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TITLE 22, DIVISION 6

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This Users' Manual is issued as an operational tool.

This Manual contains:

a) Regulations adopted by the Department of Social Services (DSS) for the governance of its agents, licensees, and/or beneficiaries

b) Regulations adopted by other State Departments affecting DSS programs

c) Statutes from appropriate Codes which govern DSS programs

d) Court decisions; and

e) Operational standards by which DSS staff will evaluate performance within DSS programs.

Regulations of DSS are printed in gothic type as is this sentence.

Handbook material, which includes reprinted statutory material, other department's regulations and examples, is separated from the regulations by double lines and the phrases "HANDBOOK BEGINS HERE", "HANDBOOK CONTINUES", and "HANDBOOK ENDS HERE" in bold print. Please note that both other departments' regulations and statutes are mandatory, not optional.

Please note revised language is identified by a vertical line in the left margin.

Questions relative to this Users' Manual should be directed to your usual program policy office.
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CHAPTER 2. SOCIAL REHABILITATION FACILITIES

Article 1. GENERAL REQUIREMENTS AND DEFINITIONS

81000 GENERAL

(a) Social rehabilitation facilities, as defined in Section 81001(s)(4), shall be governed by the provisions specified in this chapter.

(b) In addition to Section 81000(a) above, social rehabilitation facilities shall be governed by those provisions specified in Title 9 (Rehabilitative and Developmental Services), Division 1 (Department of Mental Health), Chapter 3, Article 3.5, Sections 531 through 535 of the California Code of Regulations.

(c) The licensee shall ensure compliance with all applicable law and regulation.


81001 DEFINITIONS

For the purposes of this chapter, the following definitions shall apply:

(a) (1) "Activities of Daily Living" (ADLs) mean the following six activities:

   (A) Bathing: Cleaning the body using a tub, shower or sponge bath, including getting a basin of water, managing faucets, getting in and out of the tub or shower, reaching head and body parts for soaping, rinsing and drying.

   (B) Dressing: Putting on and taking off, fastening and unfastening garments and undergarments and special devices such as back or leg braces, corsets, elastic stockings/garments and artificial limbs or splints.

   (C) Toileting: Getting on and off a toilet or commode, emptying a commode, managing clothes, wiping and cleaning the body after toileting, and using and emptying a bedpan and urinal.

   (D) Transferring: Moving from one sitting or lying position to another sitting or lying position (e.g., moving from a bed to a wheelchair or sofa, coming to a standing position, and/or repositioning to promote circulation and prevent skin breakdown).
(E) Continence: Ability to control bowel and bladder as well as to use ostomy and/or catheter receptacles, and to apply diapers and disposable barrier pads.

(F) Eating: Reaching for, picking up, grasping a utensil and cup; getting food on a utensil; bringing food, utensil, and cup to mouth; manipulating food on plate; and cleaning face and hands as necessary following meal.

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See also the definition of "Client Who Relies Upon Others to Perform All Activities of Daily Living" in Section 81001(c)(7).

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(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.

(3) "Admit" means to accept a person into care. For the purposes of a social rehabilitation facility, a person is considered to be "admitted" as a client when the person begins residing at the facility and the facility begins providing care and supervision to the person.

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

(5) "Applicant" means any individual, firm, partnership, association, corporation, county, city, public agency or other government entity that has made application for a social rehabilitation facility license, an administrator certificate, or a special permit.

(6) "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 conservator or public placement agency.

(7) "Automated External Defibrillator" (AED) means a lightweight, 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.

(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 social rehabilitation 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.

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

(3) "Care and Supervision" means any one or more of the following activities provided by a person or facility to meet the needs of clients:

(A) Assistance in dressing, grooming, bathing and other personal hygiene.

(B) Assistance with taking medication, as specified in Section 81075.

(C) Central storing and/or distribution of medications, as specified in Section 81075.

(D) Arrangement of and assistance with medical and dental care.

(E) Maintenance of house rules for the protection of clients.

(F) Supervision of client schedules and activities.

(G) Maintenance and/or supervision of client cash resources or property.

(H) Monitoring food intake or special diets.

(I) Providing basic services as defined in Section 81001(b)(2).

(4) "Cash Resources" means:

(A) Monetary gifts.

(B) Tax credits and/or refunds.

(C) Earnings from employment or workshops.

(D) Personal and incidental need allowances from funding sources including, but not limited to, SSI/SSP.

(E) Any other similar resources as determined by the licensing agency.
(5) "Certified" means a social rehabilitation facility program that has been certified by the California Department of Health Care Services as meeting the standards established for that program.

(6) "Client" means an adult who is receiving care and supervision in a social rehabilitation facility. Client includes "resident" as used in the California Community Care Facilities Act (Health and Safety Code section 1500 et seq.).

(7) "Client Who Relies upon Others to Perform All Activities of Daily Living" means a client who is unable to perform all of the activities of daily living specified in Section 81001(a)(1) without physical assistance.

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

(9) "Community Care Facility" (CCF) means any facility, place or building where nonmedical care and supervision, as defined in Section 81001(c)(3), are provided.

(10) "Completed Application" means:

   (A) The applicant has submitted and the licensing agency has received all required materials including: an approved fire clearance, if appropriate, from the State Fire Marshall; a criminal record clearance on the applicant and any other individuals specified in Section 81019.

   (B) The licensing agency has completed a site visit to the facility.

(11) "Conservator" means a person appointed by the Superior Court, pursuant to the provisions of Section 1800 et seq. of the Probate Code or Section 5350 of the Welfare and Institutions Code, to care for the person, or the estate, or the person and the estate, of another.

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**HANDBOOK BEGINS HERE**

Probate Code section 1801 provides in pertinent part:

(a) A conservator of the person may be appointed for a person who is unable to provide properly for his or her personal needs for physical health, food, clothing, or shelter...

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**HANDBOOK CONTINUES**
(b) A conservator of the estate may be appointed for a person who is substantially unable to manage his or her own financial resources or resist fraud or undue influence...

(c) A conservator of the person and estate may be appointed for a person described in subdivisions (a) and (b).

(d) A limited conservator of the person or of the estate, or both, may be appointed for developmentally disabled adult. A limited conservatorship may be utilized only as necessary to promote and protect the well-being of the individual, shall be designed to encourage the development of maximum self-reliance and independence of the individual, and shall be ordered only to the extent necessitated by the individual's proven mental and adaptive limitations. The conservatee of the limited conservator shall not be presumed to be incompetent and shall retain all legal and civil rights except those which by court order have been designated as legal disabilities and have been specifically granted to the limited conservator...

Welfare and Institutions Code section 5350 provides in pertinent part:

A conservator of the person, of the estate, or of the person and the estate may be appointed for any person who is gravely disabled as a result of mental disorder or impairment by chronic alcoholism.

The procedure for establishing, administering, and terminating a conservatorship under this chapter shall be the same as that provided in Division 4 (commencing with Section 1400) of the Probate Code...

(12) “Consultant” means a person professionally qualified by training or experience to provide expert information on a particular subject.

(13) "Control of Property" means the right to enter, occupy, and maintain the operation of the facility property within regulatory requirements. Evidence of control of property may include, but is not limited to, the following:

(A) a Grant Deed showing ownership; or

(B) the lease agreement or rental agreement; or
81001 DEFINITIONS (Continued) 81001

(C) a court order or similar document that shows the authority to control the property pending outcome of a probate proceeding or an estate settlement.

(14) "Conviction" means:

(A) A criminal conviction in California; or

(B) Any criminal conviction of another state, federal, military or other jurisdiction, which if committed or attempted in California, would have been punishable as a crime in California.

(15) "Criminal Record Clearance" means an individual has a California clearance and a Federal Bureau of Investigation (FBI) clearance.

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

(2) "Deficiency" means any failure to comply with any provision of the Community Care Facilities Act (Health and Safety Code section 1500 et seq.) and/or regulations adopted by the Department pursuant to the Act.

(3) "Dementia" means a deterioration of intellectual function and other cognitive skills, leading to a decline in one's ability to perform activities of daily living.

(4) "Department" means the California Department of Social Services, as defined in Health and Safety Code section 1502(b).

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

HANDBOOK BEGINS HERE

Welfare and Institutions Code section 4512(a) provides in pertinent part:

"Developmental disability" means a disability that originates before an individual attains age 18 years, continues, or can be expected to continue, indefinitely and constitutes a substantial disability for that individual.

...this term shall include intellectual disability, cerebral palsy, epilepsy, and autism. This term shall also include disabling conditions found to be closely related to intellectual disability or to require treatment similar to that required for individuals with an intellectual 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.

HANDBOOK ENDS HERE
81001 DEFINITIONS (Continued)

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

(7) "Director" means the director of the California Department of Social Services, as defined in Health and Safety Code section 1502(c).

(8) "Direct-Care Staff" means those persons who deliver direct care and supervision to the clients.

(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.

(2) "Elderly Person" means any person who is 60 years of age or older.

(3) "Emergency Approval to Operate" - LIC 9117 (8/14) (EAO), means a temporary approval to operate a facility for no more than 60 days pending the Department's decision to either approve or deny a provisional license.

(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.

(5) "Evict" or "eviction" means an involuntary relocation or removal of a client from the facility by the licensee.

(6) "Evidence of Licensee's Death" shall include, but not be 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 the coroner's office verifying the licensee's death.

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

(8) "Exemption" means an exception to the requirements of Health and Safety Code section 1522 and applicable regulations. Exemptions are not transferable.
Health and Safety Code section 1522(g) reads in pertinent part:

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

(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) "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 of 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 the client has a prohibited health condition, as specified in Section 81091.

(i) (1) "Inhalation-Assistive Device" means any equipment that assists a client to breathe, 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.

Metered-dose inhalers and dry-powder inhalers are not inhalation-assistive devices.
(2) "Interdisciplinary Team" (IDT) means a team that assists the Department in evaluating the need for relocating a client 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.

(j) (Reserved)

(k) (Reserved)

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

(2) "Licensed Professional" means a person who is licensed in California to provide medical care or therapy. This includes a physician and surgeon, physician assistant, nurse practitioner, registered nurse, licensed vocational nurse, psychiatric technician, physical therapist, occupational therapist and respiratory therapist who is operating within his or her scope of practice.

(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 social rehabilitation facility.

(4) "Licensing Agency" means the California Department of Social Services or any state, county or other public agency authorized by the Department to assume specified licensing responsibilities pursuant to Section 1511 of the Health and Safety Code.

(5) "Long-Term Residential Treatment Program" means a program as defined in Welfare and Institutions Code, section 5671(b).

HANDBOOK BEGINS HERE

Welfare and Institutions Code section 5671(b) provides:

A long-term residential treatment program, with a full day treatment component as a part of the program, for persons who may require intensive support for as long as two or three years. This program should be designed to provide a rehabilitation program for the so-called "chronic" patient who needs long-term support in order to develop independent living skills.

HANDBOOK CONTINUES
The clients in this program should be those who would otherwise be living marginally in the community with little or no service support, and who would return many times to the hospital for treatment. It should also serve those who are referred to, and maintained in, state hospitals or nursing homes because they require long-term, intensive support. This program should go beyond maintenance to provide an active rehabilitation focus for these individuals.

The services in this program should include, but not be limited to, intensive diagnostic work, including learning disability assessment, full day treatment program with an active prevocational and vocational component, special education services, outreach to develop linkages with the general social service system, and counseling to aid clients in developing the skills to move toward a less structured setting.

"Mandated Reporter" is defined in Welfare and Institutions Code Section 15630(a).

Any person who has assumed full or intermittent responsibility for the care or custody of an elder or dependent adult, whether or not he or she receives compensation, including administrators, supervisors, and any licensed staff of a public or private facility that provides care or services for elder or dependent adults, or any elder or dependent adult care custodian, health practitioner, clergy member, or employee of a county adult protective services agency or a local law enforcement agency, is a mandated reporter.

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

"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 that renders a person eligible for the services enumerated under the Lanterman-Petris-Short Act, commencing with Section 5000 of the Welfare and Institutions Code.
81001  DEFINITIONS (Continued)

(4) "Mental Illness" means the mental condition of any adult who has been evaluated and referred for treatment for a mental disorder, as defined in Section 81001(m)(2).

(n) (1) "Needs and Services Plan" means a time-limited, goal-oriented written plan which identifies the specific needs of an individual client, including the items specified in Section 81068.2, and delineates those services necessary to meet the client's needs.

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

(A) A person who uses postural supports as specified in Section 81072(a)(8) is deemed nonambulatory.

(B) A person is not deemed nonambulatory solely because they are deaf, blind, or prefers to use a mechanical aid.

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Health and Safety Code section 13131 provides:

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

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(o) (1) "On-Call Staff" means a staff person who is not on duty on the facility premises, but who can be contacted by the facility if an additional staff person is needed, and can be at the facility and on duty within 30 minutes.

(p) (1) "Physician" means a person licensed as a physician and surgeon by the California Board of Medical Examiners or the California Board of Osteopathic Examiners.
(2) "Placement agency" is defined in Health and Safety Code sections 1536.1 and 1569.47(a).

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Health and Safety Code section 1536.1 provides in pertinent part:

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

Health and Safety Code section 1569.47(a) provides in pertinent part:

"Placement agency" means any county welfare department, county social service department, county mental health department, county public guardian, general acute care hospital discharge planner or coordinator, state-funded program or private agency providing placement or referral services, conservator pursuant to Part 3 (commencing with Section 1800) of Division 4 of the Probate Code, conservator pursuant to Chapter 3 (commencing with Section 5350) of Part 1 of Division 5 of the Welfare and Institutions Code, and regional center for persons with developmental disabilities which is engaged in finding homes or other places for the placement of elderly persons for temporary or permanent care.

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

(4) "Program Director" means the person who has been designated the authority and the responsibility by the licensee to oversee and carry out the overall treatment program and management of the facility.

(5) "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.

(6) "Provisional License" means a license that 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 81030.
81001  DEFINITIONS (Continued)

(q)  (Reserved)

(r)  (1)  "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.

(2)  "Relative" means spouse, parent, stepparent, son, daughter, brother, sister, stepbrother, stepsister, half-brother, half-sister, uncle, aunt, nephew, niece, 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 or the domestic partnership has been terminated by death or dissolution.

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Family Code section 297.5 provides in pertinent part:

(a) Registered domestic partners shall have the same rights, protections, and benefits, and shall be subject to the same responsibilities, obligations, and duties under law, whether they derive from statutes, administrative regulations, court rules, government policies, common law, or any other provisions or sources of law, as are granted to and imposed upon spouses.

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(3)  "Responsible person" means that individual or individuals, including a relative, health care surrogate decision maker, or placement agency, who assists a 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.

| (s)  (1)  "Serious Bodily Injury" is defined in Welfare and Institutions Code Section 15610.67.

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Welfare and Institutions Code Section 15610.67 provides:

"Serious bodily injury" means an injury involving extreme physical pain, substantial risk of death, or protracted loss or impairment of function of a bodily member, organ, or of mental faculty, or requiring medical intervention, including, but not limited to, hospitalization, surgery, or physical rehabilitation.

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(2)  "Serious Deficiency" means any deficiency that presents an immediate or substantial threat to the physical health, mental health or safety of the clients of a community care facility.
(3) "Short-Term Crisis Residential Program" means a program type as defined in Welfare and Institutions Code, section 5671(a).

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Welfare and Institutions Code section 5671(a) provides in pertinent part:

A program for a short-term crisis residential alternative to hospitalization for individuals experiencing an acute episode or crisis requiring temporary removal from their home environment. The program should be available for admissions 24 hours a day, seven days a week. The primary focus of this program should be on reduction of the crisis, on stabilization, and on a diagnostic assessment of the person's existing support system, including recommendations for referrals upon discharge.

The services in the program should include, but not be limited to, provision for direct family work, connections to prevocational and vocational programs, and development of a support system, including income and treatment referrals. This program should be designed for persons who would otherwise be referred to an inpatient unit, either locally or in the state hospital. This program should place emphasis on stabilization and appropriate referral for further treatment or support services, or both.

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(4) "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.

(5) "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.

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

(7) "Supplemental Security Income/State Supplemental Program" (SSI/SSP) is a federal/state program that provides financial assistance to aged, blind and/or disabled residents of California.

(8) "Substantiated Complaint" means a complaint that has been investigated by the licensing agency and, as a result, a violation of regulations or statute has been found.
81001 DEFINITIONS (Continued) 81001

(t) (1) "Transfer Trauma" means the consequences of the stress and emotional shock caused by an abrupt, involuntary relocation of a client or resident from one facility to another.

(2) "Transitional Residential Program" means a program type as defined in Welfare and Institutions Code section 5671(c).

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Welfare and Institutions Code section 5671(c) provides:

A transitional residential program designed for persons who are able to take part in programs in the general community, but who, without the support of counseling, as well as the therapeutic community, would be at risk of returning to the hospital. This program may employ a variety of staffing patterns and should be for persons who may be expected to move toward a more independent living setting within approximately three months to one year. The clients should be expected to play a major role in the functioning of the household, and shall be encouraged to accept increasing levels of responsibility, both in the residential community, and in the community as a whole. Residents should be required to be involved in daytime activities outside of the house which are relevant to their personal goals and conducive to their achieving more self-sufficiency.

The services in this program should include, but are not limited to, counseling and ongoing assessment, development of support systems in the community, a day program which encourages interaction between clients and the community-at-large, and an activity program that encourages socialization and utilization of general community resources.

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(3) "Treatment Program" means the services that are to be provided to the clients and are specific to the program type(s) certified by the California Department of Health Care Services.

(4) "Treatment/Rehabilitation Plan" means a plan as defined in California Code of Regulations, Title 9, Division 1, Chapter 3, Article 3.5, Section 532.2(c), as specified in Section 81068.2(b)(3).
"Universal Precautions," means an approach to infection control that treats all human blood and body fluids as if they are infectious. Generally, Universal Precautions consist of regular hand-washing after coming into contact with another person's body fluids (mucous, saliva, urine, etc.) and includes the use of gloves when handling blood or body fluids that contain blood. Specifically, Universal Precautions consist of the following four basic infection control guidelines:

(A) Hand-washing - Staff should wash their hands:
   1. After assisting with incontinent care or wiping a client's nose.
   2. Before preparing or eating foods.
   3. After using the toilet.
   4. Before and after treating or bandaging a cut.
   5. After wiping down surfaces, cleaning spills, or any other housekeeping.
   6. After being in contact with any body fluids from another person.
   7. Even if they wore gloves during contact with body fluids.

(B) Gloves - Staff should always wear gloves:
   1. When they come into contact with blood or body fluids that contain blood.
   2. When they have cuts or scratches on their hands.
   3. When assisting with incontinent care or when cleaning up urine, stool, or vomit.
   4. When administering first aid for a cut, a bleeding wound, or a bloody nose.
   5. 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.
81001  DEFINITIONS (Continued)  81001

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

1. On all surfaces and in the client's room and on an "as needed" basis on any surface that has come into contact with blood.

2. Such as a basic bleach solution, made fresh daily by mixing:

   a. 1/4 cup household liquid chlorine bleach in one gallon of tap water, or one tablespoon bleach in one quart of water.

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

1. Placing it in a plastic trash bag, tying it with a secure tie, and disposing of it out of reach of clients and children.

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

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Health and Safety Code section 1503.5 provides in pertinent part

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

(1) The facility is providing care or supervision, as defined by this chapter or the rules and regulations adopted pursuant to this chapter.

(2) The facility is held out as or represented as providing care or supervision, as defined by this chapter or the rules and regulations adopted pursuant to this chapter.

(3) The facility accepts or retains residents who demonstrate the need for care or supervision, as defined by this chapter or the rules and regulations adopted pursuant to this chapter.

(4) The facility represents itself as a licensed community care facility…

HANDBOOK ENDS HERE
DEFINITIONS (Continued)

(A) A facility that is providing "care and supervision," as defined in Section 81001(c)(3), includes, but is not limited to, one in which an individual has been placed by a placement agency or family members for temporary or permanent care.

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

1. A facility whose license has been revoked or denied, but the individual continues to provide care for the same or different clients with similar needs.
2. A facility where a change of ownership has occurred and the same clients are retained.
3. A licensed facility that moves to a new location.
4. A facility that advertises as providing care and/or supervision.

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

1. A facility with residents requiring care and/or supervision, even though the facility is providing board and room only, or board only, or room only.
2. A facility where it is apparent that care and/or supervision are being provided by virtue of the client's needs being met.

(3) "Urgent Need" means a situation where prohibiting the operation of the facility would be detrimental to a client's physical health, mental health, safety, or welfare. Circumstances constituting urgent need include, but are not limited to, the following:

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

(B) A change of facility ownership when clients are in need of services from a new operator.

(v) (Reserved)

(w) (1) "Waiver" means a nontransferable written authorization issued by the licensing agency to use alternative means which meet the intent of a specific regulation and that are based on a facility-wide need or circumstance.
81001 DEFINITIONS (Continued)

(x) (Reserved)

(y) (Reserved)

(z) (Reserved)

NOTE: Authority Cited: Sections 1502, 1522.41(j), 1524(e), 1530 and 1530.9, Health and Safety Code. Reference: Sections 4512, 5350, 5670, 5671, 11006.9 and 15610.67, Welfare and Institutions Code; Sections 1501, 1502, 1502(a)(7), 1502(a)(8), 1502(b), 1502.5, 1503, 1503.5, 1505, 1507, 1508 1509, 1520, 1522, 1524(e), 1525, 1525.5, 1526, 1530, 1531, 1533, 1534, 1536.1, 1537, 1538.5, 1550, 1551, 1556, 1797.196 and 13131, Health and Safety Code; Section 297.5, Family Code; Section 1811, Probate Code; 29 CFR 1910.1030.
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Article 2. LICENSING

81005  LICENSE REQUIRED

(a) Unless a facility is exempt from licensure as specified in Section 81007, no adult, firm, partnership, association, corporation, county, city, public agency or other governmental entity shall operate, establish, manage, conduct or maintain a social rehabilitation facility, or hold out, advertise or represent itself by any means as doing so, without first obtaining a current valid license from the licensing agency.


81006  OPERATION WITHOUT A LICENSE

(a) An unlicensed community care facility is providing care and supervision as defined in Section 81001(u)(2), the facility is in violation of Health and Safety Code section(s) 1503.5 and/or 1508 unless exempted from licensure pursuant to California Code of Regulations section 81007.

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

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Health and Safety Code section 1538 provides in pertinent part:

(c) 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 of the community care facility . . . 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.

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(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 81058 and Health and Safety Code section 1547.

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Health and Safety Code section 1547 provides in pertinent part:

(a) Notwithstanding any other provision of this chapter, any person who violates Section 1503.5 or 1508, or both, may be assessed by the department an immediate civil penalty in the amount of two hundred dollars ($200) per day of the violation.

(b) The civil penalty authorized in subdivision (a) shall be imposed if an unlicensed facility is operated and the operator refuses to seek licensure or the operator seeks licensure and the licensure application is denied and the operator continues to operate the unlicensed facility, unless other remedies available to the department, including criminal prosecution, are deemed more effective by the department.

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(e) Sections 81006(c) and (d) shall be applied pursuant to Section 1549 of the Health and Safety Code.

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Health and Safety Code section 1549 provides:

The civil, criminal, and administrative remedies available to the department pursuant to this article are not exclusive, and may be sought and employed in any combination deemed advisable by the department to enforce this chapter.

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(f) The licensing agency shall notify the appropriate placement or protective service agency if either of the following conditions exists:

(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.

(a) The social rehabilitation 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 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 the church or denomination.

(4) 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 81001(c)(3).

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

(6) 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 10 hours per week.

   (A) 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.

(7) 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:

   (A) The care and supervision is provided in a home or residence chosen by the recipient, regardless of who owns the home or residence.

   (B) 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.

   (C) The arrangement occurs and continues only as long as the needs for care and supervision of the recipient are being adequately met.

(8) Any supported living arrangement for individuals with developmental disabilities as defined in Section 1505(m) of the Health and Safety code.
Health and Safety Code section 1505 provides in pertinent part:

This chapter does not apply to any of the following:…

(m) Any supported living arrangement for individuals with developmental disabilities, as defined in Section 4689 of the Welfare and Institutions Code.

Health and Safety Code section 1505(n) provides in pertinent part:

(1) Any family home agency, family home, or family teaching home as defined in Section 4689.1 of the Welfare and Institutions Code, that is vendored by the State Department of Developmental Services and that does any of the following:

(A) As a family home approved by a family home agency, provides 24-hour care for one or two adults with developmental disabilities in the residence of the family home provider or providers and the family home provider or providers' family, and the provider is not licensed by the State Department of Social Services or the State Department of Public Health or certified by a licensee of the State Department of Social Services or the State Department of Public Health.

(B) As a family teaching home approved by a family home agency, provides 24-hour care for a maximum of three adults with developmental disabilities in independent residences, whether contiguous or attached, and the provider is not licensed by the State Department of Social Services or the State Department of Public Health or certified by a licensee of the State Department of Social Services or the State Department of Public Health.

(C) As a family home agency, engages in recruiting, approving, and providing support to family homes...
(10) 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.

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

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Health and Safety Code section 1505(p) provides:

(1)(A) Any housing occupied by elderly or disabled persons, or both, that is initially approved and operated under a regulatory agreement pursuant to Section 202 of Public Law 86-372 (12 U.S.C. Sec. 1701q), or Section 811 of Public Law 101-625 (42 U.S.C. Sec. 8013), or whose mortgage is insured pursuant to Section 236 of Public Law 90-448 (12 U.S.C. Sec. 1715z), or that receives mortgage assistance pursuant to Section 221d (3) of Public Law 87-70 (12 U.S.C. Sec. 1715l), where supportive services are made available to residents at their option, as long as the project owner or operator does not contract for or provide the supportive services.

(B) Any housing that qualifies for a low-income housing credit pursuant to Section 252 of Public Law 99-514 (26 U.S.C. Sec. 42) or that is subject to the requirements for rental dwellings for low-income families pursuant to Section 8 of Public Law 93-383 (42 U.S.C. Sec. 1437f), and that is occupied by elderly or disabled persons, or both, where supportive services are made available to residents at their option, as long as the project owner or operator does not contract for or provide the supportive services.

(2) The project owner or operator to which paragraph (1) applies may coordinate, or help residents gain access to, the supportive services, either directly, or through a service coordinator.

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(12) The Department.

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

81008  LICENSING OF INTEGRAL FACILITIES  81008

(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.


81009  POSTING OF LICENSE  81009

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


81010  LIMITATIONS ON CAPACITY AND AMBULATORY STATUS  81010

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

(b) A facility or room approved for ambulatory clients only shall not be used by nonambulatory clients.

(1) A client whose condition becomes nonambulatory shall not use rooms or areas restricted to ambulatory clients.

(2) The licensing agency shall have the authority to require clients who use ambulatory sections of the facility to demonstrate that they are ambulatory.

(c) The total capacity of all program types certified for one facility shall not exceed the total licensed capacity of the facility.
 Limitations on Capacity and Ambulatory Status

(d) The total licensed capacity of a social rehabilitation facility shall not exceed 16, and shall be in compliance with Welfare and Institutions Code section 5670.5 and California Code of Regulations, Title 9, Sections 1840.332(b) and 1840.334(c).

Welfare and Institutions Code section 5670.5 provides in pertinent part:

Criteria for community residential treatment system programs are as follows:

(a) Facilities:

(1) Settings, whether residential or day, should be as close to a normal home environment as possible without sacrificing client safety or care.

(2) Residential treatment centers should be relatively small, preferably 15 beds or less, but in any case with the appearance of a noninstitutional setting.

(3) The individual elements of the system should, where possible, be in separate facilities, and not part of one large facility attempting to serve an entire range of clients…

California Code of Regulations, Title 9, Division 1, Chapter 11, Subchapter 4 provides in pertinent part:

1840.332. Adult Residential Treatment Services Contact and Site Requirements.

(b) Programs that provide Adult Residential Treatment Services must be certified as a Social Rehabilitation Program by the Department as either a Transitional Residential Treatment Program or a Long Term Residential Treatment Program in accordance with Chapter 3, Division 1, of Title 9. Facility capacity must be limited to a maximum of 16 beds.

1840.334. Crisis Residential Treatment Services Contact and Site Requirements.

(c) Programs providing Crisis Residential Treatment Services shall be certified as a Social Rehabilitation Program (Short-Term Crisis Residential Treatment Program) by the Department in accordance with Chapter 3, Division 1, of Title 9. Facility capacity shall be limited to a maximum of 16 beds.

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### 81010 LIMITATIONS ON CAPACITY AND AMBULATORY STATUS

(Continued)

(e) A facility licensed as an Adult Residential Facility prior to the effective date of these regulations shall be allowed to apply for a Social Rehabilitation Facility license, at the same location, with a capacity equal to or less than that for which the facility is currently licensed, provided it is in compliance with 81010(d) above.


### 81011 ADVERTISEMENTS AND LICENSE NUMBER

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

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Health and Safety Code section 1514 provides:

(a) Each residential care facility licensed under this chapter shall reveal its license number in all advertisements, publications, or announcements made with the intent to attract clients or residents.

(b) Advertisements, publications, or announcements subject to the requirements of subdivision (a) shall include, but are not limited to, those contained in the following:

1. Newspaper or magazine.
2. Consumer report.
3. Announcement of intent to commence business.
4. Telephone directory yellow pages.
5. Professional or service directory.
6. Radio or television commercial.

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(b) Correspondence shall be considered a form of advertisement if the intent is to attract clients.
Regulations

SOCIAL REHABILITATION FACILITIES

81011 ADVERTISEMENTS AND LICENSE NUMBER (Continued)

(c) Licensees that operate more than one facility and use a common advertisement for these facilities shall be required to list each facility license number in accordance with Health and Safety Code section 1514.


81012 FALSE CLAIMS

(a) No licensee, officer, or employee of a licensee shall make or disseminate any false or misleading statement regarding the facility or any of the services provided by the facility.

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

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