## GENERAL LICENSING REQUIREMENTS

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## **80001 DEFINITIONS** (Continued)

- (A) Hand-washing Staff should wash their hands:
  - 1. After assisting with incontinent care or wiping a client's nose.
  - 2. Before preparing or eating foods.
  - 3. After using the toilet.
  - 4. Before and after treating or bandaging a cut.
  - 5. After wiping down surfaces, cleaning spills, or any other housekeeping.
  - 6. After being in contact with any body fluids from another person.
  - 7. Even if they wore gloves during contact with body fluids.
- (B) Gloves Staff should always wear gloves:
  - 1. When they come into contact with blood or body fluids that contain blood.
  - 2. When they have cuts or scratches on their hands.
  - 3. When assisting with incontinent care or when cleaning up urine, stool, or vomit.
  - 4. When administering first aid for a cut, a bleeding wound, or a bloody nose.
  - 5. And use gloves only one time, for one incident or client.
    - a. Staff must air dry their hands prior to putting on a new pair of gloves.
  - 6. And dispose of used gloves immediately after use.

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## **80001 DEFINITIONS** (Continued)

80001

- v. (Reserved)
- w. (1) "Waiver" means a nontransferable written authorization issued by the licensing agency to use alternative means which meet the intent of a specific regulation and which are based on a facility-wide need or circumstance.
  - (2) Repealed by Manual Letter No. 98-05, effective 10/1/98.
- x. (Reserved)
- y. (Reserved)
- z. (Reserved)

NOTE: Authority cited: Sections 1502.2, 1522.41(j), 1524(e), 1530, and 1530.9, Health and Safety Code. Reference: Sections 1501, 1502, 1502.2, 1502.5, 1503, 1503.5, 1505, 1507, 1508, 1509, 1511, 1520, 1522, 1524, 1525, 1525.5, 1526, 1527, 1530, 1530.5, 1531, 1531.1, 1533, 1534, 1536.1, 1537, 1538.5, 1550, 1551, 1556, 1569.699(a) and 11834.11, Health and Safety Code; Sections 5453, 5458, 11006.9, and 17736(a) and (b), Welfare and Institutions Code; and 29 CFR 1910.1030.

### **Article 2. LICENSE**

## 80005 LICENSE REQUIRED

80005

(a) 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.

NOTE: Authority cited: Section 1530, Health and Safety Code. Reference: Sections 1505, 1508, 1509, 1513 and 1531, Health and Safety Code.

### 80006 OPERATION WITHOUT A LICENSE

80006

- (a) An unlicensed facility as defined in Section 80001u.(2), is in violation of Sections 1503.5 and/or 1508 of the Health and Safety Code unless exempted from licensure pursuant to Section 80007.
- (b) 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 Section 1538.

#### HANDBOOK BEGINS HERE

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

Upon receipt of a complaint, other than a complaint alleging denial of a statutory right of access to a community care facility, the state department shall make a preliminary review and, unless the state department determines that the complaint is willfully intended to harass a licensee or is without any reasonable basis, it shall make an onsite inspection within 10 days after receiving the complaint, except where a visit would adversely affect the licensing investigation or the investigation of other agencies. In either event, the complainant shall be promptly informed of the state department's proposed course of action.

#### HANDBOOK ENDS HERE

- (c) 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.
- (d) 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.

## **Article 6. CONTINUING REQUIREMENTS**

## 80061 REPORTING REQUIREMENTS

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

## **80061 REPORTING REQUIREMENTS** (Continued)

80061

- (2) Information provided shall include the following:
  - (A) Client's name, age, sex, and date of admission.
  - (B) Date and nature of event.
  - (C) Attending physician's name, findings, and treatment, if any.
  - (D) Disposition of the case.
- (c) The items below shall be reported to the licensing agency within 10 working days following the occurrence.
  - (1) The organizational changes specified in Section 80034(a)(2).
  - (2) Any change in the licensee's or applicant's mailing address.
  - (3) Any change of the chief executive officer of a corporation or association.
    - (A) Such notification shall include the new chief executive officer's name and address.
    - (B) Fingerprint cards shall be submitted as specified in Section 80019(c)(1).
  - (4) Any changes in the plan of operation which affect the services to clients.
- (d) Repealed by Manual Letter No. CCL-98-05, effective 10/1/98.
- (e) The items specified in (b)(1)(A) through (H) above shall also be reported to the client's authorized representative, if any.
- (f) The items specified in (b)(1)(E) through (G) above shall also be reported to the local health officer when appropriate pursuant to Title 17, California Administrative Code, Sections 2500, 2502 and 2503.

### HANDBOOK BEGINS HERE

(1) Title 17, California Administrative Code, Section 2500 requires:

It shall be the duty of every physician, practitioner, dentist, coroner, every superintendent or manager of a dispensary, hospital, clinic, or any other person knowing of or in attendance on a case or suspected case of any of the following diseases or conditions, to notify the local health authority immediately. A standard type report form has been adopted and is available for this purpose.

#### HANDBOOK CONTINUES

## **80065 PERSONNEL REQUIREMENTS** (Continued)

- (e) The licensee shall provide for direct supervision of clients during participation in or presence at potentially dangerous activities or areas in the facility.
  - (1) An adult other than a client shall be present at all times while clients are using a pool or other body of water from which rescue requires the rescuer's ability to swim.
  - (2) Adults who supervise while clients are using a pool or other body of water from which rescue requires the rescuer's ability to swim, shall have a valid water safety certificate.
- (f) All personnel shall be given on-the-job training or shall have related experience which provides knowledge of and skill in the following areas, as appropriate to the job assigned and as evidenced by safe and effective job performance.
  - (1) Principles of nutrition, food preparation and storage and menu planning.
  - (2) Housekeeping and sanitation principles.
  - (3) Provision of client care and supervision, including communication.
  - (4) Assistance with prescribed medications which are self-administered.
  - (5) Recognition of early signs of illness and the need for professional assistance.
  - (6) Availability of community services and resources.
  - (7) For adult CCFs, Universal Precautions as defined in Section 80001(u)(1).
    - (A) 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.
- (g) 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.
  - (1) Except as specified in (3) below, good physical health shall be verified by a health screening, including a test for tuberculosis, performed by or under the supervision of a physician not more than one year prior to or seven days after employment or licensure.

## **80065 PERSONNEL REQUIREMENTS** (Continued)

- (2) A health screening report signed by the person performing such screening shall be made on each person specified above, and shall indicate the following:
  - (A) The person's physical qualifications to perform the duties to be assigned.
  - (B) The presence of any health condition that would create a hazard to the person, clients or other staff members.
- (3) The good physical health of each volunteer who works in the facility shall be verified by:
  - (A) A statement signed by each volunteer affirming that he/she is in good health.
  - (B) A test for tuberculosis performed not more than one year prior to or seven days after initial presence in the facility.
- (h) Personnel with evidence of physical illness that poses a threat to the health and safety of clients shall be relieved of their duties.
- (i) Pending receipt of a criminal record transcript as specified in Section 80019, and prior to employment or at initial presence in the facility all employees and volunteers determined by the licensing agency to require criminal record clearance shall sign a statement under penalty of perjury, on a form provided by the Department, which contains either of the following:
  - (1) A declaration that he/she has not been convicted of a crime, other than a minor traffic violation as specified in Section 80019(f).
  - (2) Information regarding any prior convictions of a crime, with the exception of any minor traffic violations as specified in Section 80019(f).
    - (A) If a person has been convicted of a crime other than a minor traffic violation as specified in Section 80019(f), he/she shall also acknowledge that his/her continued employment is conditioned on approval of the licensing agency.

#### 80068.3 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.
  - (1) If the client refuses to relocate, the licensee may evict the client in accordance with Section 80068.5.

NOTE: Authority cited: Section 1530, Health and Safety Code. Reference: Sections 1501, 1507, and 1531, Health and Safety Code.

### 80068.5 EVICTION PROCEDURES

80068.5

- (a) Except for children's residential, ADCFs, and ADSCs, 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.
    - (A) 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) A Needs and Services Plan modification must have been performed, as specified in Section 80068.3(a), which determined that the client's needs cannot be met by the facility and the client has been given the opportunity to relocate as specified in Section 80068.3(b).
  - (5) The client refuses to comply with his/her Restricted Health Condition Care Plan, if any, as specified in Section 80092.2.

### 80068.5 EVICTION PROCEDURES

80068.5

(Continued)

- (6) Change of use of the facility.
- (b) The licensee shall obtain prior written approval from the Department to evict the client upon three (3) days written notice to quit and upon a finding of good cause.
  - (1) Good cause exists if the client engages in behavior that threatens the mental and/or physical health or safety of himself/herself or others in the facility.
  - (2) Failure of the Department to reply to the request for approval within two working days shall be considered approval.
- (c) 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.
- (d) 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.
- (e) The licensee shall mail or fax to the Department a copy of the 30-day written notice in accordance with (a) above within five days of giving the notice to the client.
- (f) 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.
- (g) Nothing in this section precludes the licensee or client from invoking any other available remedy.

#### HANDBOOK BEGINS HERE

(1) Such remedies include voluntary relocation, relocation by the client's authorized representative, hospitalization for mental or physical conditions, and arrest.

### HANDBOOK ENDS HERE

NOTE: Authority cited: Section 1530, Health and Safety Code. Reference: Sections 1501, 1502(a)(7), 1507, 1531, and 1770, et seq., Health and Safety Code.

#### 80070 CLIENT RECORDS

- (a) A separate, complete, and current record shall be maintained in the facility for each client.
- (b) Each record must contain information including, but not limited to, the following:
  - (1) Name of client.
  - (2) Birthdate.
  - (3) Sex.
  - (4) Date of admission.
  - (5) Names, addresses, and telephone numbers of the authorized representative.
  - (6) A signed copy of the admission agreement specified in Section 80068.
  - (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, as specified in Section 80069.
  - (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 by Section 80092.2.
  - (12) Functional assessment as specified in Section 80069.2.
  - (13) Mental health assessment specified in Section 80069.3.
  - (14) Date of termination of services.
  - (15) An account of the client's cash resources, personal property, and valuables entrusted as specified in Section 80026.
- (c) All information and records obtained from or regarding clients shall be confidential.
  - (1) The licensee shall be responsible for safeguarding the confidentiality of record contents.
  - (2) Except as specified in (d) below, or as otherwise authorized by law, the licensee and all employees shall not reveal or make available confidential information.

## **80070 CLIENT RECORDS** (Continued)

80070

- (d) All client records shall be subject to reproduction by the licensing agency upon demand during normal business hours.
  - (1) A client's records shall also be open to inspection by the client's authorized representative, if any.
- (e) The information specified in (b)(1)-(b)(15) above must be updated as necessary to ensure the accuracy of the client's record.
- (f) Original or photographic reproduction of all client records shall be retained for at least three years following termination of service to the client.

NOTE: Authority cited: Section 1530, Health and Safety Code. Reference: Sections 1501, 1507, 1528, and 1531, Health and Safety Code.

## 80071 REGISTER OF CLIENTS

80071

- (a) In all licensed facilities, the following shall apply:
  - (1) The licensee shall maintain in the facility a register of all clients. The register shall be immediately available to, and copied for, licensing staff upon request; and must contain current information on the following:
    - (A) Client's name and ambulatory status as specified in Section 80070(b)(1) and (8).
    - (B) Name, address and telephone number of client's attending physician.
    - (C) Authorized representative information as specified in Section 80070(b)(5).
    - (D) Client's restricted health condition(s) specified in Section 80092(b).
      - 1. The licensee may keep a separate client register with this information.
  - (2) The licensee shall keep the register in a central location at the facility.
    - (A) Registers are confidential, as specified in Section 80070(c).

NOTE: Authority cited: Section 1530, Health and Safety Code. Reference: Sections 1507 and 1557.5, Health and Safety Code.

## **80072 PERSONAL RIGHTS** (Continued)

80072

(d) The licensee shall ensure that each client is accorded the personal rights as specified in this section and the applicable sections of Chapters 2 through 7.

## HANDBOOK BEGINS HERE

(A) Section 1512 of the Health and Safety Code provides that:

The policy shall be designed to encourage regular family involvement with the client and shall provide ample opportunities for family participation in activities at the facility.

#### HANDBOOK ENDS HERE

NOTE: Authority cited: Section 1530, Health and Safety Code. Reference: Sections 1501, 1528, and 1531, Health and Safety Code.

### 80073 TELEPHONES

80073

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

NOTE: Authority cited: Section 1530, Health and Safety Code. Reference: Sections 1501, 1528, 1531 and 1539, Health and Safety Code.

## 80074 TRANSPORTATION

80074

- (a) Only drivers licensed for the type of vehicle operated shall be permitted to transport clients.
- (b) The manufacturer's rated seating capacity of the vehicles shall not be exceeded.
- (c) Motor vehicles used to transport clients shall be maintained in a safe operating condition.

NOTE: Authority cited: Section 1530, Health and Safety Code. Reference: Sections 1501, 1528 and 1531, Health and Safety Code.

#### 80075 HEALTH-RELATED SERVICES

80075

### HANDBOOK BEGINS HERE

This section does not apply to child care centers. For regulations governing health-related services in child care centers, see Chapter 2, Section 81075.

### HANDBOOK ENDS HERE

- (a) The licensee shall ensure that each client receives necessary first aid and other needed medical or dental services, including arrangement for and/or provision of transportation to the nearest available services.
- (b) Clients shall be assisted as needed with self-administration of prescription and nonprescription medications.
  - (1) In adult CCFs, facility staff who receive training may assist clients with metered-dose inhalers, and dry powder inhalers if the following requirements are met:
    - (A) In ARFs and SRFs, facility staff must receive training from a licensed professional.
      - 1. The licensee shall obtain written documentation from the licensed professional outlining the procedures and the names of facility staff who have been trained in those procedures.
      - 2. The licensee ensures that the licensed professional reviews staff performance as the licensed professional deems necessary, but at least once a year.
    - (B) In ADCFs and ADSCs, staff may be trained by the client's family or primary caregiver if the following requirements are met:
      - 1. The licensee obtains written documentation from the client's family or primary caregiver outlining the procedures and the names of facility staff whom they have trained in those procedures.
      - 2. The licensee ensures that the client's family or primary caregiver reviews staff performance as necessary, but at least annually.
    - (C) All staff training shall be documented in the facility personnel files.
  - (2) Facility staff, except those authorized by law, shall not administer injections but staff designated by the licensee shall be authorized to assist clients with self-administration of injections as needed.

- (3) 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.
- (4) If the client's physician has stated in writing that the client is able to determine and communicate his/her need for a prescription or nonprescription PRN medication, facility staff shall be permitted to assist the client with self-administration of their PRN medication.
- (5) 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 shall be permitted to assist the client with self-administration, providing all of the following requirements are met:
  - (A) There is a written direction from a physician, on a prescription blank, specifying the name of the client, the name of the medication, all of the information specified in Section 80075(e), instructions regarding a time or circumstance (if any) when it should be discontinued, and an indication of when the physician should be contacted for a medication reevaluation.
  - (B) Once ordered by the physician the medication is given according to the physician's directions.
  - (C) A record of each dose is maintained in the client's record. The record shall include the date and time the PRN medication was taken, the dosage taken, and the client's response.
- (6) If the client is unable to 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:
  - (A) Facility staff shall contact the client's physician prior to each dose, describe the client's symptoms, and receive direction to assist the client in self-administration of that dose of medication.
  - (B) The date and time of each contact with the physician, and the physician's directions, shall be documented and maintained in the client's facility record.
  - (C) The date and time the PRN medication was taken, the dosage taken, and the client's response, shall be documented and maintained in the client's facility record.

- (7) For every prescription and nonprescription PRN medication for which the licensee provides assistance, there shall be a signed, dated written order from a physician on a prescription blank, maintained in the client's file, and a label on the medication. Both the physician's order and the label shall contain at least all of the following information.
  - (A) The specific symptoms which indicate the need for the use of the medication.
  - (B) The exact dosage.
  - (C) The minimum number of hours between doses.
  - (D) The maximum number of doses allowed in each 24-hour period.
- (c) The isolation room or area specified in Section 80087(d) shall be used where separation from others is required.
- (d) There shall be privacy for first aid treatment of minor injuries and for examination or treatment by a physician if required.
- (e) 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:
    - (A) Ensuring that an adequate number of facility staff persons are designated to operate and care for the equipment and that those staff persons receive training.
      - 1. The licensee shall comply with all of the requirements for training in Sections 80075(b)(1)(A) through (C).
  - (2) Ensuring that the following conditions are met if oxygen equipment is in use:
    - (A) The licensee makes a written report to the local fire jurisdiction that oxygen is in use at the facility.
    - (B) "No Smoking Oxygen in Use" signs shall be posted in appropriate areas.
    - (C) Smoking is prohibited where oxygen is in use.
    - (D) All electrical equipment is checked for defects that may cause sparks.
    - (E) Oxygen tanks that are not portable are secured either in a stand or to the wall.

- (F) 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.
- (G) Clients use oxygen from a portable source when they are outside of their rooms or when walking in a day care setting.
- (H) Equipment is operable.
- (I) Facility staff have knowledge and ability to operate and care for the oxygen equipment.
- (J) Equipment is removed from the facility when no longer in use by the client.
- (i) 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.
- (j) 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.
  - (1) The supplies shall include at least the following:
    - (A) A current edition of a first aid manual approved by the American Red Cross, the American Medical Association or a state or federal health agency.
    - (B) Sterile first aid dressings.
    - (C) Bandages or roller bandages.
    - (D) Adhesive tape.
    - (E) Scissors.
    - (F) Tweezers.
    - (G) Thermometers.
    - (H) Antiseptic solution.
- (k) 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:

80075

- (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.

### HANDBOOK BEGINS HERE

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

### HANDBOOK ENDS HERE

- (l) 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.
- (m) 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.
- (n) The following requirements shall apply to medications which are centrally stored:
  - (1) Medication shall be kept in a safe and locked place that is not accessible to persons other than employees responsible for the supervision of the centrally stored medication.
  - (2) Each container shall identify the items specified in (7)(A) through (G) below.
  - (3) All medications shall be labeled and maintained in compliance with label instructions and state and federal laws.
  - (4) No person other than the dispensing pharmacist shall alter a prescription label.

## **FOOD SERVICE** (Continued)

80076

- (B) 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.
- (b) 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.
  - (1) The licensing agency shall specify in writing the written information required from the licensee.

NOTE: Authority cited: Section 1530, Health and Safety Code. Reference: Sections 1501, 1528, 1530, 1530.5 and 1531, Health and Safety Code.

## 80077 PERSONAL SERVICES (RESERVED)

80077

# 80077.2 CARE FOR CLIENTS WHO RELY UPON OTHERS TO PERFORM 80077.2 ALL ACTIVITIES OF DAILY LIVING

- (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) A plan to monitor the client's skin condition, including:

# 80077.2 CARE FOR CLIENTS WHO RELY UPON OTHERS TO PERFORM ALL ACTIVITIES OF DAILY LIVING (Continued)

80077.2

- 1. Specific guidelines for turning the client (time, method, acceptable positions).
- Skin breakdown.
- 3. Objective symptoms, observable by a lay person, indicating when a licensed professional must be contacted.
- (B) A method for feeding the client and providing him/her with hydration.
- (C) A method for determining the client's needs.
- (D) A method for communicating with the client.
- (E) A list of emergency contacts and a list of readily observable conditions that indicate when emergency intervention is necessary.
- (F) 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.
- (G) A description of the client-specific training that facility staff will receive.
  - 1. 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.
  - 2. 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.
  - 3. In an ADCF or ADSC, the training may be provided by the client's primary caregiver, including the client's family or the administrator of the client's residential or health facility providing the primary caregiver has received training as specified in Sections 80077.2(b)(2)(G)1. and 2.
- (H) 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.

# 80077.2 CARE FOR CLIENTS WHO RELY UPON OTHERS TO PERFORM ALL ACTIVITIES OF DAILY LIVING (Continued)

80077.2

- (I) 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.
- (d) Repealed by Manual Letter No. CCL-02-10, effective 9/8/02.

NOTE: Authority cited: Section 1530, Health and Safety Code. Reference: Sections 1501, 1507, and 1530, Health and Safety Code.

## 80077.3 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.

# 80077.3 CARE FOR CLIENTS WHO LACK HAZARD AWARENESS OR IMPULSE CONTROL (Continued)

80077.3

### HANDBOOK BEGINS HERE

Health and Safety Code Section 1531.1 is paraphrased in pertinent part:

- (a) A residential facility licensed as an adult residential facility, group home, small family home, foster family home, or a family home certified by a foster family agency may install and utilize delayed egress devices of the time delay type.
- (b) As used in this section, "delayed egress device" means a device that precludes the use of exits for a predetermined period of time. These devices shall not delay any resident's departure from the facility for longer than 30 seconds.
- (c) Within 30 seconds of delay, facility staff may attempt to redirect a resident who attempts to leave the facility.
- (d) Any person accepted by a residential facility ... utilizing delayed egress devices shall meet all of the following conditions:
  - (1) The person shall have a developmental disability as defined in Section 4512 of the Welfare and Institutions Code.
  - (2) The person shall be receiving services and case management from a Regional Center under the Lanterman Developmental Disabilities Services Act (Division 4.5 (commencing with Section 4500) of the Welfare and Institutions Code).
  - (3) An interdisciplinary team, through the Individual Program Plan (IPP) process pursuant to Section 4646.5 of the Welfare and Institutions Code, shall have determined that the person lacks hazard awareness or impulse control and requires the level of supervision afforded by a facility equipped with delayed egress devices, and that but for this placement, the person would be at risk of admission to, or would have no option but to remain in, a more restrictive state hospital or state developmental center placement.

### HANDBOOK CONTINUES

# 80077.3 CARE FOR CLIENTS WHO LACK HAZARD AWARENESS OR IMPULSE CONTROL (Continued)

80077.3

### HANDBOOK CONTINUES

- (e) The facility shall be subject to all fire and building codes, regulations, and standards applicable to residential care facilities for the elderly utilizing delayed egress devices, and shall receive approval by the county or city fire department, the local fire prevention district, or the State Fire Marshal for the installed delayed egress device.
- (f) The facility shall provide staff training regarding the use and operation of the egress control devices utilized by the facility, protection of residents' personal rights, lack of hazard awareness and impulse control behavior, and emergency evacuation procedures.
- (g) The facility shall develop a plan of operation approved by the State Department of Social Services that includes a description of how the facility is to be equipped with egress control devices that are consistent with regulations adopted by the State Fire Marshal pursuant to Section 13143 of the Health and Safety Code.
- (h) The plan shall include, but shall not be limited to, all of the following:
  - (1) A description of how the facility will provide training for staff regarding the use and operation of the egress control devices utilized by the facility.
  - (2) A description of how the facility will ensure the protection of the residents' personal rights consistent with Sections 4502, 4503, and 4504 of the Welfare and Institutions Code.
  - (3) A description of how the facility will manage the person's lack of hazard awareness and impulse control behavior.
  - (4) A description of the facility's emergency evacuation procedures.
- (i) Delayed egress devices shall not substitute for adequate staff. The capacity of the facility shall not exceed six residents.
- (j) Emergency fire and earthquake drills shall be conducted at least once every three months on each shift, and shall include all facility staff providing resident care and supervision.

## HANDBOOK ENDS HERE

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# 80077.3 CARE FOR CLIENTS WHO LACK HAZARD AWARENESS OR IMPULSE CONTROL (Continued)

80077.3

- (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:
  - (A) The licensee shall notify the Department immediately after determining the date that the device will be installed.
  - (B) The licensee shall ensure that the fire clearance includes approval of delayed egress devices.
  - (C) 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.
  - (D) 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.
  - (E) Clients who continue to indicate a desire to leave the facility following an egress delay shall be permitted to do so.
  - (F) Without violating Section 80072(a)(6), facility staff shall ensure the continued safety of clients when they leave the facility.
  - (G) 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.

NOTE: Authority cited: Section 1530, Health and Safety Code. Reference: Sections 1501, 1507, 1530, 1531, and 1531.1, Health and Safety Code.

#### 80077.4 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.
    - (A) 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.
    - (B) The licensee shall ensure that facility staff responsible for implementing the program receive training from the licensed professional or designee who designed the program.
    - (C) 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.
    - (D) 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.

### **80087 BUILDINGS AND GROUNDS** (Continued)

- (c) All outdoor and indoor passageways, stairways, inclines, ramps, open porches and other areas of potential hazard shall be kept free of obstruction.
- (d) The licensee of an ADCF or ADSC shall provide an isolation room or area for use by ill clients.
- (e) General permanent or portable storage space shall be available for the storage of facility equipment and supplies.
  - (1) Facility equipment and supplies shall be stored in this space and shall not be stored in space used to meet other requirements specified in this chapter and Chapters 2 through 7.
- (f) 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 (inground and above-ground), fixed-in-place wading pools, hot tubs, spas, fish ponds or similar bodies of water through a pool cover or by surrounding the pool with a fence.
  - (1) Fences shall be at least five feet high and shall be constructed so that the fence does not obscure the pool from view. The bottom and sides of the fence shall comply with Division 1, Appendix Chapter 4 of the 1994 Uniform Building Code. In addition to meeting all of the aforementioned requirements for fences, gates shall swing away from the pool, self-close and have a self-latching device located no more than six inches from the top of the gate. Pool covers shall be strong enough to completely support the weight of an adult and shall be placed on the pool and locked while the pool is not in use.
    - (A) If licensed prior to June 1, 1995, facilities with existing pool fencing shall be exempt from the fence requirements specified in Section 80087(f)(1) until such fence is replaced or structurally altered. If the licensee replaces or alters the fence, it shall meet the fence requirements specified in Section 80087(f)(1).
  - (2) Where an above-ground pool structure is used as the fence or where the fence is mounted on top of the pool structure, the pool shall be made inaccessible when not in use by removing or making the ladder inaccessible or erecting a barricade to prevent access to decking. If a barricade is used, the barricade shall meet the requirements of Section 80087(f)(1).

## **80087 BUILDINGS AND GROUNDS** (Continued)

80087

- (g) All in-ground pools, and above-ground pools which cannot be emptied after each use shall have an operative pump and filtering system.
- (h) Disinfectants, cleaning solutions, poisons, firearms and other items that could pose a danger if readily available to clients shall be stored where inaccessible to clients.
  - (1) Storage areas for poisons, and firearms and other dangerous weapons shall be locked.
  - (2) In lieu of locked storage of firearms, the licensee may use trigger locks or remove the firing pin.
    - (A) Firing pins shall be stored and locked separately from firearms.
  - (3) Ammunition shall be stored and locked separately from firearms.
- (i) Medicines shall be stored as specified in Section 80075(m) and (n) and separately from other items specified in Section 80087(h) above.
- (j) The items specified in Section 80087(h) above shall not be stored in food storage areas or in storage areas used by or for clients.

NOTE: Authority cited: Section 1530, Health and Safety Code. Reference: Sections 1501 and 1531, Health and Safety Code.

## **Article 8. INCIDENTAL MEDICAL SERVICES**

### 80090 HEALTH AND SAFETY SERVICES

- (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.
    - (A) Training shall include hands-on instruction in both general procedures and client-specific procedures.
    - (B) The licensee obtains from the licensed professional written documentation outlining the procedures and the names of facility staff who received the training.
    - (C) The licensee ensures that the licensed professional reviews staff performance as the licensed professional deems necessary, but at least once a year.

## GENERAL LICENSING REQUIREMENTS

Regulations

## 80090 HEALTH AND SAFETY SERVICES

(Continued)

80090

(5) The licensee agrees in writing to comply with all aspects of the client's care plans.

NOTE: Authority cited: Section 1530, Health and Safety Code. Reference: Sections 1501, 1507, and 1530, Health and Safety Code.

### 80091 PROHIBITED HEALTH CONDITIONS

80091

- (a) 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.
- (b) Repealed by Manual Letter No. CCL-98-05, effective 10/1/98.

NOTE: Authority cited: Section 1530, Health and Safety Code. Reference: Sections 1501, 1502, 1507, 1530, 1531, and 1557.5, Health and Safety Code.

### 80092 RESTRICTED HEALTH CONDITIONS

80092

### HANDBOOK BEGINS HERE

Section 1502(a) of the Health and Safety Code defines a Community Care Facility (CCF) as providing non-medical residential and day care. Clients who require nursing care and/or monitoring generally may not be in CCFs, though there are exceptions. The exceptions include hospice care in RCFEs, medical care in residential care facilities for the chronically ill (RCF-CIs), and medically fragile children receiving specialized care in Foster Family Homes.

### HANDBOOK ENDS HERE

- (a) Adult CCFs may accept or retain clients who have the conditions listed in this section only if all requirements of Article 8 are met.
- (b) Care for the following health conditions must be provided only as specified in Sections 80092.1 through 80092.11.
  - (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, suppositories only as specified in Section 80092.5.
  - (4) Use of catheters 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.

NOTE: Authority cited: Section 1530, Health and Safety Code. Reference: Sections 1501, 1502, 1507, and 1530, Health and Safety Code.

# 80092.1 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.
    - (A) 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:

# 80092.1 GENERAL REQUIREMENTS FOR RESTRICTED HEALTH CONDITIONS (Continued)

80092.1

- (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.

NOTE: Authority cited: Section 1530, Health and Safety Code. Reference: Sections 1501, 1502, 1507, and 1530, Health and Safety Code.

#### 80092.2 RESTRICTED HEALTH CONDITION CARE PLAN

- (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 licensee of an ADCF or ADSC who chooses to care for a client with a restricted health condition may use a copy of the Restricted Health Care Plan from the client's residential setting providing the information required in Section 80092.2(a)(4), specific to the day program, is added. If the client does not have a Restricted Health Condition Care Plan, ADCF or ADSC must develop a 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:
    - (A) Stability of the medical condition.
    - (B) Medical conditions that require services or procedures.
    - (C) Specific services needed.
    - (D) Client's ability to perform the procedures.
    - (E) 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(s) 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.

# 80092.2 RESTRICTED HEALTH CONDITION CARE PLAN (Continued)

80092.2

(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.

NOTE: Authority cited: Section 1530, Health and Safety Code. Reference: Sections 1501, 1502, 1507, and 1530, Health and Safety Code.

### 80092.3 INHALATION-ASSISTIVE DEVICES

- (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:
    - (A) 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.
    - (B) 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:
    - (A) The device is functional.
    - (B) 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.

#### 80092.3 INHALATION-ASSISTIVE DEVICES

80092.3

(Continued)

(6) The licensee ensures that facility staff have the knowledge of and ability to care for the device.

NOTE: Authority cited: Section 1530, Health and Safety Code. Reference: Sections 1501, 1502, 1507, and 1530, Health and Safety Code.

#### 80092.4 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) A licensed professional provides ostomy care when the client is unable to provide self-care.
    - (B) 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 (k)(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.

NOTE: Authority cited: Section 1530, Health and Safety Code. Reference: Sections 1501, 1502, 1507, and 1530, Health and Safety Code.

### 80092.5 FECAL IMPACTION REMOVAL, ENEMAS, OR SUPPOSITORIES

80092.5

- (a) 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 Section 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.
  - (3) The licensee ensures that a licensed professional administers the fecal impaction removal, the 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.

NOTE: Authority cited: Section 1530, Health and Safety Code. Reference: Sections 1501, 1502, 1507, and 1530, Health and Safety Code.

### 80092.6 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.
    - (A) Irrigation shall only be performed by a licensed professional in accordance with the physician's orders.
    - (B) 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.

## 80092.6 INDWELLING URINARY CATHETER/CATHETER PROCEDURE 80092.6 (Continued)

- (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.

NOTE: Authority cited: Section 1530, Health and Safety Code. Reference: Sections 1501, 1502, 1507, and 1530, Health and Safety Code.

### 80092.7 STAPH OR OTHER SERIOUS, COMMUNICABLE INFECTIONS

- (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.
    - (A) 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.

# 80092.7 STAPH OR OTHER SERIOUS, COMMUNICABLE INFECTIONS (Continued)

80092.7

- (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.

NOTE: Authority cited: Section 1530, Health and Safety Code. Reference: Sections 1501, 1502, 1507 and 1530, Health and Safety Code.

#### 80092.8 INSULIN-DEPENDENT DIABETES

- (a) A licensee of an adult CCF may accept or retain a client who has insulin-dependent diabetes 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 performing his/her own glucose testing and of administering his/her own medication, or a licensed professional administers the tests and injections.
    - (A) The licensed professional may delegate to trained facility staff glucose testing provided all of the following conditions are met:
      - 1. 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.
      - 2. 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).
      - 3. Facility staff comply with the instructions of the licensed professional regarding the performance of the test and the operation of the blood glucosemonitoring instrument.
      - 4. 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.

#### 80092.8 INSULIN-DEPENDENT DIABETES

80092.8

- (Continued)
- (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.

#### HANDBOOK BEGINS HERE

(A) California Code of Regulations, Title 8, Section 5193(d)(2) is paraphrased in pertinent part:

Contaminated needles and other contaminated sharps shall not be bent, recapped or removed. Shearing or breaking of contaminated needles is prohibited.

Immediately or as soon as possible after use, contaminated reusable sharps shall be placed in appropriate containers until properly reprocessed. These containers shall be:

- 1. Puncture resistant;
- 2. Labeled in accordance with this section;
- 3. Leakproof on the sides and bottom; and
- 4. In accordance with the requirements set forth in the California Code of Regulations, Title 8, Section 5193, subsection (d)(4)(B)5, for reusable sharps.

### HANDBOOK ENDS HERE

- (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.
  - (A) In ADCFs and ADSCs where food is provided, the licensee shall provide a modified diet as specified by the client's physician or family or primary caregiver.
- (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.

# **80092.8 INSULIN-DEPENDENT DIABETES** (Continued)

80092.8

- (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.

NOTE: Authority cited: Section 1530, Health and Safety Code. Reference: Sections 1501, 1502, 1507, and 1530, Health and Safety Code.

80092.9 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).
    - (B) In ADCFs and ADSCs, the client's family or primary caregiver may train the day program staff responsible for changing dressings if the requirements in Section 80075(b)(1)(B)1. and 2. are met.

### **80092.9 WOUNDS** (Continued)

80092.9

- (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 and 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.

NOTE: Authority cited: Section 1530, Health and Safety Code. Reference: Sections 1501, 1502, 1507, and 1530, Health and Safety Code.

#### 80092.10 GASTROSTOMY FEEDING, HYDRATION, AND CARE

- (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.
    - (A) 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):
      - 1. Gastrostomy feeding, hydration, and stoma cleaning.
      - 2. For routine medications, trained staff may add medication through the gastrostomy per physician's or nurse practitioner's orders.

# 80092.10 GASTROSTOMY FEEDING, HYDRATION, AND CARE (Continued)

80092.10

3. For PRN medications, trained staff may add medications through the gastrostomy in accordance with Sections 80075(b) through (e).

NOTE: Authority cited: Section 1530, Health and Safety Code. Reference: Sections 1501, 1502, 1507, and 1530, Health and Safety Code.

### 80092.11 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).
      - 1. 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.

NOTE: Authority cited: Section 1530, Health and Safety Code. Reference: Sections 1501, 1502, 1507, and 1530, Health and Safety Code.

# 80094.5 CLIENT'S REQUEST FOR REVIEW OF A HEALTH CONDITION 80094.5 RELOCATION ORDER BY THE INTERDISCIPLINARY TEAM (IDT)

- (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.
- (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.
  - (1) 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 receipt 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.
  - (1) If the information is not received within twenty (20) days, the request for review will be considered withdrawn, the licensee will 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.

# 80094.5 CLIENT'S REQUEST FOR REVIEW OF A HEALTH CONDITION RELOCATION ORDER BY THE INTERDISCIPLINARY TEAM (IDT) (Continued)

80094.5

- (2) Current health and functional capabilities assessments, as specified in Sections 80069 and 80069.2.
  - (A) 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 IDTs 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.

NOTE: Authority cited: Section 1530, Health and Safety Code. Reference: Sections 1507, 1530, and 1556, Health and Safety Code.

# 80095 CLIENTS IN CARE AT TIME OF FINAL ADOPTION OF REGULATIONS

80095

Repealed by Manual Letter No. CCL-02-10, effective 9/8/02.

NOTE: Authority cited: Section 1530, Health and Safety Code. Reference: Sections 1501, 1507, and 1531, Health and Safety Code.