee is in compliance with Section 80092.1.

(2) The client is mentally and physically capable of administering his/her own medication and performing his/her own glucose testing if applicable, or a licensed professional administers the tests and injections.

The licensed professional may delegate to trained facility staff glucose testing provided all of the following conditions are met:

-The blood glucose-monitoring test is performed with a blood glucose-monitoring instrument that has been approved by the federal Food and Drug Administration for over-the-counter sale.

-The licensee ensures that facility staff responsible for glucose testing receive training from a licensed professional as specified in Sections 80092.1(k) through (k)(2).

-Facility staff comply with the instructions of the licensed professional regarding the performance of the test and the operation of the blood glucose-monitoring installment.

-Facility staff immediately notify the client's physician if the results are not within the normal range for the client.

-The licensee ensures that the results of each blood glucose test performed by facility staff are documented and maintained in the client's record in the facility.

(3) The licensee ensures that sufficient amounts of medicines, testing equipment, syringes, needles, and other supplies are maintained and stored in the facility.

(4) The licensee ensures that injections are administered immediately after a syringe is filled unless the client is using prefilled syringes prepared by a registered nurse, pharmacist, or drug manufacturer.

(5) The licensee ensures that syringes and needles are disposed of in accordance with California Code of Regulations, Title 8, Section 5193.

(6) The licensee provides a modified diet as prescribed by a client's physician, as specified in Section 80076(a)(6). Any substitutions shall be made by the facility dietitian or in consultation with a registered dietician or the client's physician or medical provider.

(7) The licensee ensures that all facility staff who provide care receive training in recognizing the signs and symptoms of hyperglycemia and hypoglycemia and in taking appropriate action for client safety.

(b) For clients who provide self-care, the licensee shall:

(1) Monitor the client's ongoing ability to perform his/her glucose testing and administer his/her medication in accordance with the physician's instructions.

(2) Assist clients with self-administered medication, as specified in Section 80075.

Wounds 80092.9

(a) A licensee of an adult CCF may accept or retain a client who has a serious wound if all of the following conditions are met:

(1) The licensee is in compliance with Section 80092.1.

(2) The wound is either an unhealed, surgically closed incision or wound, or determined by the physician or a licensed professional designated by the physician to be a Stage 1 or 2 dermal ulcer and is expected by the physician or designated professional to completely heal.

(3) The licensee ensures that a licensed professional in accordance with the physician's instructions provides the wound care.

(A) The licensed professional may delegate simple dressing to facility staff who receive training from a licensed professional as specified in Sections 80092.1(k) through (k)(2).

(4) The licensee ensures that a licensed professional assesses the wound at intervals set by the physician, or a licensed professional designated by the physician, to evaluate treatment and progress toward healing.

(5) The licensee ensures that all aspects of care performed by the licensed professional facility staff are documented in the client's file.

(b) Non-serious wounds, which include but are not limited to minor cuts, punctures, lacerations, abrasions, and first-degree burns are not affected by this section.

Gastronomy Feeding, Hydration, and Care 80092.10

(a) A licensee of an adult CCF may accept or retain a client who requires gastrostomy care, feeding, and/or hydration if all of the following conditions are met:

(1) The licensee is in compliance with Section 80092.1.

(2) The physician has documented that the gastrostomy is completely healed.

(3) The licensee monitors the client's ongoing ability to provide all routine feeding, hydration and care for his/her gastrostomy in accordance with the physician's instructions.

(4) The licensee ensures that gastrostomy feeding, hydration, medication administration through the gastrostomy, and stoma cleaning are provided by a licensed professional when the client is unable to provide his/her own feeding, hydration and care.

The licensed professional may delegate the following tasks to facility staff who receive training from a licensed professional as specified in Sections 80092.1(k) through (k)(2).

- Gastrostomy feeding, hydration, and stoma cleaning.
- For routine medications, trained staff may add medication through the gastrostomy per physician's or nurse practitioner's orders.
- For PRN medications, trained staff may add medications through the gastrostomy

in accordance with Section 80075(b) through (e).

Tracheostomies 80092.11

(a) A licensee of an adult CCF may accept or retain a client who has a tracheostomy if all of the following conditions are met:

(1) The licensee is in compliance with Section 80092.1.

(2) Either the client is mentally and physically capable of providing all routine care for his/her tracheostomy and the physician has documented that the tracheostomy opening (stoma) is completely healed, or assistance in the care of the tracheostomy is provided by a licensed professional.

(A) The licensed professional may delegate routine care for the tracheostomy to facility staff who receive supervision and training from the licensed professional as specified in Sections 80092.1(k) through (k)(2). Suctioning shall not be delegated to facility staff.

(3) The licensee monitors the client's ongoing ability to provide all routine care for his/her tracheostomy in accordance with the physician's instructions.

(4) The licensee ensures that tracheostomy care is provided by a licensed professional when the client is unable to provide self-care.

Department Review of Health-Related Conditions 80093

(a) The Department may review actual or suspected health-related conditions, including those specified in Section 80092, to determine if a client is appropriately placed in the facility and if the client's health-related needs are being met. The Department will inform the licensee that

the client's health-related condition requires review and will specify documentation that the licensee shall submit to the Department.

(1) Documentation includes, but is not limited to, the following:

- Restricted Health Condition Care Plan, if applicable.
- Needs and Services Plan.
- Copies of prescriptions for medical services and/or medical equipment.

(2) The licensee shall submit the documentation to the Department within 10 working days.

(b) If the Department determines that the client has a restricted health condition, as specified in Section 80092, the licensee shall provide care to the client in accordance with conditions specified in Sections 80092.1 and applicable requirements in Sections 80092.3 through 80092.11. If the licensee is not able to provide adequate care, the client shall be relocated.

(c) If the Department determines that the client has a prohibited health condition, as specified in Section 80091 or a health condition that cannot be cared for within the limits of the license or within the abilities of that specific facility, the Department will order relocation of the client as specified in Section 80094.

(1) The notification to the licensee will include notice of all appeal rights, as specified in Section 80094.

(d) This section does not entitle the licensee to a full evidentiary hearing, state hearing, or any other administrative review beyond that set forth in this section.

Health Condition Relocation Order 80094

(a) In an adult CCF the Department will order relocation of a client if the Department makes any of the following determinations:

(1) The client has a prohibited health condition, as specified in Section 80091.

(2) The licensee has not met all of the requirements in Sections 80092.1 and applicable requirements in Sections 80092.3 through 80092.11.

(3) The client has a health condition that cannot be cared for within the limits of the license or within the abilities of that specific facility.

(b) The Department will give written notice to the licensee ordering the relocation of the client and informing the licensee of the client's right to an IDT review of the relocation order.

(1) Concurrently, the Department will give the notice of the health condition relocation order and information about the client's right to request review of the relocation order to the client. The Department will mail, by certified mail, or deliver a copy within one working day to the client's authorized representative, if any and responsible person.

(A) If the client has no authorized representative, as defined in Section 80001, the relocation order shall be sent to the responsible person and representative payee, if any.

(2) The health condition relocation order will state the reason for the relocation order and cite the regulation(s) requiring the relocation.

(3) Upon receipt of the relocation order, the licensee shall prepare a written relocation plan in compliance with Section 80078.

Client's Request for Review of a Health Condition Relocation Order by the Interdisciplinary Team 80094.5

(a) A client or the client's authorized representative, if any, may request a review of the Department's health condition relocation order by the IDT.

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(b) The client or the client's authorized representative, if any, has 10 working days from receipt of the relocation order to submit to the licensee a written, signed, and dated request for a review and determination by the IDT.

(1) For purposes of this section, a working day is any day except Saturday, Sunday, or an official state holiday.

(c) The licensee shall mail or deliver such a request to the Department within two (2) working days of receipt. Failure or refusal to do so may subject the licensee to civil penalties, as provided in Section 80054.

(d) Within five (5) working days of receipt by the Department of the request for review, the Department will give written notification to the licensee, client and the client's authorized representative, if any, acknowledging receipt of the client's request for review of the relocation order.

(e) Within twenty (20) working days from the date of the client's review request, the licensee shall submit to the Department the documentation specified in this section to complete the client's review request. If the information is not received within twenty (20) days, the request for review shall be considered withdrawn, the licensee shall be notified, and the relocation plan will be implemented.

(f) The licensee shall cooperate with the client and the client's authorized representative, if any, in gathering the documentation to complete the client's review request.

(g) The documentation to complete the client's review request shall include, but not be limited to, the following:

(1) The reason(s) for disagreeing that the client has the health condition identified in the relocation order and why the client believes he/she may legally continue to remain in a CCF.

(2) Current health and functional capabilities assessments, as specified in Sections 80069 and 80069.2. For purposes of this section, "current" means a medical assessment completed on or after the date of the relocation order.

(3) A written statement from any placement agency currently involved with the client addressing the relocation order.

(h) The Department will inform the licensee, client and the client's authorized representative, if any, in writing, of the IDT's determination and the reason for that determination not more than 30 days after the Department's receipt of the information required in this section.

(i) A client does not have a right to a review under this section in any of the following circumstances:

(1) A health condition relocation order has been issued under Section 80078(b)(6).

(2) A client has been evicted under Section 80068.5.

(3) A temporary suspension order has been issued under Section 80042.

(j) This section does not entitle the client to a right to a state hearing or any other administrative review beyond that set forth in this section.

Mental Health Intake Assessment 85069.3

In order to determine his/her ability to provide the services needed by a client with mental illness,

the licensee of an ARF shall ensure that a written intake assessment is prepared as required by Health and Safety Code Section 1562.6(a).

Health-Related Services 85075

In addition to Section 80075, the following shall apply. The facility shall develop and implement a plan which ensures that assistance is provided to the clients in meeting their medical and dental needs.

Hospice Care 85075.1

(a) A licensee shall be permitted to retain terminally ill clients who receive hospice services from a hospice agency if all of the following conditions (1) through (7) are met:

- (1) The licensee has received a facility hospice care waiver from the Department.
- (2) The licensee remains in substantial compliance with the requirements of this section, and those provisions of Chapters 1 and 6, Division 6, of Title 22, California Code of Regulations (CCR), governing Adult Residential Facilities, and with all terms and conditions of the waiver.
- (3) Hospice services are contracted for by each terminally ill client individually or, if the client is incapacitated, by the client's Health Care Surrogate Decision Maker. The licensee shall not contract for hospice services on behalf of a client. The hospice must be licensed by the state and certified by the federal Medicare program to provide hospice services.
- (4) A written plan is developed for each terminally ill client by that client's hospice. Prior to the initiation of hospice services for that client, the plan must be agreed upon by the licensee and the client, or the client's Health Care Surrogate Decision Maker. All plans must be fully implemented by the licensee and by the hospice.

(5) Retention of any terminally ill client in the facility does not represent a threat to the health and safety of any facility client or violate result the personal rights of any facility client.

(6) The hospice and the client agree to provide the licensee with all information necessary to allow the licensee to comply with all regulations and to assure that the client's needs are met.

(7) The hospice agrees to provide necessary medical intervention related to the client's terminal illness. The medical intervention shall not exceed the care and supervision for a residential facility, as defined in Chapters 1 and 6, Division 6, of Title 22, CCR, governing Adult Residential Facilities.

(b) A current and complete plan shall be maintained in the facility for each hospice client and include the following:

- (1) The name, office address, business telephone number, and 24-hour emergency telephone number of the hospice and the client's physician.
- (2) A description of the services to be provided in the facility by the hospice, including, but not limited to, the type and frequency of services to be provided.
- (3) The designation of the client's primary contact person at the hospice, and the client's primary and alternate care-giver at the facility.
- (4) A description of the licensee's responsibility for implementing the plan including, but not limited to, facility staff duties, record keeping, and communication with the hospice, the client's physician, and the client's responsible person, if any. This description shall include the type and frequency of the tasks to be performed by facility staff. The plan shall specify all procedures to be implemented by the licensee regarding the storage and handling of medications or other substances, and the maintenance and use of medical supplies, equipment, or appliances. The plan shall specify, by name or job function, the

licensed health care professional on the hospice staff who will control and supervise the storage and administration of all controlled drugs (Schedule II-V, as defined in Health and Safety Code Sections 11055-11058) for the client. Facility staff may assist clients with self-medications without hospice personnel being present. The plan shall neither require nor recommend that the licensee, or any facility staff, other than a physician or appropriately skilled professional, implement any health care procedure that may legally be provided only by a physician or appropriately skilled professional.

(5) A description of all hospice services to be provided or arranged in the facility by persons other than the licensee, facility staff, or the hospice. These persons include but are not limited to clergy and the client's family members and friends.

(6) Identification of the training needed, which staff members need this training, and who will provide the training related to the licensee's responsibilities for implementing the plan. The training shall include, but not be limited to, the needs of hospice patients, such as hydration, injection control, and turning and incontinence care to prevent skin breakdown. The hospice will provide training specific to the current and ongoing needs of the individual client receiving hospice care. The training must be completed before hospice care to the client begins.

(7) Any other information deemed necessary by the Department, on an individual basis, to ensure that the terminally ill client's needs for health care, personal care, and supervision are met.

(c) The licensee shall ensure that the plan complies with the requirements of this section and those provisions of Chapters 1 and 6, Division 6, of Title 22, CCR, governing Adult Residential Facilities.

(d) The licensee shall ensure that the plan is current, accurately matches the services being provided, and that the client's care needs are

being met at all times.

(e) The Department may require that the licensee obtain a revision of the plan if the plan is not fully implemented, or if the Department has determined that the plan should be revised to protect the health and safety of any facility client.

(f) The licensee shall maintain a record of all hospice-related training provided to the licensee or facility staff for a period of three years.

(1) The record of each training session shall specify the names and credentials of the trainer, the persons in attendance, the subject matter covered, and the date and duration of the training session.

(2) The Department shall be entitled to inspect, audit, remove if necessary, and copy the record upon demand during normal business hours.

(g) In addition to meeting the reporting requirements specified in Sections 80061 and 85061, the licensee shall submit a report to the Department when a client's hospice services are interrupted or discontinued for any reason other than the death of the client. The licensee shall also report any deviation from the client's plan, or other incident, which threatens the health and safety of any client. Such reports shall be made by telephone within one working day, and in writing within five working days, and shall specify all of the following:

- The name, age, and gender of each affected client.

- The date and nature of the event and explanatory background information leading up to the event.

- The name and business telephone number of the hospice.

- Actions taken by the licensee and any other parties to resolve the incident and to prevent similar occurrences.

(h) For each client receiving hospice services, the licensee shall maintain the following in the client's record:

(1) The client's or the client's Health Care Surrogate Decision Maker's written request for retention and hospice services in the facility, and his/her Advance Health Care Directive, if any.

(2) The name, address, telephone number, and 24-hour emergency telephone number of the hospice and the client's Health Care Surrogate Decision Maker, if any, in a manner that is readily available to the client, the licensee, and facility staff.

(3) A copy of the written certification statement of the client's terminal illness from the medical director of the hospice or the physician in the hospice interdisciplinary group, and the client's attending physician, if any.

(4) A copy of the client's current plan approved by the licensee, the hospice, and the client or the client's Health Care Surrogate Decision Maker, if the client is incapacitated.

(5) A statement signed by the client's roommate, if any, indicating his or her acknowledgment that the client intends to receive hospice care in the facility for the remainder of the client's life, and the roommate's voluntary agreement to grant access to the shared living space to hospice staff, and the client's family members, friends, clergy, and others. If the roommate withdraws the agreement verbally or in writing, the licensee shall make alternative arrangements which fully meet the needs of the hospice client.

(i) Prescription medications no longer needed shall be disposed of in accordance with Section 80075(o).

(j) Care for the client's health condition is addressed in the plan. No facility staff, other than an appropriately skilled health professional, shall perform any health care procedure that, under law, may only be performed by an appropriately skilled professional.

(k) The licensee shall maintain a record of dosages of medications that are centrally stored for each client receiving hospice in the facility.

(l) Clients receiving hospice who are bedridden as defined in Section 1569.72(b) of the Health and Safety Code may reside in the facility provided that within 48 hours of the individual's bedridden status, the licensee ensures that the local fire authority is notified of the estimated length of time the client will be bedridden.

(m) Nothing contained in this section precludes the Department from requiring a client to be relocated when the client's needs for care and supervision or health care are not being met in the facility.

Facility Hospice Care Waiver 85075.2

(a) In order to retain terminally ill clients and permit them to receive care from hospice, the licensee shall have obtained a Facility Hospice Care Waiver from the Department. To obtain this waiver the licensee shall submit a written request including, but not be limited, to the following:

(1) The maximum number of terminally ill clients that the facility will care for at any one time.

(2) A statement by the licensee or designated representative that this section, and all other requirements within Chapters 1 and 6, Division 6, of Title 22, CCR, governing Adult Residential Facilities, have been read and that the licensee will ensure compliance with these requirements.

(3) A statement that the licensee shall comply with the terms and conditions of all plans which are designated as the responsibility of the licensee or under the control of the licensee.

(4) A statement that hospice services will be provided only to individuals who are clients of the facility prior to the initiation of hospice services.

(b) The Department shall deny a waiver request if the licensee is not in substantial compliance with the provisions of Chapters 1 and 6, Division

6, of Title 22, CCR, governing Adult Residential Facilities.

(c) The Department shall not approve a waiver request unless the licensee: 1) demonstrates the ability to meet the care and supervision needs of clients, and 2) states a willingness to provide additional care staff if required by the plan.

(d) Any waiver granted by the Department shall include terms and conditions necessary to ensure the well-being of clients and/or all other clients. These terms and conditions shall include, but not be limited to, the following requirements:

(1) A written request shall be signed by each client or the client's Health Care Surrogate Decision Maker to allow the client's retention in the facility while receiving hospice services. The request shall be maintained in the client's record at the facility as specified in Section 85075.1(h) (1).

(2) The licensee shall notify the Department in writing within five working days of the initiation of hospice care services in the facility for any client. The notice shall include the client's name and date of admission to the facility and the name and address of the hospice.

(e) Within 30 calendar days of receipt of a completed request for a waiver, the Department 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, needing additional described information for the request to be acceptable, and a time frame for submitting this information. Failure of the applicant or licensee to submit the requested information within the time shall result in denial of the request.

(3) Within 30 days of accepting a request for a waiver, the licensing agency shall notify the

applicant or licensee, in writing, whether the request has been approved or denied.

Advanced Health Care Directives 85075.3

a) A client shall be permitted to have an Advance Health Care Directive in the client's file.

(b) If a client experiences a medical emergency and has an Advance Health Care Directive on file, the facility staff shall do one of the following:

(1) Immediately telephone 9-1-1, present the Advance Health Care Directive to the responding emergency medical personnel and identify the client as the person to whom the Directive refers; or

(2) Immediately give the Advance Health Care Directive to a physician, RN or LVN if he or she is in the client's presence at the time of the emergency and if he or she assumes responsibility.

Observation of the Client 85075.4

Physical Needs Question 34

The licensee shall regularly observe each client for changes in physical, mental, emotional and social functioning.

The licensee shall provide assistance when observation reveals needs which might require a change in the existing level of service, or possible discharge or transfer to another type of facility.

Physical Needs Question 22

The licensee shall bring observed changes, including but not limited to unusual weight gains or losses, or deterioration of health condition, to the attention of the client's physician and authorized representative, if any.

Admission & Retention Question 44

A client suspected of having a contagious or infectious disease shall be isolated and a physician contacted to determine suitability of the client's retention in the facility.

Food Service 85076

In addition to Section 80076, the following shall apply.

The licensee shall meet the food service personnel requirements specified in Section 85065(e).

Physical Needs Question 29

Meals served on the premises shall be served in one or more dining rooms or similar areas in which the furniture, fixtures and equipment necessary for meal service are provided. Such dining areas shall be located near the kitchen so that food may be served quickly and easily. Tray service shall be provided in case of temporary need.

The licensee shall meet the following food supply and storage requirements:

Physical Needs Questions 12, 28

(1) Supplies of staple nonperishable foods for a minimum of one week and fresh perishable foods for a minimum of two days shall be maintained on the premises.

Physical Needs Question 30

(2) Freezers shall be large enough to accommodate required perishables and shall be maintained at a temperature of zero degrees F.

Physical Needs Question 24

(3) Refrigerators shall be large enough to accommodate required perishables and shall maintain a maximum temperature of 45 degrees F.

(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.

Physical Needs Question 11

Clients shall be encouraged to have meals with other clients.

Clients who do not elect to have all meals provided by the facility as specified in Section 80076(a)(3), but whose conditions subsequently change so that self-purchase of foods and self-preparation of meals is no longer a viable alternative, shall receive full meal service.

MANAGEMENT

Personnel Requirements 80065

Facility personnel must 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.

The licensing agency shall have the authority to require any licensee to provide additional staff 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

Management Question 39

The licensee shall be permitted to utilize volunteers provided that such volunteers are supervised, and are not included in the facility staffing plan.

Management Questions 7, 29

The following facility personnel shall be at least 18 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

The licensee shall provide for direct supervision of clients during participation in or presence at

potentially dangerous activities or areas in the facility.

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.

Management Question 8

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.

Management Question 3

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
- (4) Recognition of early signs of illness and the need for professional assistance
- (5) Availability of community services and resources
- (6) For adult CCFs, Universal Precautions as defined in Section 8000I. Training in Universal Precautions may be provided in the facility or staff may attend training provided by a local health facility, county health department, or other local training resources

All personnel, including the licensee, administrator and volunteers, shall be in good health, and shall be physically, mentally, and occupationally capable of performing assigned tasks.

Management Questions 6, 46, 52

Except as specified in 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.

A health screening report signed by the person performing such screening shall be made on each person specified above, and shall indicate the following:

(1) The person's physical qualifications to perform the duties to be assigned

(2) The presence of any health condition that would create a hazard to the person, clients or other staff members

The good physical health of each volunteer who works in the facility shall be verified by:

(1) A statement signed by each volunteer affirming that he/she is in good health

(2) A test for tuberculosis performed not more than one year prior to or seven days after initial presence in the facility

Personnel with evidence of physical illness that poses a threat to the health and safety of clients shall be relieved of their duties.

Prior to employment or initial presence in the facility, all employees and volunteers subject to a criminal record review shall:

(1) Obtain a California clearance or a criminal record exemption as required by law or Department regulations OR

(2) Request a transfer of a criminal record clearance as specified in Section 80019 OR

(3) Request and be approved for a transfer of a criminal record exemption, as specified in Section 80001, unless, upon request for the transfer, the Department permits the individual to be employed, reside or be present at the facility.

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. Such duties and tasks shall be specified in the client's needs and services plan.

When regular staff members are absent, there shall be coverage by personnel capable of performing assigned tasks as evidenced by on-the-job performance.

Personnel shall provide for the care and safety of persons without physical or verbal abuse, exploitation or prejudice.

All personnel shall be instructed to report observations or evidence of violations of any of personal rights.

Personnel Records 80066

Management Question 47

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

(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 he/she is at least 18 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 80065(g)

(11) Tuberculosis test documents as specified in Section 80065(g)

(12) For employees that are required to be fingerprinted pursuant to Section 80019:
-A signed statement regarding their criminal record history
-Documentation of either a criminal record clearance or exemption. For Certified Administrators, a copy of their current and valid Administrator Certification meets this requirement.

Management Question 55

Personnel records shall be maintained for all volunteers and shall contain the following:

(1) A health statement as specified in Section 80065

(2) Tuberculosis test documents as specified in Section 80065(g)

(3) For volunteers that are required to be fingerprinted pursuant to Section 80019:
-A signed statement regarding their criminal record history
-Documentation of either a criminal record clearance or exemption

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 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.

Management Questions 35, 45, 48

All personnel records shall be retained for at least three years following termination of employment.

All personnel records shall be maintained at the facility site. 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 80066(c).

In all cases, personnel records shall document the hours actually worked.

Transportation 80074

Management Question 56

Only drivers licensed for the type of vehicle operated may transport clients.

The manufacturer's rated seating capacity cannot be exceeded.

Motor vehicles used to transport clients must be maintained in safe operating condition.

Administrator Qualifications and Duties 85064

Management Questions 11, 21, 26, 30, 41, 42

All residential facilities must have a certified administrator at least 21 years of age with a high school diploma (or has passed GED).

-Administrators employed prior to July 1, 1996 are exempt from this education requirement

Management Questions 14, 32

The administrator must be on the premises the number of hours necessary to manage and administer the facility in compliance with applicable law and regulation.

When the administrator is absent from the facility there must be coverage by a designated, qualified substitute who shall be capable of and responsible for management and administration of the facility in compliance with applicable law and regulation.

The administrator of a facility for seven to 15 clients must have one year of work experience in residential care.

Management Question 33

The administrator of a facility for 16 to 49 clients shall have graduated from high school, or possess a GED, and shall have one of the following prior to employment:

(1) Completion, with a passing grade, of 15 college or continuing education semester or equivalent quarter units, three of which shall be in nutrition, human behavior, administration, or staff relations.

(2) One year of work experience in residential care.

The administrator of a facility for 50 or more clients shall have graduated from high school, or possess a GED, and shall have one of the following prior to employment:

(1) Completion with passing grade of 60 college or continuing education semester or equivalent quarter units, six of which must be in administration or staff relations

(2) Three years work experience in residential care, one year of which must have been providing direct care to clients or assisting in facility administration.

Management Question 31

The administrator will perform the following duties:

(1) Where applicable, advise the licensee on the operation of the facility and advise the licensee on developments in the field of care and supervision.

(2) Development of an administrative plan and procedures to define lines of responsibility, workloads, and staff supervision.

Management Question 58

(3) Recruitment, employment and training of qualified staff, and termination of staff.

(4) Provision of, or insurance of the provision of, services to the clients, required by applicable law and regulation, including those services identified in the client's individual needs and services plans.

-The licensing agency may approve the use of a centralized service facility to provide any required services to two or more licensed facilities, with this prior approval being in writing.

(5) Arrangement for special provisions for the care and supervision and safety and guidance of clients with disabilities including visual or

auditory deficiencies.

(6) Arrangement for the clients to attend available community programs, when clients have needs, identified in the needs and services plan, which cannot be met by the facility but can be met by community programs. This includes transportation.

Management Question 15

Within six months of becoming an administrator, the individual will receive training on HIV and TV required by the Health and Safety Code. Thereafter, the administrator must receive updated training every two years

Administrators employed prior to July 1 , 1996 are exempt from the above education and prior employment requirements, provided that they have no break in employment as an adult residential facility administrator exceeding three consecutive years.

In those cases where the individual is both the licensee and the administrator of an adult residential facility, the individual must comply with all of the licensee and certified administrator requirements.

The Department may revoke the license of an adult residential facility for failure to comply with all requirements regarding certified administrators.

Management Question 59

Unless otherwise provided, a certified administrator may administer more than one licensed adult residential facility.

Administrator Certification Requirements 85064.2

Management Questions 23, 57

An individual must be a certificate holder prior to being employed as an Administrator. To receive his/her certificate an applicant shall:

(1) Successfully complete a Department approved Initial Certification Training Program

(2) Pass a written test administered by the Department within 60 days of completion of an Initial Certification Training Program

(3) Submit an application form to the Department's certification section within 30 days of being notified of having passed the test. The application shall contain the following:

- Proof that the applicant has successfully completed a Department approved Initial Certification Training Program.
- A statement certifying that the applicant is at least 21 years of age.
- Fingerprint cards, or evidence that the applicant has submitted fingerprints to the Department of Justice at a livescan facility, or a statement that the applicant has a current criminal record clearance on file with the Department.
- \$100 processing fee

The Department shall not issue a certificate until it receives notification from the Department of Justice that the applicant has a criminal record clearance pursuant to the Health and Safety Code or is able to transfer a current criminal record clearance pursuant to the Health and Safety Code.

Management Question 16

It is unlawful for any person not certified under this Section to misrepresent himself or herself as a certified administrator. Any person willfully making any false representation is guilty of a misdemeanor.

Management Questions 20, 25

Certificates issued under this Section shall be renewed every two years provided the certificate holder has complied with all renewal

requirements. Certificates are valid for two years and expire on either the anniversary date of initial issuance or on the individual's birthday during the second calendar year following certification.

The certificate holder shall make an irrevocable election to have his or her recertification date for any subsequent recertification either on the date two years from the date of issuance of the certificate or on the individual's birthday during the second calendar year following certification.

Time deadlines specified above may be extended for good cause as determined by the Department. Any request for extension of time shall be in writing and shall contain a statement of all facts the applicant believes constitute good cause to extend time.

Administrator Recertification Requirements 85064.3

Management Questions 1, 24

Administrators must complete at least 40 classroom hours of continuing education during their two-year certification period. Continuing education hours must relate to the Core of Knowledge and be completed through any combination of the following:

- (1) Courses provided by Department-approved vendors
- (2) Accredited educational institutions offering courses consistent with these requirements
- (3) Courses offered by vendors approved by other California State agencies, provided that the approval and enforcement procedures of that agency are comparable to those of the Department and the course relates to the Core of Knowledge.
- (4) Certified administrators required to complete continuing education hours required by the regulations of the Department of Developmental

Services, and approved by the Regional Center, may have up to 24 of the required continuing education course hours credited toward the 40 hour continuing education requirement.

-Community college course hours approved by the Regional Center are accepted by the Department for recertification.

-Any continuing education course hours in excess of 24 hours offered by the Department of Developmental Services and approved by the Regional Center may be credited toward the 40 hour requirement provided the courses are not duplicative and relate to the core of knowledge

(5) Continuing education hours must enhance the core of knowledge. Continuing education credit will not be provided for any Initial Certification Training Program course.

Courses approved for continuing education credit require the presence of the certificate holder in a classroom except:

-The Department may approve online courses that allow simultaneous, interactive, verifiable participation

To apply for recertification prior to the expiration date of the certificate, the holder must submit:

- (1) A written request post-marked before the expiration date
- (2) Evidence of completion of 40 continuing education hours as specified above
- (3) \$100 processing fee

Management Question 19

To apply for recertification after the expiration date but within 4 years of the expiration date, the holder must submit:

- (1) A written request to re-certify
- (2) Evidence of the required continuation hours as specified above. The total number of hours

is determined by computing the number of hours that would have been required if the holder had remained certified. The date of computation is the date the written request is received by the Department.

- (3) Delinquency fee equal to three times the renewal fee or \$300

Management Question 18

Certificates not renewed within 4 years of their expiration cannot be renewed, restored, reissued, or reinstated. Holders of these certificates must complete an Initial Certification Training Program.

Certificate holders must have a current criminal record clearance in order to re-certify.

There is a processing fee of \$25 for replacing a lost certificate.

A certificate holder must report any change of mailing address within 30 days to the Department's administrator certification section.

Whenever a certified administrator assumes or relinquishes responsibility for administering an adult residential facility, he or she must provide written notice within 30 days to:

- (1) The licensing District Office(s) responsible for receiving information regarding personnel changes at the licensed facility
- (2) The Department's administrator certification section

Denial or Revocation of a Certificate 85064.4

Management Questions 28, 60

The Department may deny or revoke any administrator certificate upon any of the grounds specified in Health and Safety Code Section

1550 and/or for any of the following:

- (1) The certificate holder procured a certificate by fraud or misrepresentation.
- (2) The certificate holder knowingly made or gave a false statement or information in conjunction with the application for a certificate.
- (3) The Department has issued an exclusion order against the certificate holder pursuant to the Health and Safety Code after the Department issued the certificate, and:
 - The certificate holder did not appeal the exclusion order, OR
 - After the appeal, the Department issued a decision that upheld the exclusion order.
- (4) The certificate holder does not have a current criminal record clearance.
- (5) The certificate holder fails to comply with certificate renewal requirements.

The Department may reinstate a certificate that has been revoked for failure to comply with certification renewal requirements provided all conditions for recertification have been satisfied, including payment of all appropriate renewal and delinquency fees.

Any denial or revocation of an administrator certificate may be appealed as provided by Health and Safety Code Section 1551.

Unless otherwise ordered by the Department, any application for an administrator certificate submitted after a denial or revocation action shall be processed in accordance with the provisions of Health and Safety Code 1520.3.

Forfeiture of a Certificate 85064.5

- (a) Unless otherwise ordered by the Department, the certificate shall be considered forfeited under any of the following conditions:

(1) The Department has revoked any license held by the certificate holder after the Department issued the certificate.

(2) The Department has issued an exclusion order against the certificate holder pursuant to Health and Safety Code Sections 1558, 1568.092, 1569.58, or 1596.8897, after the Department issued the certificate, and:

-The certificate holder did not appeal the exclusion order or

-After the appeal, the Department issued a decision and order that upheld the exclusion order.

(b) Unless otherwise ordered by the Department, any application for an administrator certificate submitted after a certificate has been forfeited shall be processed in accordance with the provisions of Health and Safety Code Sections 1520.3, 1558(h) and/or 1558.1.

Personnel Records 85066

Management Question 4

A dated employee time schedule shall be developed at least monthly, shall be displayed conveniently for employee reference and shall contain the following information for each employee:

(1) Name

(2) Job title

(3) Hours of work

(4) Days off

The licensee shall maintain documentation that the administrator has met the certification requirements specified in Section 85064.2.

LAWS AND REGULATIONS PRACTICE QUESTIONS
PAGE NUMBERS ARE AN APPROXIMATE RANGE

1. The licensing agency, when determining the number of persons for whom the facility will be licensed, will take into consideration which of the following: **80028 Capacity Determination (Page 41-42)**

- a. Licensee/administrators ability to comply with applicable law and regulation
- b. Physical features of the facility which are necessary in order to comply with regulations
- c. Number of available staff to meet the care and supervision needs of the clients
- d. All of the above
- e. None of the above

Answer Key

2. The maximum number of persons authorized to be provided care and supervision and any one time in any licensed facility is the _____ of the facility. **80001 Definitions (Page 15)**

- a. Limit
- b. Restriction
- c. Extent
- d. Capacity_

Answer Key

3. The licensing agency shall give written notice to the applicant that a completed application has been received within _____ days. **80031 Issuance of License (Page 42-43)**

- a. 30
- b. 60
- c. 90
- d. 365

Answer Key

4. The licensing agency shall notify the applicant of the issuance of the license _____. **80031 Issuance of License (Page 42-43)**

- a. By fax
- b. By telephone
- c. By email
- d. In writing X

Answer Key

5. Bed rails that extend the entire length of the bed are _____. **80072 Personal Rights (Page 51-52)**

- a. Permitted with approval from physician.
- b. Permitted with approval from authorized representative.
- c. Prohibited

Answer Key

6. The disaster and mass casualty plan shall include, but is not limited to, contingency plans for the following disasters: **80023 Disaster Mass Casualty Plan (Page 37-38)**

- a. Water leaks
- b. Terrorism
- c. Civil insurrection
- d. Fires

Answer Key

7. Client in an ARF has the right to _____. **85072 Personal Rights (Page 60)**

- a. Wear his/her own clothes
- b. Possess his/her own cash resources
- c. Receive assistance in exercising the right to vote
- d. All of the above
- e. None of the above

Answer Key

8. If a licensee fails to file a new application within the time limit required, a _____ is required. **80034 New Application (Page 43)**

- a. New application
- b. New administrator
- c. New needs and services plan
- d. Appeal

Answer Key

9. The applicant shall notify the agency if the facility plans to admit persons age 65 and over or non-ambulatory persons so that an appropriate _____ can be options prior to the acceptance of such clients. **80020 Fire Clearance (Page 35-36)**

- a. Care plan
- b. Toxic solvent acceptance and clearance
- c. Fire clearance

Answer Key

10. Operating without a license – An unlicensed community care facility _____. **80006 & 80001(u)(2) Definitions and Operating Without A License (Page 22, 15)**

- a. Is providing care and supervision
- b. Is providing only meals
- c. Is providing only a bed
- d. Is operating as an Adult Day Health Care
- e. None of the above

Answer Key

11. Non-ambulatory person means _____. **H&S 13131 Non Ambulatory Persons (Page 69)**

- a. Any person unable or likely to be unable, to physically and mentally respond to a fire signal
- b. Persons who are unable to respond to oral instruction relating to fire danger
- c. Persons who are unable to leave a building unassisted under emergency conditions
- d. Persons who depend upon mechanical aids such as crutches, walkers, and wheelchairs
- e. None of the above
- f. All of the above

Answer Key

12. The determination of non-ambulatory status of a client is made by _____. **H&S 13131 Non Ambulatory Persons (Page 69)**

- a. The physician
- b. The Director of Social Services or designated representative
- c. The regional center
- d. Conservator
- e. Fire Inspector

Answer Key

13. A person professionally qualified by training or experience to provide expert information on a particular subject is called a(n) _____. **80001(16) Definitions (Page 17)**

- a. Instructor
- b. Consultant (nurse, dietician, recreation therapist, PT or OT.
- c. Program analyst
- d. Know-it-all
- e. Professional expert

Answer Key

14. Fillings and covers for mattresses and pillows shall be: **85088 Fixtures, Furniture and Supplies (Page 62)**

- a. Selected by resident
- b. Flame retardant
- c. Approved by the fire inspector
- d. Approved by Martha Stewart

Answer Key

15. What bedroom furniture should be available for each client and can be shared? **85088 (Fixtures, Furniture and Supplies (Page 62)**

- a. Chair
- b. Night stand
- c. Lamp or lights
- d. All of the above
- e. None of the above

Answer Key

16. A written report of any eviction shall be sent to the licensing agency within _____ days of the eviction. **85068.5 Eviction Proceedings (Page 59-60)**

- a. 3
- b. 7
- c. 5
- d. 10

Answer Key

17. A written disaster and mass casualty plan of action must be _____. **80023 Disaster Mass Casualty Plan (Page 37-38)**

- a. The original version submitted with license application
- b. Kept at the licensee's office
- c. In a safety deposit box, or other lockable storage box
- d. Current and written

Answer Key

18. The licensing agency shall have the authority to issue a provisional licensee for a maximum of _____ months when it is determined, at the time of application, that more than 6 months is required to achieve full compliance with licensing regulations due to circumstances beyond the control of the applicant. **80030 Provisional License (Page 42-43)**

- a. 9 months
- b. 12 months
- c. 18 months
- d. 24 months

19. A bed rail that extends half the length of the bed, and is used only for assistance with mobility _____, **80072 Personal Rights (Page 51-52)**

- a. Is never allowed
- b. Requires prior licensing approval
- c. A certified letter informing the licensing agency that bed rails are in use
- d. Shall be allowed

See this link for clarification. 80072 was amended.

<http://www.cdss.ca.gov/ord/entres/getinfo/pdf/f110407r.pdf>

20. If the facility licensee dies, an adult relative who has control of the property shall be permitted to operate a previously licensed facility under a(n) _____ approval. **80035 Conditions For Forfeiture of CCL License (Page 43-44)**

- a. Conservator
- b. Emergency
- c. Consultant
- d. Licensee

21. 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 no less than _____ °F and not more than _____ °F. **80088 Fixtures Equipment and Supplies (Page 53-54)**

- a. 95, 125
- b. 100, 125
- c. 105, 125
- d. 105, 120

Answer Key

22. Room temperatures shall be maintained between _____°F, and _____°F. **80088 Fixtures Equipment and Supplies (Page 53-55)**

- a. 68, 88
- b. 68, 85
- c. 68, 78
- d. 65, 78

Answer Key

23. A _____ deficiency means a situation that presents an immediate or substantial threat to the physical health, mental health or safety of the clients of a community care facility. **80001(s)(1) Definitions (Page 20)**

- a. Moderate
- b. Delinquent
- c. Serious

Answer Key

24. The request for fire clearance shall be made through and maintained by _____. **80020 Fire Clearance (Page 34-36)**

- a. The licensee
- b. The administrator
- c. The licensing agency
- d. Program director

Answer Key

25. The licensing agency shall notify the applicant or licensee of the acceptance for consideration, nor the denial of acceptance for consideration of a waiver or exception request within _____. **80024 Waivers and Exceptions (Page 37-38)**

- a. 5 business days
- b. 10 business days
- c. 14 business days
- d. 30 calendar days

Answer Key

26. Which of the following is not mandated as a part of the application for license? **85018 Application License (Page 56-57)**

- a. Financial plan
- b. Start up funds available for 3 months' operation

- c. Malpractice insurance
- d. Documentation of administrator certificate.

Answer Key

27. A follow-up visit to determine compliance with a plan of correction shall be conducted within _____ specified in the notices of deficiency. **80053 Follow Up Visits To Determine Compliance (Page 46)**

- a. 5 business days
- b. 10 working days
- c. 15 Days
- d. 30 Days

Answer Key

28. If the application for an initial license is denied, the application process fee shall _____. **80040(c) Inspection Authority Licensing (Page 45)**

- a. Be refunded
- b. Be refunded, after applying 10% penalty
- c. Be forfeited
- d. None of the above.

Answer Key

29. A denial or revocation of license may occur under the following: **80055.1 Administrative Review (Page 47-48)**

- a. Failure to pay civil penalties
- b. Yearly evaluation visit or facility shows 2 employees without fingerprint clearance
- c. A deficiency not corrected during the evaluation visit
- d. A and B
- e. All of the above.

Answer Key

30. The fee for a capacity of 1-6 for renewal or original license is \$100. **80036 Licensing Fees (Page 44)**

- a. True
- b. False

See handout "Licensing Fees"

<http://www.dss.cahwnet.gov/ord/entres/getinfo/pdf/ccl1503.pdf>

31. An adult is a person who is 21 years of age or older. **80001(a)(3) Definitions (Page 15)**

- a. True
- b. False

Answer Key

32. The licensing agency shall not be permitted to decrease an existing license capacity. **80028(e) Capacity Determination (Page 41-2)**

- a. True
 - b. False_
- Answer Key

33. All facilities must post a license in a conspicuous place. **85009 Posting of License (Page 56-57)**

- a. True
 - b. False_
- Answer Key

34. Disaster drills shall be conducted at least every 3 months and maintained for one year. **80023 Disaster and Mass Casualty Plan (Page 37-38)**

- a. True
 - b. False_
- Answer Key

35. The amount of the bond to safeguard \$751 to \$1500 per month is \$2000. **80025 Bonding (Page 38-39)**

- a. True
 - b. False_
- Answer Key

36. The application shall be filed with the licensing agency, which services the geographical area in which the facility is located. **80018 Application For License (Page 25-26)**

- a. True
 - b. False_
- Answer Key

37. The licenses can provide advances or loans to clients from facility funds as long as documentation of the transaction is maintained at the facility. **80026 Safeguarding For Cash Resources Valuables (Page 39-41)**

- a. True
 - b. False_
- Answer Key

38. Disaster and mass casualty plans shall include: **80023 Disaster and Mass Casualty Plan (Page 37-38)**

- a. All of the below
 - b. Relocation Sites
 - c. Means of exiting
 - d. Places of outdoor supplies
 - e. Means of contacting local agencies
- Answer Key Correct Key

39. Substantial compliance means: **80001(5)(7) Definitions (Page 20)**

- a. Facility runs in total compliance with all regulations
- b. Facility where all residents are in total compliance with house rules
- c. Facility where a substantial number of residents have goals for compliance
- d. Facility with an absence of any serious deficiencies

Answer Key

40. A facility of any capacity, which provides 24 hour per day non-medical care and supervision to adults (except elderly persons), is called _____. **80001(a)(7) Definitions (Page 15)**

- a. Adult Support Center
- b. Adult Day Care
- c. Adult Residential Support
- d. None of the above

Answer Key

41. If care and supervision is restricted to specific individuals the licensing agency shall specify the names of the individuals in _____. **80028 Capacity Determination (Page 41-42)**

- a. The public notices section of a newspaper where facility is located
- b. A certified letter to licensee
- c. A letter to licensee
- d. A love song dedicated to the licensee on a local radio station

Answer Key

42. The sketch of the grounds showing areas used by clients shall include _____. **80022 Plan of Operation (Page 36-37)**

- a. Color coding of areas
- b. Location of light switches and emergency lighting
- c. Administrator approval
- d. Dimensions of all areas used by clients

Answer Key

43. The request for fire clearance shall be made by, through, and maintained by the administrator. **80020 Fire Clearance (Page 35-36)**

- a. True
- b. False

Answer Key

44. A waiver is a nontransferable written authorization issued by the licensing agency. **80001(w) Definitions (Page 22)**

- a. True
- b. False

Answer Key

45. Client bedrooms can be used as a general passageway to another room, bath or toilet **85087 Buildings and Grounds (Page 61-62)**

- a. True
 - b. False_
- Answer Key

46. For the purposes of a Community Care Facility an adult is considered a person who is 21 years of age or older. **80001(a)(3) Definitions (Page 15)**

- a. True
 - b. False_
- Answer Key

47. Bathrooms and toilets shall be located near client bedrooms. **85088 Fixtures Furniture and Supplies (Page 61-63)**

- a. True
 - b. False_
- Answer Key

48. Bed rails that extend the entire length of bed are prohibited. **80072 Personal Rights (Page 50-52)**

- a. True
 - b. False_
- Answer Key

49. Which of the following is required: **85088 Fixtures Furniture and Supplies (Page 61-62)**

- a. At least one toilet and washbasin for each 10 persons residing in the facility
 - b. Toilets and bathrooms shall be located near client bedrooms
 - c. At least one bathtub or shower shall be maintained for each 6 persons residing in the facility, including clients and staff
 - d. All of the above
- Answer Key

50. Exceptions means a written authorization issued by the licensing agency to use alternative means which meet the intent of a specific regulation(s) and which are based on the unique needs of: **80001(e)(6) Definitions (Page 18)**

- a. A specific staff person
 - b. A particular client or staff and are not transferable or applicable to other clients(s) or staff facilities or licensees
 - c. Employees who are not naturalized citizens
 - d. Volunteers under the age of 18.
 - e. A and B_
- Answer Key

51. Within _____ days of the date that a completed application is received, the licensing agency shall give written notice to the applicant regarding the approval or denial of the application. **80031 Issuance of License (Page 41-43)**

- a. 14 days
- b. 60 days
- c. 90 days
- d. 30 days

Answer Key

52. The licensing agency shall have the authority to make _____ number of visits to a facility in order to determine compliance with applicable law and regulation. **80045 Evaluation Visits (Page 44-45)**

- a. Two times per year
- b. Any number of visits
- c. One time per year
- d. Once every two year

Answer Key

53. In regard to bedroom furniture for an adult residential facility: **85088 Fixtures Equipment and Supplies (Page 61-63)**

- a. Each client shall have an individual bed, except that couples shall be allowed to share one double or larger size bed
- b. Extra beds beyond the capacity of the facility may be used in a designated quiet room
- c. All clients are entitled to their own bedroom furniture sharing of furniture is considered a violation of personal rights
- d. A and D
- e. B and A

54. The licensing agency shall have the authority to issue a provisional license for a maximum of _____ months. **80030 Provisional License (Page 41-43)**

- a. 6 months when it determines that full compliance with licensing regulations will be achieved within that time period
- b. 12 months when it determines, at the time of application, that more than six months is required to achieve full compliance with licensing regulations due to circumstances beyond the control of the applicant
- c. 1 month when it determines, at the time of application, that an urgent need related to client welfare exists and is beyond the control of the applicant
- d. A and B
- e. A and C
- f. All of the above

Answer Key

55. Which of the following is not required for laundry area: **85087 Buildings and Grounds (Page 61-62)**

- a. Space and equipment for washing, ironing and mending of personal clothing
- b. Space for soiled linen and clothing
- c. Space for storage of extra supplies for house cleaning
- d. Space for clean linen and clothing

Answer Key

56. Fillings and covers for mattresses and pillows shall be: **85088 Fixtures Furniture and Supplies (Page 62-63)**

- a. Changed to brand new once a month
- b. Flame retardant
- c. Allowed to be shared
- d. Washed once per month
- e. B and D_

Answer Key

57. The amount of the bond to safeguard \$751-\$1500 per month is: **80025 Bonding (Page 38-39)**

- a. \$2000
- b. \$700
- c. \$1000
- d. \$1500

Answer Key

58. Which of the following is not correct regarding personal rights of clients: **80072 Personal Rights (Page 51-52)**

- a. Clients can leave or depart the facility at any time
- b. Clients must be free to attend religious services
- c. Clients should have limited number of belongings
- d. Clients must be free from punishment, humiliation and pain_

Answer Key

59. Elderly person means any person who is 65 years of age or older. **80001(e)(2) Definitions (Page 18)**

- a. True
- b. False_

Answer Key

60. The department shall conduct a criminal record review of all individuals 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. **80019 Criminal Record Clearance (Page 26-29)**

- a. True
- b. False_

Answer Key

61. The request for fire clearance shall be made through and maintained by the administrator. **80020 Fire Clearance (Page 35-36)**

- a. True
- b. False_

Answer Key

63. A penalty of \$75.00 per day shall be assessed for serious deficiencies per cited violation. **80054 Penalties (Page 46-47)**

- a. True
 - b. False_
- Answer Key

64. The licensing agency shall have the authority to make any number of visits to a facility in order to determine compliance with applicable law and regulations. **80045 Evaluation Visits (Page 45-46)**

- a. True
 - b. False_
- Answer Key

65. A non-transferable written authorization issued by the licensing agency to use alternative means which meet the intent of a specific regulation and which are based on a facility-wide need or circumstance is called a(n) _____. **80001(w) Definitions (Page 15)**

- a. Urgent need
 - b. Exception
 - c. Waiver
 - d. None of the above
- Answer Key

66. 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 _____ °F, and no more than _____ °F. **80088 Fixtures Furniture and Supplies (Page 53-54)**

- a. 100 and 125
 - b. 105 and 120
 - c. 95 and 115
 - d. 105 and 125
- Answer Key

67. The licensee shall maintain the temperature in rooms that clients occupy between a minimum of _____ °F and maximum of _____ °F. **80088 Fixtures Furniture and Supplies (Page 53-54)**

- a. 65 and 85
 - b. 68 and 80
 - c. 68 and 85
 - d. 65 and 80
- Answer Key

68. No more than _____ clients shall sleep in a bedroom. **85087 Buildings and Grounds (Page 61)**

- a. 1
 - b. 2
 - c. 3
 - d. None of the above
- Answer Key

69. At least one toilet and washbasin shall be maintained for each _____ persons residing in the facility, and at least one bathtub or shower shall be maintained for each _____ persons. **85088(b)(1-2)**
Fixtures Furniture and Supplies (Page 62)

- a. 10, 6
- b. 5, 10
- c. 6, 10
- d. 5, 6

Answer Key

70. What must be included in every advertisement for the facility? **80011 Advertisements and License Number (Page 24-25)**

- a. Name of licensee
- b. Capacity
- c. Facility license number
- d. Address of facility
- e. All of the above

Answer Key

71. A room approved for ambulatory clients may be used by: **80010 Limitations on Capacity and Ambulatory Status (Page 24)**

- a. Ambulatory clients
- b. Ambulatory or non-ambulatory clients who rely on a walker
- c. Ambulatory clients and non-ambulatory clients in an emergency situation, not to exceed five working days
- d. Ambulatory clients and clients who are transfer dependent

Answer Key

72. What is included in the facility license application? **80018 Application For License (Page 25-26)**

- a. Name or proposed name of the facility
- b. Name and address of owner of facility premises if applicant is renting or leasing
- c. Information concerning the city or county fire department having jurisdiction in the area where the facility is located
- d. All of the above
- e. A and B
- f. None of the above

Answer Key

73. All community care facilities where water for human consumption is from a private source shall: **80021 Water Supply and Clearance (Page 36)**

- a. Hook up to a city water supply
- b. Install a chlorinating system
- c. Test the water on a weekly basis
- d. None of the above

Answer Key

74. Evidence of an on site bacteriological analysis of the water (when from a private source) shall be conducted in a six-bed facility: **80021 Water Supply and Clearance (Page 36)**

- a. Upon initial license and every sixty days
- b. Upon initial license and when evidence supports the need
- c. Only upon initial license.

Answer Key

75. What is required when a facility changes location, or transfers the majority of the stock or possibly when increasing capacity? **80034 New Application (Page 43)**

- a. New license application
- b. List of all employed staff
- c. Addition of another assistant administrator.

Answer Key

76. Within _____ days of the issuance of a license, the department shall conduct an inspection. **80044 Inspection Authority of Licensing Agency (Page 45)**

- a. 30 days
- b. 90 days
- c. 120 days
- d. 360 days.

Answer Key

77. The department requires start up funds equal to _____ months operating expenses. **85018 Application For License (Page 57)**

- a. 3
- b. 6
- c. 12
- d. 24.

Answer Key

78. An emergency approval to operate is for not more than _____. **80001 Definitions (Page 18)**

- a. 30 days
- b. 60 days
- c. 90 days
- d. 180 days.

Answer Key

79. What should be maintained in hallways and passages to non-private bathrooms? **85088 Fixtures Furnitures and Supplies (Page 63-64)**

- a. Lighted light switches
- b. No higher than 45 Watt bulbs in hallway/passage light fixtures
- c. Night lights.

Answer Key

80. Documentation of disaster drills shall be documented and maintained in the facility for how long?
80023 Disaster And Mass Casualty Plan (Page 38)

- a. 6 months
- b. 12 months
- c. 18 months
- d. 24 months

Answer Key

81. A conservator is_____. **80001 Definitions (Page 17)**

- a. A person appointed by the client to care for the client, estate or client and estate
- b. A person appointed by DSS/CCL to care for the person, estate or person and estate of another
- c. A person appointed by the superior court to care for the person, estate or person and estate of another

Answer Key

82. In addition to licensing, a report shall be submitted to a_____if an epidemic outbreak occurs. **80061 Reporting Requirements (Page 49)**

- a. Local health officer
- b. Local hospital
- c. Lawyer
- d. Physician

Answer Key

83. A licensee may request a review of a notice of deficiency within how many days? **80055 Administrative Review (Page 47-48)**

- a. 7 working days
- b. 10 working days
- c. 14 working days

Answer Key

84. How long do you have to submit a written report of any suspected physical abuse to licensing?
80061 Reporting Requirements (Page 49-50)

- a. 24 hours
- b. 48 hours
- c. 3 days
- d. 7 days

Answer Key

85. How many clients may sleep in a room? **85087 Buildings and Grounds (Page 61)**

- a. No more than 2
- b. No more than 3

- c. No more than 4
- d. None of the above

Answer Key

86. Licensing has the authority to:

80044 Inspection Authority Licensing Agency (Page 45)

- a. Observe the physical condition of the client.
- b. Interview clients.
- c. Remove records from the facility.
- d. All of the above

87. What size facility must have a reception area and restroom facility designed for use by visitors?

85087 Buildings And Grounds (Page 61)

- a. 1-7 clients
- b. 8-15 clients
- c. 16 clients or more
- d. None of the above

Answer Key

88. The maximum number of persons authorized to be provided care is called what? **80001 Definitions (Page 15)**

- a. Client limit
- b. Capacity
- c. Volume

Answer Key

89. What kind of bed rails are allowed? **80072 Personal Rights (Page 52)**

- a. Full rails, if client can lower them without assistance
- b. Full rails, no restrictions
- c. Half rails, doctor approval
- d. Half rails, no approval needed

Lic 80072 was amended: <http://www.cdss.ca.gov/ord/entres/getinfo/pdf/f110407r.pdf>

90. All licensees, except for government entities shall have on file with the licensing agency a bond issued by a surety company to the state of California as principal? If the amount safeguarded is \$752.00 how much bond is required? **80025 Bonding (Page 38-39)**

- a. \$500.00
- b. \$2000.00
- c. \$2500.00
- d. \$3000.00

91. Any change in the chief executive officer of a corporation shall be submitted when? **80061 Reporting Requirements (Page 50)**

- a. Within 5 days
- b. Within 7 days
- c. Within 10 days

Answer Key

92. What is required for taps delivering water 125°F and above? **80088 Fixtures Furniture and Supplies (Page 53-54)**

- a. Nothing
- b. Red handles for the hot side of the faucet
- c. A warning sign,

Answer Key

93. Any changes in the licensee's or applicant's mailing address shall be submitted when? **80061 Reporting Requirements (Page 50)**

- a. 7 days
- b. 10 days
- c. 10 working days
- d. 14 days_

Answer Key

94. If a licensee dies, and adult relative who has control of the property shall be allowed to continue the operation of the facility under what approval? **80035 & 80001 Conditions For Forfeiture of CCL License (Page 44, 18)**

- a. A general Licensing Approval
- b. Licensee Transferal Approval
- c. Emergency Approval to Operate
- d. None of the above,

Answer Key

95. Examples of proof of control of property include: **80001 Definitions (Page 17)**

- a. A deed
- b. An estate settlement
- c. A lease
- d. All of the above
- e. None of the above,

Answer Key

96. Licensing has the authority to inspect what part of the facility? **80044 Inspection Authority of Licensing Agency (Page 45)**

- a. Only the areas set aside for the residents
- b. The residents' rooms only
- c. Everywhere except the administrator's office
- d. The entire facility,

Answer Key

97. In lieu of locked storage of firearms, what can the licensee do? **80087 Buildings and Grounds (Page 52-53)**

- a. Train entire staff and clients on proper, safe use of the weapons
- b. Train entire staff and clients on how to check to see if the weapon is loaded
- c. Use trigger locks or remove the firing pin
- d. Both A and C
- e. Both A and B

Answer Key

98. What size facility shall post the license in a prominent location? **85009 Posting License (Page 56-57)**

- a. 6 or larger
- b. 7 or larger
- c. All facilities
- d. None of the above

Answer Key

99. The temperature in a client's room should be heated to at least _____°F. **80088 Fixtures Furniture Equipment and Supplies (Page 53-54)**

- a. 78
- b. 80
- c. 68

Answer Key

100. Activities of daily living means bathing, dressing, toileting, transferring, continence, and eating. **80001(a) Definitions (Page 15)**

- a. True
- b. False

Answer Key

101. Adult residential facility means any facility of any capacity, which provides 18 hour a day non-medical care and supervision to adults. **80001(a)(7) Definitions (Page 15)**

- a. True
- b. False

Answer Key

102. ARF can also provide services to elderly people. **80001(a)(7) Definitions (Page 15)**

- a. True
- b. False

Answer Key

103. Capacity means the maximum number of persons authorized to be provided care and supervision at any one time in any licensed facility. **80001(c)(1) Definitions (Page 15)**

- a. True

b. False_
Answer Key

104. No further fire clearance of the facility is needed if the facility provides services to persons 65 years of age or older or to non-ambulatory persons. **80020(b) Fire Clearance (Page 36)**

a. True
b. False_
Answer Key

105. Each licensee shall have and maintain on file a current, written, definitive plan of operation. **80022(a) Plan Of Operation (Page 36-37)**

a. True
b. False_
Answer Key

106. Within 60 days of receipt of an acceptable request for a waiver or an exception, the licensing agency shall notify the applicant of licensee. **80024(d) Waivers and Exceptions (Page 38)**

a. True
b. False_
Answer Key

107. Provisional license can be issued for a maximum of 6 months. **80030(d) Provisional License (Page 42)**

a. True
b. False_
Answer Key

108. 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. **80034(4)(A) New Application (Page 43)**

a. True
b. False_
Answer Key

109. A follow up visit shall be conducted within fourteen working days following the dates of correction specified in the notice of deficiency. **80053(a)(1) Determination of Followup Visits Compliance (Page 46)**

a. True
b. False_
Answer Key

110. Day staff ratio for Regional Center clients shall be no less than one direct care staff to five clients. **85065(a)(1) Personnel Requirements (Page 57-59)**

a. True

b. False_
Answer Key

111. The administrator may never under any circumstances conduct private interviews in a private office. **85087(d)(2) Buildings and Grounds (Page 61)**

a. True
b. False_
Answer Key

112. Licensee is not required to provide basic laundry services, including washing and drying of clients' personal clothing. **85077(b) Personal Services (Page 61-62)**

a. True
b. False_
Answer Key

ADMISSION & RETENTION PRACTICE QUESTIONS
PAGE NUMBERS ARE AN APPROXIMATE RANGE

1. Receipts for cash provided to any client from his/her account shall include the following: **80026(A)**
Safeguarding Cash Resources and Valuables (Page 39-40)
 - a) Client's full signature
 - b) Purpose of funds request
 - c) Statement acknowledging receipt of the amount and date received
 - d) A and C
 - e) A, B, and C

Answer Key

2. According to Title 22, if admission is agreed to, the facility shall: **85068.1** ***Admission Agreements (Page 77-78)***
 - a) Obtain the signature of client or authorized representative on admission agreement
 - b) Obtain Regional Center authorization for admission
 - c) Develop a needs and services plan prior to acceptance
 - d) All of the above
 - e) A and C

Answer Key

3. Which of the following are examples of developmental disabilities? **80001(d)** ***Definitions (Page 17)***
 - a) Cerebral palsy
 - b) Bipolar disorder
 - c) Mental retardation
 - d) Mental illness
 - e) Autism
 - f) A, B, and C
 - g) A, D, and E
 - h) A, C, and E

Answer Key

4. Which of the following must be part of the client record in an ARF? **85070** ***Client Records (Page 80)***
 - a) Last known address
 - b) Religious preferences
 - c) Needs and services plan
 - d) All of the above
 - e) None of the above

Answer Key

5. The current register of clients must contain which of the following: **80071** ***Register of Clients (Page 75)***
 - a) Mental health diagnosis
 - b) Conservator name and address
 - c) Name and ambulatory status
 - d) B and C
 - e) All of the above

Answer Key

6. Admission agreements must specify the following: **80068 Admission Agreement (Page 70)**

- a) Basic services
- b) Resident's savings account balance
- c) Financial history of conservator
- d) All of the above

Answer Key

7. What clients cannot be accepted or retained in an ARF? **85068 Admission Agreement (Page 79)**

- a) One who requires fecal impaction removal
- b) One who requires inpatient care in a health facility
- c) One in need of acute psychiatric care
- d) B and C
- e) All of the above

Answer Key

8. Upon death of a client, all cash resources, personal property and valuables of the client shall immediately be safeguarded until _____. **80026 Safeguards For Cash Resources Personal Property and Valuables. (Page 39-40)**

- a) the executor of the estate is notified and signs for the items
- b) an estate sale can be scheduled
- c) the coroner's report is completed
- d) the licensing agency determines that the items can be transferred
- e) the CSI unit is informed and all evidence is tagged

Answer Key

9. When a client's needs cannot be met by the facility and the client refuses to relocate, a report is to be made to the licensing agency but the licensee is prohibited from evicting the client. **85068.3 Modifications to Needs And Services Plan (Page 78)**

- a) True
- b) False

Answer Key

10. The admission agreement shall be automatically terminated by the death of a client. No liability or debt shall accrue after the date of death. **80068 Admission Agreements (Page 70-72)**

- a) True
- b) False

Answer Key

11. A client whose primary need is acute psychiatric care due to a mental disorder may be accepted in an ARF. **85068.4 Acceptance and Retention Limitations (Page 78)**

- a) True
- b) False

Answer Key

12. Prior to accepting a client for care and supervision, the person responsible for admissions shall _____ . **85068.1 Admission Procedures (Page 77)**

- a) develop a needs and services plan
- b) interview the client

- c) develop the admission agreement
- d) A and B only
- e) B and C only

Answer Key

13. An example of someone to provide consultation with modification to a needs and services plan may include _____ . **85068.3 Modifications to Needs and Service Plan (Page 78)**

- a) dietitian
- b) social worker
- c) physician
- d) psychologist
- e) all of the above
- f) none of the above

Answer Key

14. Nonpayment of rent for basic services within ten days of the due date is a _____ .
85068.5 Eviction Procedures (Page 59-60)

- a) is permitted as cause for eviction with 30 day notice
- b) is permitted as cause for eviction with 3 day notice from licensing agency
- c) is not permitted as cause for eviction

15. A licensee shall _____ to accept(ing) 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 clients cash resources. **80026(a) Safeguards for Cash Resources Valuables (Page 39-40)**

- a) be required
- b) not be required
- c) consult licensing prior
- d) none of the above

Answer Key

16. The bank account set up for the clients cash resources shall _____ . **80026 Safeguards for Cash Resources and Valuables (Page 39-40)**

- a) be accessible to licensee only
- b) be accessible by client upon demand
- c) be at the same banking establishment as the licensee
- d) be interest bearing and carry no fees

Answer Key

17. The licensee _____ obtain and retain a receipt signed by the client or his/her authorized representative in the event that cash resources or valuables are surrendered to the client upon discharge. **80026 Safeguards Cash Resources (Page 40)**

- a) can decide with interdisciplinary team if it is necessary to
- b) must
- c) may
- d) is not required to

Answer Key

18. The licensee shall be permitted to evict a client by serving the client with a 30-day written notice if client failed to make a payment within ten days of the due date. **85068.5 Eviction Procedures (Page 59-60)**

- a) True
 - b) False_
- Answer Key

19. The licensee shall and can accept any person whose primary need is acute psychiatric care due to a mental disorder. **85068.4 Acceptance Retention Limitations (Page 78-79)**

- a) True
 - b) False_
- Answer Key

20. Any staff of an ARF can administer the fecal impaction removal. **80092.9 Fecal Impaction Removal (Page 107)**

- a) True
 - b) False_
- Answer Key

21. Client records should include: **80070 Client Records(Page 74-75)**

- a) name of client
 - b) birth date
 - c) sex
 - d) all of the above
- Answer Key

22. The admission agreement shall be automatically terminated by the death of a client. **80068 Admission Agreements (Page 72)**

- a) True
- b) False

23. 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 can be obtained prior to the acceptance of such clients: **80020 Fire Clearance (Page 35-36)**

- a) Persons 65 years of age and over
 - b) Persons who are non-ambulatory
 - c) Persons with active, communicable TB
 - d) A and B
 - e) A and C_
- Answer Key

24. The client or the client's authorized representative, if any, has _____ working days from the receipt of the relocation order to submit to the licensee a written, signed, and dated request for a review and determination by IDT. **80094.5 Client Request For Review of Health Condition Relocation Order Interdisciplinary Team (Page 111-113)**

- a) 10
- b) 14
- c) 20
- d) 30

Answer Key

25. Client records should include which of the following: **80070 Client Records (Page 74-75)**

- a) Name of client
- b) Birth date and sex
- c) Date of admission
- d) All of the above

Answer Key

26. The licensee may evict a client upon _____ days notice. **80068.5 Eviction Procedures (Page 71-72)**

- a) 15
- b) 60
- c) 30
- d) 90_

Answer Key

27. The licensee may evict a client for which of the following reasons: **80068.5 Eviction Procedures (Page 71-72)**

- a) Nonpayment of the rate for basic services within ten days of the due date
- b) Failure of the client to comply for general facility policies
- c) Failure of the client to comply with state or local law after receiving written notice of the alleged violation
- d) All of the above

28. Prior to accepting the client for care and supervision, the person responsible for admission shall _____ the prospective client. **85068.1 Admission Procedures (Page 77-78)**

- a) develop a needs and service plan
- b) obtain signature of person responsible for client
- c) interview
- d) none of the above
- e) A and C_

Answer Key

29. Admission agreements shall be signed by the client no later than how many days after admission? **80068 Admission Agreements (Page 70-71)**

- a) 3 days
- b) 7 days
- c) 10 days
- d) 14 days_

Answer Key

30. Admission agreements are automatically terminated, and liability or debt accrued are stopped when client dies. **80068 Admission Agreements (Page 70-71)**

- a) True
- b) False_

Answer Key

31. A written relocation plan to move a client shall not exceed how many days? **80078 Responsibility for Providing Care and Supervision (Page 75-77)**

- a) 14 days
- b) 30 days
- c) 45 days
- d) 60 days_

Answer Key

32. In facilities licensed for _____ or more there shall be a posted activity program. **85079 Activities (Page 79-80)**

- a) six
- b) seven
- c) sixteen
- d) fifty_

Answer Key

33. What documentation is required, related to resident council meetings? **85080 Resident Councils (Page 80)**

- a) notices of the meetings
- b) meeting times
- c) recommendations from the council meetings
- d) all of the above
- e) none of the above.

Answer Key

34. How long are client records retained? **80074 Client Records (Page 74-76)**

- a) 6 months
- b) 1 year
- c) 3 years
- d) none of the above.

Answer Key

35. Modification conditions to the admission agreement requires how much notice? **80068 Admission Agreements (Page 70-71)**

- a) 3 days
- b) 15 days
- c) 14 working days
- d) 30 days_

Answer Key

36. The death of a client requires a written report submitted to licensing within how many days? **80061 Reporting Requirements (Page 49-50)**

- a) 7 days
- b) 10 days
- c) 14 days
- d) none of the above.

Answer Key

37. A client may be given notice of eviction within how many days for nonpayment of the rate for basic services? **80068.5 Eviction Procedures (Page 71)**

- a) 3 days
- b) 7 days
- c) 10 days
- d) 14 days_

Answer Key

38. Cash resources means monetary gifts, tax credits or refunds, employment earning, and personal and incidental need allowances. **80001.3 Definitions (Page 15)**

- a) True
- b) False_

Answer Key

39. Universal Precautions means an approach to infection control that treats all human blood and body fluids as if they are infections. **80001 Definitions (Page 20)**

- a) True
- b) False_

Answer Key

40. Receipts for cash provided to any client from their account shall include the client's full signature and a statement acknowledging receipt of the amount and the date it was received. **80026 Safeguarding Cash Resources (Page 39- 40)**

- a) True
- b) False_

Answer Key

41. Cash resources entrusted to the licensee and kept on the facility premises shall be kept in a locked and secure location. **80026 Safeguarding Cash Resources (Page 39-40)**

- a) True
- b) False_

Answer Key

42. The licensee shall maintain a record of all monetary gifts and for any other gift exceeding an estimated value of \$250, provided by or on behalf of a client to the licensee, administrator, or staff. **80026 Safeguarding Cash Resources (Page 39-40)**

- a) True
- b) False_

Answer Key

43. When serving the client with either a 30-day or a 3-day notice to evict, the licensee shall on the same day overnight mail or fax a copy of the notice to the client's authorized representative. **80068.5 Eviction Procedures (page 73)**

- a) True
- b) False_

Answer Key

44. A client suspected of having a contagious or infectious disease shall be isolated and a physician contacted to determine suitability of the client's retention in the facility. **85075.4 Observation of the Client (Page 116-118)**

a) True

b) False_

Answer Key

45. An open-flame type of light can be used by high functioning clients. **85088 Fixtures Equipment and Supplies (Page 62-63)**

a) True

b) False_

Answer Key

MEDICATION PRACTICE QUESTIONS
PAGE NUMBERS ARE AN APPROXIMATE RANGE

1. Prescription medications that are not taken with the client upon termination of services shall _____ . **80075 Health Related Service (Page 83-87)**

- a. Be given to the clients family
- b. Be donated to the Regional Center
- c. Be destroyed

Answer Key

2. It is permissible to crush or camouflage medications if client refuses and his/her health and safety is at risk. **80075 Health Related Service (Page 83-87)**

- a. True
- b. False

Answer Key

3. Facility personnel, _____ shall not administer injections but shall be authorized to assist clients with self-administration of medication as needed. **80075 Health Related Service (Page 83-87)**

- a. Except the licensee
- b. Except the administrator
- c. Except those authorized by law
- d. Except the authorized representative

Answer Key

4. PRN medication means any non-prescription or prescription medication which is to be taken as needed. **80001 Definitions (Page 19)**

- a. True
- b. False

Answer Key

5. No person other than the _____ shall alter the prescription label. **80075 Health related Services (Page 83-86)**

- a. Resident
- b. Licensee
- c. Nurse
- d. Dispensing pharmacist
- e. C and D

Answer Key

6. Medications shall be centrally stored when: **80075 Health related Services (Page 83-86)**

- a. The preservation of medication requires refrigeration
- b. The medication is determined by the physician to be hazardous if kept by the resident

- c. The resident is an SSI recipient
- d. The administrator determines the medication to be a safety hazard
- e. All of the above
- f. All except C and D

Answer Key

7. Prescription medications which are not taken with the resident upon termination of services shall: **80075 Health related Services (Page 83-86)**

- a. Be given to a family member
- b. Be available to other residents who take the exact same strength or dosage
- c. Be destroyed.

Answer Key

8. Who can alter a prescription label? **80075 Health related Services (Page 83-86)**

- a. Dispensing pharmacist
- b. Physician
- c. Administrator
- d. Licensee_

Answer Key

9. PRN medication means any prescription which is to be taken daily. **80001 Definitions (Page 19)**

- a. True
- b. False_

Answer Key

PHYSICAL NEEDS PRACTICE QUESTIONS
PAGE NUMBERS ARE AN APPROXIMATE RANGE

1. Which of the following are considered prohibited health conditions in community care? **80091(a) Prohibited Health Conditions (Page 104-105)**

- a. Naso-gastric and naso-duodenal tubes
- b. Stage 3 and 4 dermal ulcers
- c. Active communicable TB
- d. All of the above
- e. None of the above

Answer Key

2. Universal precautions means: **80001(u)(1) Definitions (Page 20)**

- a. That gloves must be worn at all times
- b. An approach to infection that treats all human fluids as if they are infectious
- c. That gloves must be worn in all countries of the universe
- d. All of the above

Answer Key

3. Which is not an example of universal precautions? **80001(u)(1) Definitions (Page 20)**

- a. Blowing on hot food to cool it off as a safety precaution
- b. Hand washing
- c. Cleaning with disinfectant
- d. Properly disposing of infectious material

Answer Key

4. Dishwashing machines shall reach a temperature of _____°F during the washing and/or drying cycle. **80076 Food Service (Page 99-100)**

- a. 125
- b. 165
- c. 175
- d. 135

Answer Key

5. If a licensee intends to admit or care for one or more clients who have a restricted health condition, the policies program description shall include: **80022 Plan of Operation (Page 36-37)**

- a. The type of restricted condition that the licensee plans to admit.
- b. The licensee's plan for serving the clients.
- c. The services that will be provided
- d. Staff adjustments if needed in order to provide proposed services.
- e. all of the above

6. All foods or beverages capable of supporting rapid and progressive growth of microorganisms which can cause food infections shall be stored in covered containers at _____°F. **80076 Food Service (Page 99-100)**

- a. 22
- b. 32
- c. 35
- d. 45_

Answer Key

7. _____ diets prescribed by a client's physician as a medical necessity shall be provided. **80076 Food Service (Page 99-100)**

- a. Supplemental
- b. Modified
- c. Creative
- d. Weight Watchers

Answer Key

8. For the client whose physician has stated in writing that the client is unable to determine his/her own need for nonprescription PRN medication but can communicate his/her symptoms clearly, then the following requirements apply: **80075 Health Related Services (Page 84-86)**

- a. Written direction from physician
- b. Instructions regarding time and circumstance when it should be discontinued
- c. Indication when physician should be contacted for reevaluation
- d. All of the above

Answer Key

9. Which of the following is not a restricted health condition? **80092 Restricted Health Conditions (Page 104-105)**

- a. Colostomy or ileostomies
- b. Inhalation-assistive devices
- c. Tuberculosis
- d. Insulin-dependent diabetes

Answer Key

10. No more than 15 hours shall elapse between the third meal of one day and the first meal of the following day. **80076 Food Service (Page 99-100)**

- a. True
- b. False_

Answer Key

11. If clients like to eat their food in their bedroom, they should not be encouraged to eat their meals with others. **85076 Food Service (Page 117-118)**

- a. True

b. False_
Answer Key

12. Supplies of nonperishable foods should be maintained for a minimum of: **85076 Food Service (Page 117-118)**

- a. 2 days
 - b. 1 week
 - c. 3 days
 - d. 2 weeks_
- Answer Key

13. Dishwashing machines shall reach a temperature of _____ °F. **80076 Food Service (Page 99-100)**

- a. 175 °F
 - b. 165 °F
 - c. 145 °F
 - d. 185 °F
- Answer Key

14. Menus shall be written at least _____ in advance. **80076 Food Service (Page 99-100)**

- a. 2 weeks
 - b. 1 month
 - c. 3 days
 - d. 1 week_
- Answer Key

15. Assistance in dressing, grooming, bathing and other personal hygiene is defined as Care and Supervision. **80001(c)(2) Definitions (Page 15-16)**

- a. True
 - b. False_
- Answer Key

16. Fecal impaction can be administered by the facility staff if the licensed professional is not available. **80092.5 Fecal Impaction Removal (Page 107-108)**

- a. True
 - b. False_
- Answer Key

17. A licensee of an adult CCF may accept or retain a client who has contractures. **80077.5 Care for Clients With Contractures (Page 103-104)**

- a. True
 - b. False_
- Answer Key

18. Which of the following does not define Activities of Daily Living (ADLs)? **80001 Definitions (Page 15)**

- a. Bathing and dressing
- b. Daily game activities
- c. Toileting and continence
- d. Transferring and eating

Answer Key

19. Which of the following is a restricted health condition: **80092 Restricted Health Conditions (Page 104-105)**

- a. Colostomy/ileostomies/gastrostomies
- b. Use of inhalation-assistive devices
- c. Insulin dependent diabetes
- d. Stage 1 and 2 dermal ulcers
- e. All of the above

Answer Key

20. No more than _____ hours may elapse between the third and first meal. **80076 Food Service (Page 99-100)**

- a. 12
- b. 8
- c. 15

Answer Key

21. In facilities of _____ persons or more, menus shall be written at least _____ week(s) in advance. **80076 Food Service (Page 99-100)**

- a. 6, 1
- b. 6, 2
- c. 16, 1
- d. 16, 2

Answer Key

22. Residents are to be observed for physical changes in health and weight _____. **85075.4 Observation of The Client (Page 116-117)**

- a. Daily
- b. Weekly
- c. Regularly
- d. Monthly

Answer Key

23. What portion of servings recommended by the USDA basic food group plan shall be served at each meal? **80076 Food Service (Page 99-100)**

- a. 1/4
- b. 1/3
- c. 1/2
- d. 2/3

Answer Key

24. Refrigerators shall maintain a maximum temperature of _____°F. **85076 Food Service (Page 117-118)**

- a. 40
- b. 42
- c. 45
- d. 50

Answer Key

25. How long are menus kept on file? **80076 Food Service (Page 99-100)**

- a. 30 days
- b. 60 days
- c. 180 days
- d. None of the above

Answer Key

26. What size facility must have regular consultation from a nutritionist, dietitian or home economist? **85065 Personnel Requirements (Page 57-58)**

- a. 1-7 clients
- b. 16-49 clients
- c. 50 or more clients

Answer Key

27. What cannot be used as a beverage? **80076 Food Service (Page 99-100)**

- a. Soda
- b. Powdered milk
- c. Raw milk
- d. Both A and B
- e. Both B and C
- f. All of the above
- g. None of the above

Answer Key

28. Fresh perishable foods for a minimum of _____ shall be maintained. **80076 Food Service (Page 99-100)**

- a. 24 hours
- b. 48 hours
- c. 72 hours

Answer Key

29. What should be provided in case of temporary need? (from the food service department) **85076 Food Service (Page 118)**

- a. Tray service
- b. Isolation_

Answer Key

30. Freezers must maintain a temperature of _____degrees Fahrenheit **85076 Food Service (Page 117-118)**

- a. 45 degrees
- b. 0 degrees
- c. less than 45 degrees

31. Postural supports require a physician order. **80072 Personal Rights (Page 51-52)**

- a. True
- b. False_

Answer Key

32. An example of a postural support is: **80072 Personal Rights (Page 51-52)**

- a. A “posey” restraint
- b. Braces/casts
- c. A restraint belt made out of soft fabric
- d. A wrist restraint
- e. All of the above
- f. None of the above
- g. A and B_

Answer Key

33. Physician-prescribed orthopedic devices such as braces or casts used for support of a weakened body part or correction of body parts are not considered postural supports. **80072 Personal Rights (Page 51-52)**

- a. True
- b. False_

Answer Key

34. The licensee shall regularly observe each client for changes in physical, mental, emotional, and social functioning. **85075 Observation of Client (Page 116-117)**

- a. True
- b. False_

Answer Key

MANAGEMENT PRACTICE QUESTIONS
PAGE NUMBERS ARE AN APPROXIMATE RANGE

1. Administrators shall complete at least _____ classroom hours of continuing education during the _____ year certification period. **85064.3 Administrator Recertification Requirements (Page 124)**

2. What size facility must have a designated employee (who either receives on the job training or has related experience) who has primary responsibility for food planning and preparation and service?_ **85065 Personnel Requirements (Page 58)**

- a. All residential facilities
- b. Facilities with a capacity of 7 to 15
- c. Facilities with a capacity of 16 to 49
- d. Facilities with a capacity of 50 or larger

Answer Key

3. All personnel shall be given on-the-job training or shall have related experience, which provides knowledge of and skill in which of the following areas? **80065 Personnel Requirements (Page 119)**

- a. Computer skills
- b. Customers service skills
- c. Housekeeping and sanitation principles
- d. Web page development
- e. None of the above

Answer Key

4. A dated employee time schedule shall be developed at least _____. **85066 Personnel Records (Page 125-126)**

- a. Weekly
- b. Monthly
- c. Easy pay period
- d. Each time a staff person is terminated

Answer Key

5. Employees must be fingerprinted and sign a statement regarding prior criminal convictions _____ . **80019 Criminal Record Clearance (Page 28)**

- a. Within 4 days of hire
- b. Prior to initial presence in facility
- c. Within 30 days of hire
- d. Not required if employee previously was DOJ cleared while working for a law enforcement agency
- e. B and D_

Answer Key

6. Testing for tuberculosis (TB) for employees shall be conducted_____. **80065 Personnel Requirements (Page 120)**

- a. Not more than 6 months prior or 4 days after initial presence in facility
- b. Yearly
- c. Every two years
- d. No more than one year prior or 7 days after initial presence in facility.

Answer Key

7. A person who supervises employees and/or volunteers must be at least 21 years of age. **80065 Personnel Requirements (Page 118-119)**

- a. True
- b. False_

Answer Key

8. Adults who supervise while clients are using a pool or other body of water from which rescue requires the rescuers ability to swim shall possess a lifeguard certificate. **80065 Personnel Requirements (Page 118-119)**

- a. True
- b. False_

Answer Key

9. In facilities required to have a signal system at least two staff persons shall be responsible for responding to the signal system. **85065 Personnel Requirements (Page 57-59)**

- a. True
- b. False_

Answer Key

11. All Adult Residential Facilities shall have a(n): **85064 Administrator Qualifications and Duties (Page 121-122)**

- a. Activity director
- b. Consultant
- c. Certified administrator
- d. Food service manager

Answer Key

12. Employees providing care from 10:00 PM to 7:00 AM shall_____. **85065 Personnel Requirements (Page 57-59)**

- a. Be trained in CPR
- b. Be trained in CPR and first aid
- c. Be trained in first aid
- d. Be exempt from training in first aid and CPR.

Answer Key

13. In facilities for 16 to 49, the following is required for the person with primary responsibility for the organization, and implementation of planned activities. **85065 Personnel Requirements (Page 57-59)**

- a. There are no requirements
- b. 6 months experience in organizing and providing planned group activities
- c. 1 year experience in organizing and providing planned group activities
- d. 15 college units including 3 in psychology.

Answer Key

14. By regulation, an administrator of an ARF must be on the premises: **85064 Administrator Qualifications and Duties (Page 121-122)**

- a. Number hours necessary to manage
- b. Number hours determined by LPA
- c. At least 2 hours each day
- d. At least 10 hours per week

Answer Key

15. Within 3 months of becoming an administrator, the individual shall receive HIV and TB training. **85064 Administrator Qualifications and Duties (Page 121-122)**

- a. True
- b. False

Answer Key

16. Any person willfully making any false representation as being a certified ARF administrator is guilty of a misdemeanor. **85064 Administrator Qualifications and Duties (Page 121-122)**

- a. True
- b. False

Answer Key

18. Certificates not renewed within four years of their expiration date shall not be renewed, restored, reissued or reinstated. **85064 Administrator Qualifications and Duties (Page 121-122)**

- a. True
- b. False

Answer Key

19. Certificates not renewed within four years of their expiration date require a delinquency fee equal to three times the renewal fee or three hundred dollar **85064 Administrator Qualifications and Duties (Page 121-122)**

- a. True
- b. False

Answer Key

20. Administrator certificates can expire on either the anniversary date of initial issuance or on the individual's birthday. **85064 Administrator Qualifications and Duties (Page 121-122)**

- a. True

b. False_
Answer Key

21. The administrator of an ARF shall be at least 18 years of age. **85064 Administrator Qualifications and Duties (Page 121-122)**

a. True
b. False_
Answer Key

22. For clients who rely on others to perform all activities of daily living the minimum staffing ratio is one care staff for each two clients. **85065 Personnel Requirements (Page 57-59)**

a. True
b. False_
Answer Key

23. Which of the following is required for administrator certification? **85064 Administrator Qualifications and Duties (Page 121-122)**

a. To be a certificate holder prior to being employed as an administrator
b. Pass a written test within 30 days of completion of an initial certification training program
c. Pay a one hundred dollar processing fee
d. A and C
e. All of the above
Answer Key

24. The administrator shall complete at least _____ classroom hours of continuing education during the _____ year certification period. **85064.3 Administrator Recertification Requirements**

a. 40, 1
b. 20, 2
c. 40, 2
d. 40, 3
Answer Key

25. Administrative certificates should be **85064.2 Administrator Certification Requirements (Page 122-123)**

a. Valid for two years
b. Valid for one year
c. Valid for three years
Answer Key

26. Administrator qualifications include: **85064 Administrator Qualifications and Duties (Page 121-122)**

a. A high school diploma or GED
b. One year of work experience for facility with 7-15 clients
c. Be at least 18 years of age
d. All of the above
e. A and B

Answer Key

27. In facilities with a capacity of 16-49 persons, the employee with primary responsibility of operating the food service program shall have _____ years of experience in food preparation and service. **85065**
Personnel Requirements (Page 58)

- a. 2 years
- b. 1 year
- c. On the job training
- d. 3 years_

Answer Key

28. The department may deny or revoke any administrator certificate for any of the following: **85064.4**
Denial or Revocation of Certificate (Page 124-25)

- a. The certificate holder procured a certificate by fraud
- b. The certificate holder knowingly made or gave a false statement or information
- c. The department has issued an exclusion order against the certificate holder
- d. All of the above

Answer Key

29. The person who supervises employees and/or volunteers shall be at least 21 years of age. **80065**
Personnel Requirements (Page 119-120)

- a. True
- b. False_

Answer Key

30. The administrator of a CCF shall be at least 21 years of age. **85064 Administrator Qualifications and Duties (Page 121-123)**

- a. True
- b. False_

Answer Key

31. The administrator is responsible for maintaining or supervising the maintenance of financial and other records. **85064 Administrator Qualifications and Duties (Page 121-123)**

- a. True
- b. False_

Answer Key

32. The administrator shall be on the premises minimum 15 hours a week. **85064 Administrator Qualifications and Duties (Page 121-123)**

- a. True
- b. False_

Answer Key

33. The administrator of a facility for 16 to 49 clients shall have: **85064 Administrator Qualifications and Duties (Page 121-123)**

- a. High school diploma or GED
- b. Completion, with a passing grade, of 20 college or continuing education semester
- c. One year of work experience in residential care
- d. All of the above
- e. A and C_

Answer Key

34. In facilities providing care and supervision for 15 or fewer clients, there shall be at least _____ person(s) on call on the premises. **85065 Personnel Requirements (Page 57-58)**

- a. 2
- b. 1
- c. 3
- d. 4

Answer Key

35. Personnel records must be retained after termination of employees for: **80066 Personnel Records (Page 119-121)**

- a. 90 days
- b. 1 year
- c. 3 years
- d. 5 years_

Answer Key

36. Persons who provide night supervision are required to have: **85065 Personnel Requirements (Page 57-59)**

- a. A current CPR card
- b. A current First Aid card
- c. A current CPR and First Aid card
- d. None of the above.

Answer Key

37. Which is the most accurate statement about first aid requirements? **80075 Health Related Services (Page 83-86)**

- a. Staff providing direct care must complete first aid and CPR
- b. First aid is required for the administrator and licenses only
- c. If the licensee has completed first aid and CPR., the staff is exempt
- d. All direct care staff are required to complete first aid.

Answer Key

38. Community Care Licensing requirements for direct care staff are as follows: **85065 Personnel Requirements (Page 57-59)**

- a. One staff person for every 6 residents
- b. One staff person for every 3 residents
- c. One staff person for every 12 residents
- d. Sufficient staff to ensure provision of care and supervision to meet resident needs.

Answer Key

39. Volunteers shall: 80065 Personnel Requirements (Page 118-119)

- a. Not be allowed to work in the residential care facility
- b. Work no more than three hours per day
- c. Be supervised
- d. Not require supervision.

Answer Key

40. Fingerprints must be submitted _____ . 80019 Criminal Record Clearance (Page 26-27)

- a. 10 days after employment
- b. 4 days after employment
- c. 30 days after employment
- d. Prior to initial presence in the facility.

Answer Key

41. Every residential care facility must have an administrator. 85064 Administrator Qualifications and Duties (Page 121-123)

- a. True
- b. False

Answer Key

42. An administrator must be at least: 85064 Administrator Qualifications and Duties (Page 121-123)

- a. 21 years of age
- b. 18 years of age
- c. 16 years of age.

Answer Key

43. Persons working from 10:00 PM to 7:00AM shall receive training in the following areas: 85065 Personnel Requirements (Page 57-58)

- a. Evening activities
- b. How to prepare bedtime snacks
- c. First aid
- d. First aid and the facility's planned emergency procedures.

Answer Key

44. Who will require criminal record clearance? 80019 Criminal Record Clearance (Page 26-27)

- a. Direct care staff

- b. The administrator
- c. A spouse living in the facility with an administrator who performs no care whatsoever
- d. All of the above
- e. None of the above
- f. A and B only

Answer Key

45. Personnel records shall be retained for _____ years. **80066 Personnel Records (Page 119-121)**

- a. 1
- b. 2
- c. 3
- d. 7

Answer Key

46. The physical health of staff shall be verified by a health screening: **80065 Personnel Requirements (Page 118-119)**

- a. Within seven days of employment
- b. 3 days prior to employment
- c. Within twenty days of employment
- d. Unless the staff person does not have direct resident contact

Answer Key

47. In all cases, personnel records shall document what? **80066 Personnel Records (Page 119-120)**

- a. Race of employee
- b. Date of Birth
- c. Religion
- d. Hours actually worked

Answer Key

48. All employee records shall be maintained for how many years? **80066 Personnel Records (Page 119-120)**

- a. 1 year
- b. 3 years
- c. 7 years

Answer Key

49. Fingerprints shall be submitted to the department of justice within what time frame of employment? **80019 Criminal Record Clearance (Page 26-27)**

- a. 4 calendar days
- b. 7 calendar days
- c. 10 working days
- d. 14 days
- e. None of the above

Answer Key

50. When is an employee fingerprinted? **80019 Criminal Record Clearance (Page 26-27)**

- a. After employment
- b. Prior to employment
- c. Prior to residence or initial presence in the facility.
- d. Both A and C
- e. Both B and C

Answer Key

51. According to licensing, employees providing night supervision from 10:00 PM to 7:00 AM and who assist with care and supervision are required to have what for emergencies? **85065.6 Personnel Requirements (Page 57-59)**

- a. The facility's planned emergency procedure
- b. The keys to all exterior doors of the facility
- c. A first aid certificate
- d. Both A and B
- e. Both A and C
- f. All of the above
- g. None of the above

Answer Key

52. TB test must be performed on facility staff. What are the time frames? **80065 Personnel Requirements (Page 118-119)**

- a. No more than 6 months prior or 7 days after
- b. No more than 1 year prior or 7 days after
- c. Every two years

Answer Key

53. Certified administrator means an administrator who has been issued a group home or ARF certificate by the department and whose certificate is current. **80001.4 Definitions (Page 16)**

- a. True
- b. False_

Answer Key

54. Criminal record clearance means an individual has a CA Department of Justice clearance and an FBI clearance. **80001.19 Definitions (Page 17)**

- a. True
- b. False_

Answer Key

55. Tuberculosis test documents shall be maintained in personal records of the licensee, administrator, and each employee. **80066 Personnel Records (Page 119-120)**

- a. True

b. False_
Answer Key

56. Any driver working in the facility is allowed to transport clients when needed. **80074**
Transportation (Page 121)

a. True
b. False_
Answer Key

57. An individual shall be a certificate holder prior to being employed as an administrator. **85064**
Administrator Qualifications and Duty (Page 121-122)

a. True
b. False
Answer Key

58. The administrator shall not be responsible for recruitment, employment, and training of staff and termination of staff. **85064** ***Administrator Qualifications and Duty (Page 121-122)***

a. True
b. False_
Answer Key

59. A certified administrator of an Adult Residential Facility must be on the premises the number of hours necessary to manage and administer the facility. Title 22 does not specify a number of hours that the administrator is required to be on site.
85064 ***Administrator Qualifications and Duty (Page 121-122)***

a. True
b. False_
Answer Key

60. The department may deny or revoke the administrator license if the certificate holder procured a certificate by fraud or misrepresentation. **85064.4** ***Denial or Revocation of a Certificate (Page 124-125)***

a. True
b. False_
Answer Key

ANSWER KEY

**IF YOU FIND AN ANSWER THAT YOU BELIEVE TO BE INCORRECT OR POORLY WORDED
PLEASE TAKE A PHOTO OF THE QUESTION AND TEXT TO 818.262.3998**

Laws & Regulations

<u>1. D</u>	<u>43. B</u>	<u>88. B</u>
<u>2. D</u>	<u>44. A</u>	<u>89. C</u>
<u>3. C</u>	<u>45. B</u>	<u>90. B</u>
<u>4. D</u>	<u>46. B</u>	<u>91. C</u>
<u>5. C</u>	<u>47. A</u>	<u>92. C</u>
<u>6. D</u>	<u>48. A</u>	<u>93. C</u>
<u>7. D</u>	<u>49. B</u>	<u>94. C</u>
<u>8. A</u>	<u>50. B</u>	<u>95. D</u>
<u>9. C</u>	<u>51. C</u>	<u>96. D</u>
<u>10. A</u>	<u>52. B</u>	<u>97. C</u>
<u>11. F</u>	<u>53. A</u>	<u>98. B</u>
<u>12. B</u>	<u>54. D</u>	<u>99. C</u>
<u>13. B</u>	<u>55. C</u>	<u>100. A</u>
<u>14. B</u>	<u>56. B</u>	<u>101. B</u>
<u>15. B</u>	<u>57. A</u>	<u>102. B</u>
<u>16. C</u>	<u>58. C</u>	<u>103. A</u>
<u>17. D</u>	<u>59. B</u>	<u>104. B</u>
<u>18. B</u>	<u>60. A</u>	<u>105. A</u>
<u>19. D</u>	<u>61. B</u>	<u>106. B</u>
<u>20. B</u>	<u>63. B</u>	<u>107. B</u>
<u>21. D</u>	<u>64. A</u>	<u>108. A</u>
<u>22. B</u>	<u>65. C</u>	<u>109. B</u>
<u>23. C</u>	<u>66. B</u>	<u>110. B</u>
<u>24. C</u>	<u>67. C</u>	<u>111. B</u>
<u>25. D</u>	<u>68. B</u>	<u>112. B</u>
<u>26. C</u>	<u>69. C</u>	
<u>27. B</u>	<u>70. C</u>	
<u>28. C</u>	<u>71. A</u>	
<u>29. A</u>	<u>72. D</u>	
<u>30. B</u>	<u>73. D</u>	
<u>31. B</u>	<u>74. B</u>	
<u>32. B</u>	<u>75. A</u>	
<u>33. B</u>	<u>76. B</u>	
<u>34. B</u>	<u>77. A</u>	
<u>35. A</u>	<u>78. B</u>	
<u>36. A</u>	<u>79. C</u>	
<u>37. A</u>	<u>80. B</u>	
<u>38. A</u>	<u>81. C</u>	
<u>39. D</u>	<u>82. A</u>	
<u>40. D</u>	<u>83. B</u>	
<u>41. C</u>	<u>84. D</u>	
<u>42. D</u>	<u>85. A</u>	
	<u>86. D</u>	
	<u>87. C</u>	

Admission and Retention

1. E
2. E
3. H
4. D
5. D
6. A
7. D
8. A
9. B
10. A
11. B
12. D
13. E
14. A
15. B
16. B
17. B
18. A
19. B
20. B
21. D
22. A
23. D
24. A
25. D
26. C
27. D
28. E
29. B
30. A
31. B
32. B
33. D
34. C
35. D
36. A
37. C
38. A
39. A
40. A
41. A
42. B
43. A
44. A
45. B

Medication

1. C
2. B
3. C
4. A
5. D
6. E
7. C
8. A
9. B

Physical Needs

1. D

2. B

3. A

4. B

5. E

6. D

7. B

8. D

9. C

10. A

11. B

12. B

13. B

14. D

15. A

16. B

17. A

18. B

19. E

20. C

21. A

22. C

23. B

24. C

25. A

26. C

27. E

28. B

29. A

30. B

31. A

32. B

33. B

34. A

Management

1. forty: two

2. C

3. C

4. B

5. B

6. D

7. B

8. B

9. B

11. C

12. C

13. B

14. A

15. B

16. A

18. A

19. A

20. A

21. B

22. B

23. D

24. C

25. A

26. A

27. C

28. D

29. B

30. A

31. A

32. B

33. E

34. B

35. C

36. B

37. D

38. D

39. C

40. D

41. A

42. A

43. D

44. D

45. C

46. A

47. D

48. B

49. E

50. E

51. E

52. B

53. A

54. A

55. A

56. B

57. A

58. B

59. A

60. A

**EMERGENCY DISASTER PLAN FOR
ADULT DAY PROGRAMS, ADULT
RESIDENTIAL FACILITIES, RESIDENTIAL
CARE FACILITIES FOR THE CHRONICALLY
ILL AND SOCIAL REHABILITATION FACILITIES**

INSTRUCTIONS:
Post a copy in a prominent location in facility, near telephone.
Licensee is responsible for updating information as required.
Return a copy to the licensing office.

NAME OF FACILITY	ADMINISTRATOR OF FACILITY
FACILITY ADDRESS (NUMBER, STREET, CITY, STATE, ZIP CODE)	TELEPHONE NUMBER ()

I. ASSIGNMENTS DURING AN EMERGENCY (USE REVERSE SIDE IF ADDITIONAL SPACE IS REQUIRED)

NAME(S) OF STAFF	TITLE	ASSIGNMENT
1.		DIRECT EVACUATION AND PERSON COUNT
2.		HANDLE FIRST AID
3.		TELEPHONE EMERGENCY NUMBERS
4.		TRANSPORTATION
5.		OTHER (DESCRIBE)
6.		

II. EMERGENCY NAMES AND TELEPHONE NUMBERS (IN ADDITION TO 9-1-1)

FIRE/PARAMEDICS	POLICE OR SHERIFF
RED CROSS	OFFICE OF EMERGENCY SERVICES
PHYSICIAN(S)	POISON CONTROL
HOSPITAL(S)	AMBULANCE
DENTIST(S)	CRISIS CENTER
LONG TERM OMBUDSMAN	OTHER AGENCY/PERSON

III. FACILITY EXIT LOCATIONS (USING A COPY OF THE FACILITY SKETCH [LIC 999] INDICATE EXITS BY NUMBER)

1.	2.
3.	4.

IV. TEMPORARY RELOCATION SITE(S) (IF AVAILABLE, SUBMIT LETTER OF PERMISSION FROM RENTER/LEASEE/MANAGER/PROPERTY OWNER)

NAME	ADDRESS	TELEPHONE NUMBER ()
NAME	ADDRESS	TELEPHONE NUMBER ()

V. UTILITY SHUT-OFF LOCATIONS (INDICATE LOCATION(S) ON THE FACILITY SKETCH [LIC 999])

ELECTRICITY

WATER

GAS

VI. FIRST AID KIT (LOCATION)

VII. EQUIPMENT

SMOKE DETECTOR LOCATION (IF REQUIRED)

FIRE EXTINGUISHER LOCATION (IF REQUIRED)

TYPE OF FIRE ALARM SOUNDING DEVICE (IF REQUIRED)

LOCATION OF DEVICE

VIII. AFFIRMATION STATEMENT

AS ADMINISTRATOR OF THIS FACILITY, I ASSUME RESPONSIBILITY FOR THIS PLAN FOR PROVIDING EMERGENCY SERVICES AS INDICATED BELOW. I SHALL INSTRUCT ALL CLIENTS/RESIDENTS, AGE AND ABILITIES PERMITTING, ANY STAFF AND/OR HOUSEHOLD MEMBERS AS NEEDED IN THEIR DUTIES AND RESPONSIBILITIES UNDER THIS PLAN.

SIGNATURE	DATE
-----------	------

FORMS

PERSONAL RIGHTS ADULT COMMUNITY CARE FACILITIES

EXPLANATION: The California Code of Regulations, Title 22 requires that any person admitted to a facility must be advised of his/her personal rights. Facilities are also required to post these rights in areas accessible to the public. Consequently, this form is designed to meet both the needs of persons admitted to facilities and the facility owners who are required to post these rights.

This form describes the personal rights to be afforded each person admitted to an adult community care facility. The form also provides the complaint procedures for the client and representative/conservator. The facility staff or client representative must communicate these rights in a manner appropriate for client's ability.

This form is to be reviewed, completed and signed by each client and/or each representative/conservator upon admission to the facility. The client and/or representative/conservator also has the right to receive a completed copy of the originally signed form. The original signed copy shall be retained in the client's file which is maintained by the facility.

TO: CLIENT OR AUTHORIZED REPRESENTATIVE:

Upon satisfactory and full disclosure of the personal rights as explained, complete the following acknowledgment:

ACKNOWLEDGMENT: At the time of admission I have been personally advised of, and have received a copy of the personal rights contained in the California Code of Regulations, Title 22.

(PRINT THE NAME OF THE FACILITY) (PRINT THE ADDRESS OF THE FACILITY)

(PRINT THE NAME OF THE CLIENT)

(SIGNATURE OF THE CLIENT) (DATE)

(SIGNATURE OF THE REPRESENTATIVE/CONSERVATOR)

(TITLE OF THE REPRESENTATIVE/CONSERVATOR) (DATE)

THE CLIENT AND/OR THE REPRESENTATIVE/CONSERVATOR HAS THE RIGHT TO BE INFORMED OF THE APPROPRIATE LICENSING AGENCY TO CONTACT REGARDING COMPLAINTS. THIS AGENCY IS:

NAME _____

ADDRESS _____

CITY _____ ZIP CODE _____ AREA CODE/TELEPHONE NUMBER
()

PERSONAL RIGHTS ADULT COMMUNITY CARE FACILITIES

Each client shall have rights, which include, but are not limited to the following:

- (1) A right to be treated with dignity, to have privacy and to be given humane care.
- (2) A right to have safe, healthful and comfortable accommodations, including furnishings and equipment to meet your needs.
- (3) A right to be free from corporal or unusual punishment, infliction of pain, humiliation, intimidation, ridicule, coercion, threat, mental abuse, or other actions of a punitive nature. To be free from restraining devices, neglect or excessive medication.
- (4) A right to be informed by the licensee of provisions in the law regarding complaints, including the address and telephone number of the licensing agency, and of information regarding confidentiality.
- (5) A right to attend religious services and activities . Participation in religious services and other religious functions shall be on a completely voluntary basis.
- (6) A right to leave or depart the facility at any time, and to not be locked into any room or building, day or night. This does not prohibit the development of house rules, such as the locking exterior doors or windows, for the protection of the consumer.
- (7) A right to visit a facility with a relative or authorized representative prior to admission.
- (8) A right to have communications between the facility and your relatives or authorized representative answered promptly and completely, including any changes to the needs and services plan or individual program plan.
- (9) A right to be informed of the facility's policy concerning family visits. This policy shall encourage regular family involvement and provide ample opportunities for family participation in activities at the facility.
- (10) A right to have visitors, including advocacy representatives, visit privately during waking hours provided the visits do not infringe upon the rights of other consumers.
- (11) A right to possess and control your own cash resources.
- (12) A right to wear your own clothes, to possess and use your own personal items, including your own toilet articles.
- (13) A right to have access to individual storage space for your private use.
- (14) A right to have access to telephones, to make and receive confidential calls, provided such calls do not infringe on the rights of other clients and do not restrict availability of the telephone in emergencies.
- (15) A right to promptly receive your unopened mail.
- (16) A right to receive assistance in exercising your right to vote.
- (17) A right to receive or reject medical care or health-related services, except for those whom legal authority has been established.
- (18) A right to move from a facility in accordance with the terms of the admission agreement.

Reference:

California Code of Regulations, Title 22, Division 6 - General Licensing Regulations, Section 80072; Section 81072, Social Rehabilitation Facilities; Section 85072, Adult Residential Facilities; Section 87872, Residential Care Facilities for the Chronically III.

MEDICATION NAME	STRENGTH/ QUANTITY	INSTRUCTIONS ON TROUCUSTODY	EXPIRATION DATE	DATE FILLED	DATE STARTED	PRESCRIBING PHYSICIAN	PRESCRIPTION NUMBER	ND. OF REFILLS	NAME OF PHARMACY

M
F
0
M
(1)

II. MEDICATION DESTRUCTION RECORD

INSTRUCTIONS: Prescription drugs not taken with the client, resident upon termination of services or otherwise disposed of shall be destroyed in the facility by the Administrator or Designated Representative and witnessed by one other adult who is not a client, resident. All facilities except Residential Care Facilities for the Elderly (RCFEs) shall retain destruction records for at least one year. RCFEs shall retain records for at least three years.

MEDICATION NAME	STRENGTH/ QUANTITY	DATE FILLED	PRESCRIPTION DISPOSAL		NAME OF PHARMACY	SIGNATURE OF ADMINISTRATOR OR DESIGNATED REPRESENTATIVE	SIGNATURE OF WITNESS
			NUMBER	DATE			

v
E

FUNCTIONAL CAPABILITY ASSESSMENT

Licenses of Adult Residential and Social Rehabilitation Facilities must obtain the following information prior to placement. The Licensee can obtain this assessment information from the applicant or his/her authorized representative. Adult Day Care Facilities and Adult Day Support Centers may use this form to identify the functional ability of the applicant as required. The licensee must maintain this information in the client's file as a part of the Needs and Services Plan.

Note: Residential Care Facilities for the Elderly may use this form to assess the person's functional capabilities as required in Section 87584 of the regulations.

CLIENT'S NAME	DATE OF BIRTH	AGE	SEX <input type="radio"/> MALE <input type="radio"/> FEMALE
---------------	---------------	-----	---

Check the box that most appropriately describes clients ability:

Check the box that most appropriately describes clients ability:

- BATHING:**
- Does not bathe or shower self.
- Needs help with bathing or showering.
- Bathes or showers without help.
- DRESSING:**
- Does not dress self.
- Needs help with dressing.
- Dresses self completely.
- TOILETING:**
- Not toilet trained.
- Needs help toileting.
- Uses toilet by self.
- TRANSFERRING:**
- Unable to move in and out of a bed or chair.
- Needs help to transfer.
- Is able to move in and out of a bed or chair.
- CONTINENCE:**
- No bowel and/or bladder control.
- Some bowel and/or bladder control.
- Use of assistive devices , such as a catheter.
- Complete bowel and/or bladder control.
- EATIN :**
- Does not feed self.
- Feeds self with help from another person.
- Feeds self completely.
- GROOMING:**
- Does not tend to own personal hygiene.
- Needs help with personal hygiene tasks.
- Handles own personal hygiene.

- REPOSITIONING:**
- Unable to reposition.
- Repositions from side to side.
- Repositions from front to back and back to front.
- WHEELCHAIR:**
- Unable to sit without support.
- Sits without support.
- Uses wheelchair.
- Needs help moving wheelchair.
- Moves wheelchair by self.
- VISION:**
- Severe vision problem.
- Mild/moderate vision problem.
- Wears glasses to correct vision problem.
- No vision problem.
- HEARING:**
- Severe hearing loss.
- Mild/moderate hearing loss.
- Wears hearing aid(s).
- No hearing loss.
- COMMUNICATION:**
- Does not express verbally .
- Expresses by facial expressions or gestures.
- Expresses by sounds or movements.
- Expresses self verbally.
- WALKIN :**
- Does not walk.
- Walks with support.
- Uses walker.
- Walks well alone.

Describe client' s medical history and/or conditions:

List prescription medicine:

List non-prescription medicine:

Describe mental and/or emotional status:

Able to follow instructions? YES NO Confused/disoriented? YES NO

Participates in social activities? YES NO Active Withdrawn

Is there a history of behaviors resulting in harm to self or others that require supervision? YES NO
If YES, provide date _____ and describe last occurrence:

Does he/she have ability to manage own finances and cash resources? YES NO

Is there any additional information that would assist the facility in determining client's suitability for admission? If YES, describe: YES NO

SIGNATURE OF APPLICANT OR ALI THORIZED REPRESENTATIVE

DATE COMPLETED

SIGNATURE OF LICENSEE OR FACILITY REPRESENTATIVE

DATE COMPLETED

COMMUNITY CARE LICENSING DIVISION

*"Promoting Healthy, Safe and
Supportive Community Care"*



Self-Assessment Guide

ADULT RESIDENTIAL FACILITY CLIENT RECORDS



CDSS
CALIFORNIA
DEPARTMENT OF
SOCIAL SERVICES

**TECHNICAL SUPPORT PROGRAM
ADULT RESIDENTIAL FACILITY
CLIENT RECORDS**

This tool is designed to assist facility operators to perform periodic self-assessments of their client records. It includes the most commonly required client records. It is not an exhaustive list of all client records. **It cannot be used as a substitute for having a good working knowledge of all records required by regulation.** Be sure that all documents are signed and complete. It is recommended that each box and/or space is marked to demonstrate that the entire form has been reviewed.

R = Reviewed

U = Updated

N/A = Not Applicable

Client Name: _____ Date of Placement: _____

Review Date	Expires/ Updates Due
-------------	-------------------------

Admission Agreement LIC 604									
Identification and Emergency Info LIC 601									
Physician's Report/ Ambulatory Status/TB Test Results LIC 602									
Consent for Medical Treatment UC 627C									
Certification from Regional Center for D. D. Clients									
Needs and Services Plan UC 625									
Functional Capabilities Assessment UC 9172									
Mental Health Intake Assessment									
Restricted Health Condition Care Plan									
Client Cash Resources LIC 405									
Client Personal Property Record UC 621									
Personal Rights LIC613									
Centrally Stored Medication and Destruction Record LIC 622									
Telecommunications Device Notification Form LIC 9158									

- Admission Agreement (LIC 604)
 Due Date: Within seven days of admission.
 Updates Due: Upon modification of any terms of the agreement
- Identification and Emergency Information (LIC 601)
 Due Date: At time of admission
 Updates Due: When any information on the form changes
- Physician's Report with Ambulatory Status and TB Test Results (LIC 602)
 Due Date: Prior to admission
 Updates Due: When there are significant changes in the client's health that could affect his/her needs and services or continued placement
- Consent for Medical Treatment (LIC 627C) (Optional)
 Due Date: At time of admission
 Updates Due: When there is a change of responsible party
- Certification from Regional Center for Developmentally Disabled Clients
 Due Date: Prior to admission
 Updates Due: None
- Needs and Services Plan (LIC 625)
 Due Date: Prior to admission
 Updates Due: At least annually and when there are significant changes in the client's physical, mental and/or social condition that could affect his/her needs and services or continued placement
- Functional Capabilities Assessment (LIC 9172)
 Due Date: At time of admission
 Updates Due: When there are significant changes in the client's functional capabilities
- Mental Health Intake Assessment (for clients with a mental illness)
 Due Date: Prior to admission
 Updates Due: When there are significant changes in the client's mental health status
- Restricted Health Condition Care Plan
 Due Date: Prior to admission for clients with restricted health conditions.
 Updates Due: When there are significant changes in the client's restricted health conditions or the medical procedures/services needed by the client
- Client Cash Resources (LIC 405)
 Due Date: Upon receipt of any client cash
 Updates Due: Upon receipt or disbursement of any client cash
- Client Personal Property Record (LIC 621)
 Due Date: At time of admission
 Updates Due: When client property is added or removed
- Personal Rights (LIC 613)
 Due Date: At time of admission
 Updates Due: None
- Centrally Stored Medication Record (LIC 622)
 Due Date: Upon receipt of any medication for clients
 Updates Due: When new medications or refills arrive, or when medications are destroyed
- Telecommunications Device Notification (LIC 9158) (for clients with hearing impairments or other disabilities that would cause them to have difficulties using a telephone)
 Due Date: At time of admission
 Updates Due: When a client without the form develops any disability that would cause him/her to have difficulty using a telephone

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**ADULT RESIDENTIAL FACILITY
STAFF RECORDS**



CDSS

CALIFORNIA
DEPARTMENT OF
SOCIAL SERVICES

**TECHNICAL SUPPORT PROGRAM
ADULT RESIDENTIAL FACILITY
STAFF RECORDS**

This tool is designed to assist facility operators to perform periodic self-assessments of their staff records. It includes the most commonly required staff records. It is not an exhaustive list of all staff records. ***It cannot be used as a substitute for having a good working knowledge of all records required by regulation.*** Be sure that all documents are signed and complete. It is recommended that each box and/or space is marked to demonstrate that the entire form has been reviewed.

R = Reviewed

U = Updated

N/A = Not Applicable

Staff Name: _____ Position: _____

Review Date									Expires/ Update Due
-------------	--	--	--	--	--	--	--	--	------------------------

Personnel Report LIC 501									
Health Screening/TB Test Results UC 503									
Criminal Record Statement UC 508									
First Aid Card									
Verification of Education/Experience									
Fingerprint Clearance (DOJ/FBI)									
Driver's License or OMV Printout									
Documentation of In-Service Training									
Water Safety Certificate									
Restricted Health Condition Training									
Universal Precautions Training									
HIV/TB Certificate									
Administrator's Certificate									
Abuse Reporting Requirements Form SOC 341A									

- Personnel Record (LIC 501)
 Due Date: Prior to employment.
 Updates Due: None.
- Health Screening and TB Test (LIC 503)
 Due Date: Within 7 days of employment.
 Updates Due: Upon change in employee health affecting his/her ability to perform duties.
- Criminal Record Statement (LIC 508)
 Due Date: Prior to employment, residence or initial presence in the facility for all persons, other than clients, 18 years of age or older.
 Updates Due: None.
- First Aid Card
 Due Date: Prior to employment.
 Updates Due: Expiration date on card.
- Verification of Experience/Education
 Due Date: Prior to employment.
 Updates Due: None.
- Fingerprint Clearance
 Due Date: Submitted to the Department of Justice prior to employment, residence or initial presence in the facility for all persons, other than clients, 18 years of age or older.
 Updates Due: None.
- Driver's License or DMV Printout
 Due Date: Prior to transporting clients.
 Updates Due: When license expires.
- Documentation of In-Service Training
 Due Date: Upon completion of training.
 Updates Due: Whenever new training is received.
- Water Safety Certificate
 Due Date: Prior to supervising clients in activities that may require water rescue.
 Updates Due: When certificate expires.
- Restricted Health Condition Training
 Due Date: Prior to providing services to a client with a Restricted Health Condition.
 Updates Due: When the Restricted Health Condition Plan changes.
- Universal Precautions Training
 Due Date: At the time of employment
 Updates Due: None
- HIV/TB Certificate
 Due Date: Required for administrator at the time of employment.
 Updates Due: Renewed every 2 years.
- Administrator's Certificate
 Due Date: Required prior to becoming the facility's administrator.
 Updates Due: Renewed every 2 years.
- Abuse Reporting Requirements Form (SOC 341A)
 Due Date: Form SOC 341A to be completed at the time of employment and the abuse training is to be completed within 60 days of employment.
 Updates Due: None.

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Self-Assessment Guide

**WAIVERS,
EXCEPTIONS AND EXEMPTIONS**



CDSS

CALIFORNIA
DEPARTMENT OF
SOCIAL SERVICES

TECHNICAL SUPPORT PROGRAM
WAIVERS, EXCEPTIONS AND EXEMPTIONS

Facilities are required to maintain compliance with regulations at all times. In some instances, licensees may wish to use alternative methods which, while not in strict compliance with regulatory requirements, meet the intent of the regulations and allow for more effective operation of the facility. In these cases, Community Care Licensing (CCL) may issue waivers, exceptions or exemptions to regulations.

DEFINITIONS

WAIVERS - These are requests to waive a particular regulation on a facility-wide basis. They are not tied to a specific individual and may remain in effect regardless of changes in clients and staff.

EXAMPLE - Regulations do not allow facilities to prevent clients from leaving the premises or to lock clients in any room, building, etc. This does not prevent facilities from establishing house rules regarding locking the doors at night for the protection of residents, nor does it prohibit, with permission of the licensing agency, the barring of windows against intruders. If a facility wants to bar the windows for protection, a waiver to the regulation would be required.

EXCEPTIONS - These are requests to make an exception to the regulations for a specific staff or client based upon the unique needs or circumstances of that individual. The regulation in question will still apply to all other residents and staff in the facility.

EXAMPLE - Adult Residential Facilities are licensed for clients from the ages of 18 through 59. If the facility wished to retain a client when he/she turned 60, an exception would be needed.

EXEMPTIONS - These are requests to allow an employee with a criminal conviction to work in a facility. An exemption may be granted for a particular employee performing a specific job function. Some convictions are prohibited from exemption by law.

EXAMPLE - Statute prohibits licensees, employees, or adults residing in facilities from having a criminal history. If a facility wishes to hire an employee who has been convicted of a crime (e.g. shoplifting, welfare fraud, driving under the influence), an exemption from the statute would be needed.

MAKING REQUESTS FOR WAIVERS/EXCEPTIONS

Waivers and exceptions must be approved before the facility implements the practice described in the request. A facility that operates in violation of any regulation without an approved waiver or exception is subject to citation.

Requests for waivers and exceptions must be made in writing to the Regional Office (RO) responsible for licensing the facility. They must also be signed by the licensee or his/her designated representative.

The information required for the Licensing Program Analyst (LPA) to evaluate the request will vary depending on the nature of the waiver or exception. At a minimum, the request will need to provide information to demonstrate how the proposed alternative will meet the intent of the regulation. It is best to contact the LPA prior to submitting the request to determine exactly what information will need to be submitted.

MAKING REQUESTS FOR EXEMPTIONS

The Caregiver Background Check Bureau (CBCB) handles requests for exemptions. The CBCB will notify the licensee when an exemption is required and advise him/her as to what information will be needed to evaluate the request. They will also advise the licensee as to whether or not the employee may continue to work in the facility pending evaluation of the exemption request.

NOTE - If the licensee learns that an employee has a conviction prior to being contacted by CBCB, he/she should contact the facility's LPA for direction on how to proceed.

MISCELLANEOUS

- Waivers and exceptions are issued for a specific client, staff or facility. They are not transferable even between facilities owned by the same licensee.
- + Exemptions are granted for a specific staff member. Exemptions may be transferred between facilities by submitting a Criminal Record Exemption Transfer Request (UC 9188) to the CBCB. For more information on the criminal background exemption process, visit the CCL website at www.cclcd.ca.gov/
- Waivers, exceptions and exemptions granted by the department are subject to review and may be revoked if conditions change and they no longer provide adequate protections for clients, or if conditions placed on the approval are not being met.
- Copies of the exceptions, waivers and exemptions are to be retained in the appropriate facility files.

HEALTH SCREENING REPORT - FACILITY PERSONNEL

All personnel, including applicant, licensee or employed staff of Residential Care Facilities for the Elderly, Community Care or Child Care Facilities must demonstrate that their health condition allows them to perform the type of work required. This health appraisal is to be completed by or under the direction of a physician.

A health screening, by or under the direction of a physician must have been performed not more than one year prior to employment or within seven (7) days after employment.

FACILITY NAME

FACILITY ADDRESS

PERSON'S NAME _____ AGE _____

POSITION/TITLE _____ TYPE OF FACILITY _____ WORK DAYS PER WEEK _____ WORK HOURS PER DAY _____

DUTY STATEMENT

TYPES OF PERSONS SERVED (Check appropriate items)

- Infants Adults Developmentally Disabled Physically Handicapped
- Children Elderly Mentally Disordered Drug/Alcohol Addiction
- Other(s) (specify) _____

AUTHORIZATION FOR RELEASE OF MEDICAL INFORMATION

I HEREBY AUTHORIZE THE RELEASE OF MEDICAL INFORMATION CONTAINED IN THIS REPORT.

SIGNATURE OF APPLICANT/LICENSEE OR EMPLOYEE ADDRESS DATE

NOTE TO PHYSICIAN: Personnel in Residential Care Facilities for the Elderly, Community Care or Child Care Facilities shall be free from communicable disease, and capable of performing assigned tasks. Please complete the following information on the above named person.

EVALUATION OF GENERAL HEALTH

EVALUATION OF ABILITY TO PERFORM WORK DESCRIBED IN THE ABOVE DUTY STATEMENT

NOTE ANY HEALTH CONDITION THAT WOULD CREATE A HAZARD TO THE PERSON, CLIENTS, CHILDREN OR OTHER PERSONNEL

DATE OF T.B. TEST _____ POSITIVE ACTION TAKEN (IF POSITIVE) _____
DATE OF HEALTH SCREENING _____ NEGATIVE NAME OF PHYSICIAN (PHYSICIAN'S STAMP) _____ DATE _____

HEALTH SCREENING BY: (ORIGINAL SIGNATURE) _____ TELEPHONE # _____ DATE _____

IDENTIFICATION AND EMERGENCY INFORMATION

This information is required under the H & S Code and the regulations of the Department to be maintained on every person admitted to a community care facility, to be readily available to the person in charge, but not accessible to unauthorized persons. All information must be kept current. See other side for additional information required for residential facilities for children.

A. ALL FACILITIES [EXCEPT CHILD CARE CENTER/FAMILY CHILD CARE HOME COMPLETES LIC 700]

1. NAME OF CLIENT OR CHILD	SOCIAL SECURITY NUMBER (OPTIONAL)	DATE OF BIRTH	AGE	SEX
2. RESPONSIBLE PERSON OR PLACEMENT AGENCY	ADDRESS		TELEPHONE ()	
3. NAME OF NEAREST RELATIVE (OPTIONAL)	RELATIONSHIP	ADDRESS	TELEPHONE ()	
4. DATE ADMITTED TO FACILITY	ADDRESS PRIOR TO ADMISSION			
5. DATE LEFT	FORWARDING ADDRESS			
6. REASONS FOR LEAVING FACILITY				

7. PERSON(S) RESPONSIBLE FOR FINANCIAL AFFAIRS, PAYMENT FOR CARE, LEGAL GUARDIAN, IF ANY

NAME	ADDRESS	TELEPHONE
		()
		()
		()

8. OTHER PERSONS TO BE NOTIFIED IN EMERGENCY

NAME	ADDRESS	TELEPHONE
a. PHYSICIAN		()
b. MENTAL HEALTH PROVIDER, IF ANY		()
c. DENTIST		()
d. RELATIVE(S)		()
e. FRIEND(S)		()

9. EMERGENCY HOSPITALIZATION PLAN

NAME OF HOSPITAL TO BE TAKEN IN AN EMERGENCY	ADDRESS OF HOSPITAL TO BE TAKEN IN AN EMERGENCY
MEDICAL PLAN	MEDICAL PLAN IDENTIFICATION NUMBER
NAME OF DENTAL PLAN (IF ANY)	DENTAL PLAN NUMBER (IF ANY)

10. OTHER REQUIRED INFORMATION

a. AMBULATORY STATUS		
b. RELIGIOUS PREFERENCE	NAME AND ADDRESS OF CLERGYMAN OR RELIGIOUS ADVISOR, IF ANY	TELEPHONE ()
11. COMMENTS		

SIGNATURE OF RESIDENT	SIGNATURE OF PERSON COMPLETING FORM	TITLE	DATE
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PHYSICIAN'S REPORT FOR COMMUNITY CARE FACILITIES

For Resident/Client Of, Or Applicants For Admission To, Community Care Facilities (CCF).

NOTE TO PHYSICIAN:

The person specified below is a resident/client of or an applicant for admission to a licensed Community Care Facility. These types of facilities are currently responsible for providing the level of care and supervision, primarily nonmedical care, necessary to meet the needs of the individual residents/clients.

THESE FACILITIES DO NOT PROVIDE PROFESSIONAL NURSING CARE.

The information that you complete on this person is required by law to assist in determining whether he/she is appropriate for admission to or continued care in a facility.

FACILITY INFORMATION (To be completed by the licensee/designee)

NAME OF FACILITY:			TELEPHONE: 4321134
ADDRESS: NUMBER	STREET	CITY	
LICENSEE'S NAME:	TELEPHONE:	FACILITY LICENSE NUMBER:	

RESIDENT/CLIENT INFORMATION (To be completed by the resident/authorized representative/licensee)

NAME:			TELEPHONE:
ADDRESS: NUMBER	STREET	CITY	
NEXT OF KIN:	PERSON RESPONSIBLE FOR THIS PERSON'S FINANCES:		

PATIENT'S DIAGNOSIS (To be completed by the physician)

PRIMARY DIAGNOSIS:				
SECONDARY DIAGNOSIS:				LENGTH OF TIME UNDER YOUR CARE:
AGE:	HEIGHT:	SEX:	WEIGHT:	IN YOUR OPINION DOES THIS PERSON REQUIRE SKILLED NURSING CARE? <input type="checkbox"/> YES <input type="checkbox"/> NO
TUBERCULOSIS EXAMINATION RESULTS: <input type="checkbox"/> ACTIVE <input type="checkbox"/> INACTIVE <input type="checkbox"/> NONE			DATE OF LAST TB TEST:	
TYPE OF TB TEST USED:		TREATMENT/MEDICATION: <input type="checkbox"/> YES <input type="checkbox"/> NO		If YES, list below:

OTHER CONTAGIOUS/INFECTIOUS DISEASES: A) <input type="checkbox"/> YES <input type="checkbox"/> NO If YES, list below:		TREATMENT/MEDICATION: B) <input type="checkbox"/> YES <input type="checkbox"/> NO If YES, list below:	
ALLERGIES C) <input type="checkbox"/> YES <input type="checkbox"/> NO If YES, list below:		TREATMENT/MEDICATION: D) <input type="checkbox"/> YES <input type="checkbox"/> NO If YES, list below:	

ADMISSION AGREEMENT GUIDE FOR RESIDENTIAL FACILITIES

NOTE: THIS IS A GUIDE ONLY AND IS NOT TO BE USED AS AN ADMISSION AGREEMENT.

TO LICENSEE/APPLICANT: All community care facilities are required to have written admission agreement between the facility and each client/resident (or authorized representative) who is received for services pursuant to applicable sections of the California Code of Regulations, Title 22, Division 6. This form has been designed to serve as a sample admission agreement for residential facilities. Please use this sample agreement and applicable regulations to aid you in the development of an agreement which meets the needs of your facility and your clients/residents.

1. FACILITY INFORMATION

NAME OF FACILITY			TYPE OF FACILITY	
ADDRESS	CITY	STATE	ZIP CODE	TELEPHONE

is a residential care facility licensed by the State Department of Social Services. THE FACILITY IS A NON-MEDICAL CARE FACILITY WHICH NORMALLY IS NOT ALLOWED TO PROVIDE MEDICAL OR NURSING CARE.

2. BASIC SERVICES

A. The licensee shall provide the following basic services for:

NAME OF CLIENT/RESIDENT	SOCIAL SECURITY NO. (OPTIONAL)	BIRTHDATE
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1) BASIC GENERAL SERVICES:

- (a) Lodging: single room double room.
- (b) Food Services:
 - a. three nutritious meals daily and between meals nourishment or snack.
 - b. Special diets if prescribed by a doctor.
- (c) Laundry service.
- (d) Cleaning of the client's/resident's room.
- (e) Comfortable and suitable bed including fresh linen weekly or more often, if required.
- (f) Plan, arrange and/or provide for transportation to medical and dental appointments.
- (g) A planned activity program including arrangement for utilization of available community resources.
- (h) Notification to family and other appropriate person/agency of client's resident's needs.

2) BASIC PERSONAL SERVICES:

- (a) Continuous observation, care and supervision, as required.
- (b) Assistance with bathing and personal needs, as required.
- (c) Assistance in meeting necessary medical and dental needs.
- (d) Assistance, as needed, with taking prescribed medications in accordance with physician's instructions unless prohibited by law or regulations.
- (e) Bedside care for minor temporary illnesses.
- (f) Maintenance or supervision of client/resident cash resources or property, if necessary.

B. The monthly rate for basic services is \$ _____ or the SSI/SSP established rate or a government funded rate of \$ _____.

C. Basic services are paid in advance in arrears.

The basic monthly rate, as stated above, does not include additional charges for optional services provided by the facility. There is no obligation to purchase any of these services.

3. OPTIONAL SERVICES

A. The licensee will provide the following optional services

SERVICE	TIME/INTERVALS	RATE	PAY SCHEDULE
	FOR PROVIDING SERVICE	FOR PROVIDING SERVICES	
(1)			
(2)			
(3)			
(4)			
(5)			

B. Total monthly rate for optional services is \$ _____.

C. Optional services are paid in advance in arrears.

4. TOTAL MONTHLY RATE (BASIC & OPTIONAL SERVICES) is \$ _____.

UNUSUAL INCIDENT/INJURY REPORT

INSTRUCTIONS : NOTIFY LICENSING AGENCY, PLACEMENT AGENCY AND RESPONSIBLE PERSONS, IF ANY, BY NEXT WORKING DAY.
SUBMIT WRITTEN REPORT WITHIN 7 DAYS OF OCCURRENCE.
RETAIN COPY OF REPORT IN CLIENT'S FILE.

NAME OF FACILITY	FACILITY FILE NUMBER	TELEPHONE NUMBER ()
ADDRESS	CITY, STATE, ZIP	

CLIENTS/RESIDENTS INVOLVED	DATE OCCURRED	AGE	SEX	DATE OF ADMISSION

TYPE OF INCIDENT

- | | | | | |
|--|---|--|---|---|
| <input type="checkbox"/> Unauthorized Absence | <input type="checkbox"/> Alleged Client Abuse | <input type="checkbox"/> Rape | <input type="checkbox"/> Injury-Accident | <input type="checkbox"/> Medical Emergency |
| <input type="checkbox"/> Aggressive Act/Self | <input type="checkbox"/> Sexual | <input type="checkbox"/> Pregnancy | <input type="checkbox"/> Injury-Unknown Origin | <input type="checkbox"/> Other Sexual Incident |
| <input type="checkbox"/> Aggressive Act/Another Client | <input type="checkbox"/> Physical | <input type="checkbox"/> Suicide Attempt | <input type="checkbox"/> Injury-From another Client | <input type="checkbox"/> Theft |
| <input type="checkbox"/> Aggressive Act/Staff | <input type="checkbox"/> Psychological | <input type="checkbox"/> Other | <input type="checkbox"/> Injury-From behavior episode | <input type="checkbox"/> Fire |
| <input type="checkbox"/> Aggressive Act/Family, Visitors | <input type="checkbox"/> Financial | | <input type="checkbox"/> Epidemic Outbreak | <input type="checkbox"/> Property Damage |
| <input type="checkbox"/> Alleged Violation of Rights | <input type="checkbox"/> Neglect | | <input type="checkbox"/> Hospitalization | <input type="checkbox"/> Other (<i>explain</i>) |

DESCRIBE EVENT OR INCIDENT (INCLUDE DATE, TIME, LOCATION, PERPETRATOR, NATURE OF INCIDENT, ANY ANTECEDENTS LEADING UP TO INCIDENT AND HOW CLIENTS WERE AFFECTED, INCLUDING ANY INJURIES:

PERSON(S) WHO OBSERVED THE INCIDENT/INJURY:

EXPLAIN WHAT IMMEDIATE ACTION WAS TAKEN (INCLUDE PERSONS CONTACTED):

RESOURCES & REFERENCES

Wikipedia: "orthotics"

www.fda.gov "bedrail safety"

www.helpguide.org "hospice care"