September 26, 2002

Regulation Package #0401-07

CDSS MANUAL LETTER NO. CCL-02-08

TO: HOLDERS OF THE COMMUNITY CARE LICENSING MANUAL, TITLE 22, DIVISION 6, CHAPTER 8, RESIDENTIAL CARE FACILITIES FOR THE ELDERLY

Regulation Package #0401-07 Effective 8/22/02

Sections 87101, 87107, 87114, 87118, 87222, 87227.1, 87561, 87583.1, 87585, 87587, 87700, and 87702

This manual letter has been posted on the Office of Regulations Development website at http://www.dss.ca.gov/ord/Residentia_635.htm.

These regulations ensure consistency with the provisions of Residential Care Facilities for the Chronically Ill (RCF-CI) regulations, Section 87800 et seq.; apply the provisions of Health and Safety Code Sections 1569.145(f)(1) and 1569.145(h); specify that the requirements that an adult with control of the property and proper designation must complete to establish licensure; clarify: the steps that must transpire when a licensee dies; identify the provisions of Health and Safety Code Section 1569.193 that an adult must comply with to establish licensure when a licensee dies; ensure that all licensed facilities shall receive persons on a nondiscriminatory basis according equal treatment and services without regard to race, color, religion, national origin, actual or perceived sexual orientation or ancestry; require the referring agency or facility, or its designee, as defined by Section 87114(b)(2)(A), to provide to the administrator of an RCFE all information in its possession concerning any history of dangerous propensity of the client prior to placement in the RCFE; require the referring agency or facility, or its designee to provide to the administrator of an RCFE all information in its possession concerning any history of dangerous propensity of the client prior to placement in the RCFE; requires the establishment of a theft and loss prevention program and detailed procedures to investigate occurrences of theft and loss; requires all licensed facilities to report the death of any resident from any cause regardless of where the death occurred including, but not limited to, a day program, a hospital, en route to or from a hospital, or visiting away from the facility; establishes a process for resident participation in decisionmaking; establishes the process for preparing a written record of the care the resident will receive in the facility, and the resident's preferences regarding the services provided at the facility; provides that licensees who employ or permit health care practitioners to provide care to residents shall post a visible notice disclose their name and license status on a name tag in at least 18-point type while working in this facility; requires health care practitioners to disclose their name and license status on a name tag while working in the facility; and clarifies that an RCFE may provide incidental medical care to its residents through a home health agency HHA when the licensee meets specified conditions mandated by Health and Safety Code Section 1569.725.

These regulations were adopted on August 22, 2002 and were considered at the Department's public hearing held on March 13, 2002.
**FILING INSTRUCTIONS**

*Revisions to all manuals are shown in graphic screen.* The attached pages are to be entered in your copy of the Manual of Policies and Procedures. The latest prior manual letter containing Community Care Licensing changes was Manual Letter No. CCL-02-07. The latest prior manual letter containing Residential Care Facilities for the Elderly regulation changes was Manual Letter No. CCL-02-02.

<table>
<thead>
<tr>
<th>Page(s)</th>
<th>Replace(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 through 4</td>
<td>Pages 1 through 4</td>
</tr>
<tr>
<td>13 through 15.1</td>
<td>Pages 13 through 15.1</td>
</tr>
<tr>
<td>18 through 19.1</td>
<td>Pages 18 and 19</td>
</tr>
<tr>
<td>21 through 28</td>
<td>Pages 21 through 28</td>
</tr>
<tr>
<td>43 and 44</td>
<td>Pages 43 and 44</td>
</tr>
<tr>
<td>51.1 through 53</td>
<td>Pages 52 and 53</td>
</tr>
<tr>
<td>76 and 77</td>
<td>Pages 76 and 77</td>
</tr>
<tr>
<td>112 through 115</td>
<td>Pages 112 through 115</td>
</tr>
<tr>
<td>126 and 127</td>
<td>Pages 126 and 127</td>
</tr>
<tr>
<td>132</td>
<td>Page 132</td>
</tr>
</tbody>
</table>

Attachments

JTP
TABLE OF CONTENTS

TITLE 22, DIVISION 6

CHAPTER 8. RESIDENTIAL CARE FACILITIES FOR THE ELDERLY

Article 1. Definitions

<table>
<thead>
<tr>
<th>General</th>
<th>Section</th>
</tr>
</thead>
<tbody>
<tr>
<td>Definitions</td>
<td>87100</td>
</tr>
<tr>
<td>Definitions - Forms</td>
<td>87101</td>
</tr>
</tbody>
</table>

Article 2. License

<table>
<thead>
<tr>
<th>License Required</th>
<th>Section</th>
</tr>
</thead>
<tbody>
<tr>
<td>Operation Without a License</td>
<td>87105</td>
</tr>
<tr>
<td>Exemption from Licensure</td>
<td>87106</td>
</tr>
<tr>
<td>Integral Facilities</td>
<td>87107</td>
</tr>
<tr>
<td>Limitations - Capacity and Ambulatory Status</td>
<td>87108</td>
</tr>
<tr>
<td>Advertisements and License Number</td>
<td>87110</td>
</tr>
<tr>
<td>False Claims</td>
<td>87111</td>
</tr>
<tr>
<td>Transferability</td>
<td>87112</td>
</tr>
<tr>
<td>Continuation of License Under Emergency Conditions/Sale of Property</td>
<td>87113</td>
</tr>
<tr>
<td>Posting of License</td>
<td>87114</td>
</tr>
<tr>
<td>Program Flexibility</td>
<td>87115</td>
</tr>
<tr>
<td>Applicant/License Mailing Address</td>
<td>87116</td>
</tr>
<tr>
<td>Nondiscrimination</td>
<td>87117</td>
</tr>
<tr>
<td>Renumbered to Section 87716.1 by Manual Letter No. CCL-01-20, effective 10/24/01</td>
<td>87124.1</td>
</tr>
</tbody>
</table>

Article 3. Application Procedures

<table>
<thead>
<tr>
<th>Application for License</th>
<th>Section</th>
</tr>
</thead>
<tbody>
<tr>
<td>Criminal Record Clearance</td>
<td>87218</td>
</tr>
<tr>
<td>Fire Clearance</td>
<td>87219</td>
</tr>
<tr>
<td>Plan of Operation</td>
<td>87220</td>
</tr>
<tr>
<td>Disaster and Mass Casualty Plan</td>
<td>87222</td>
</tr>
<tr>
<td>Application/Annual Processing Fees</td>
<td>87223</td>
</tr>
<tr>
<td>Commingling of Money</td>
<td>87224</td>
</tr>
<tr>
<td>Bonding</td>
<td>87225</td>
</tr>
<tr>
<td></td>
<td>87226</td>
</tr>
</tbody>
</table>
TABLE OF CONTENTS (Continued)

Article 3. Application Procedures (Continued)

Safeguards for Cash Resources, Personal Property, and Valuables of Residents ........................................ 87227
Theft and Loss ................................................................................................................................................. 87227.1
Application Review ........................................................................................................................................... 87228
Capacity .......................................................................................................................................................... 87229
Withdrawal of Application ............................................................................................................................... 87230
Provisional License ......................................................................................................................................... 87231
Repealed by Manual Letter No. CCL-01-10, effective 6/29/01........................................................................ 87233
Repealed by Manual Letter No. CCL-01-10, effective 6/29/01........................................................................ 87234
Resubmission of Application ............................................................................................................................ 87235
Conditions for Forfeiture of a Residential Care Facility for the Elderly License ............................................ 87236

Article 4. Administrative Actions

Denial of Initial License ........................................................................................................................................ 87340
Repealed by Manual Letter No. CCL-01-10, effective 6/29/01........................................................................ 87341
Revocation or Suspension of License .................................................................................................................. 87342
Relocation of Resident - General ...................................................................................................................... 87342.1
Licensee Complaints ......................................................................................................................................... 87343
Inspection Authority .......................................................................................................................................... 87344
Evaluation Visit ................................................................................................................................................ 87345
Exclusions ........................................................................................................................................................ 87346

Article 5. Enforcement Provisions

Serious Deficiencies - Examples .......................................................................................................................... 87451
Deficiencies in Compliance ................................................................................................................................. 87452
Follow-Up Visits to Determine Compliance .................................................................................................... 87453
Penalties ............................................................................................................................................................ 87454
Administrative Review - General ...................................................................................................................... 87455
Denial or Revocation of License for Failure to Pay Civil Penalties ................................................................. 87455.1
Unlicensed Facility Penalties ............................................................................................................................ 87457
Unlicensed Facility Administrative Appeal ....................................................................................................... 87458

Article 6. Continuing Requirements

Governing Body .................................................................................................................................................. 87560
Reporting Requirements ................................................................................................................................... 87561
Finances ............................................................................................................................................................ 87562
Administrator - Qualifications and Duties ......................................................................................................... 87564
Administrator Certification Requirements .......................................................................................................... 87564.2
Administrator Recertification Requirements ...................................................................................................... 87564.3
### Article 6. Continuing Requirements (Continued)

<table>
<thead>
<tr>
<th>Section</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>87564.4</td>
<td>Denial or Revocation of a Certificate</td>
</tr>
<tr>
<td>87564.5</td>
<td>Forfeiture of a Certificate</td>
</tr>
<tr>
<td>87565</td>
<td>Personnel Requirements - General</td>
</tr>
<tr>
<td>87566</td>
<td>Personnel Records</td>
</tr>
<tr>
<td>87567</td>
<td>General</td>
</tr>
<tr>
<td>87568</td>
<td>Admission Agreements</td>
</tr>
<tr>
<td>87569</td>
<td>Medical Assessment</td>
</tr>
<tr>
<td>87570</td>
<td>Resident Records</td>
</tr>
<tr>
<td>87571</td>
<td>Register of Residents</td>
</tr>
<tr>
<td>87572</td>
<td>Personal Rights</td>
</tr>
<tr>
<td>87573</td>
<td>Telephones</td>
</tr>
<tr>
<td>87574</td>
<td>Motor Vehicles Used in Transporting Residents</td>
</tr>
<tr>
<td>87575</td>
<td>Incidental Medical and Dental Care</td>
</tr>
<tr>
<td>87575.1</td>
<td>Advance Health Care Directives, Requests to Forego Resuscitative Measures, and Do-Not-Resuscitate Forms</td>
</tr>
<tr>
<td>87576</td>
<td>Food Services</td>
</tr>
<tr>
<td>87577</td>
<td>Personal Accommodations and Services</td>
</tr>
<tr>
<td>87578</td>
<td>Personal Assistance and Care</td>
</tr>
<tr>
<td>87579</td>
<td>Planned Activities</td>
</tr>
<tr>
<td>87580</td>
<td>Personnel - Operations</td>
</tr>
<tr>
<td>87581</td>
<td>Night Supervision</td>
</tr>
<tr>
<td>87582</td>
<td>Acceptance and Retention Limitations</td>
</tr>
<tr>
<td>87583</td>
<td>Pre-Admission Appraisal - General</td>
</tr>
<tr>
<td>87583.1</td>
<td>Resident Participation in Decisionmaking</td>
</tr>
<tr>
<td>87584</td>
<td>Functional Capabilities</td>
</tr>
<tr>
<td>87585</td>
<td>Mental Condition</td>
</tr>
<tr>
<td>87586</td>
<td>Social Factors</td>
</tr>
<tr>
<td>87587</td>
<td>Reappraisals</td>
</tr>
<tr>
<td>87588</td>
<td>Documentation and Support</td>
</tr>
<tr>
<td>87589</td>
<td>Eviction Procedures</td>
</tr>
<tr>
<td>87590</td>
<td>Basic Services</td>
</tr>
<tr>
<td>87591</td>
<td>Observation of the Resident</td>
</tr>
<tr>
<td>87592</td>
<td>Resident Councils</td>
</tr>
<tr>
<td>87593</td>
<td>Requirements for Emergency Adult Protective Services Placements</td>
</tr>
</tbody>
</table>

### Article 7. Physical Environment

<table>
<thead>
<tr>
<th>Section</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>87686</td>
<td>Alterations to Existing Buildings or New Facilities</td>
</tr>
<tr>
<td>87689</td>
<td>Fire Safety</td>
</tr>
<tr>
<td>87690</td>
<td>Resident and Support Services</td>
</tr>
<tr>
<td>87691</td>
<td>Maintenance and Operation</td>
</tr>
<tr>
<td>87692</td>
<td>Storage Space</td>
</tr>
</tbody>
</table>
# Article 8. Incidental Medical Services

## Health and Safety Protection

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>87700</td>
<td>Health and Safety Protection</td>
</tr>
<tr>
<td>87701</td>
<td>Prohibited Health Conditions</td>
</tr>
<tr>
<td>87701.1</td>
<td>Restricted Health Conditions</td>
</tr>
<tr>
<td>87701.2</td>
<td>Health Condition Relocation Order</td>
</tr>
<tr>
<td>87701.5</td>
<td>Resident Request for Review of Health Condition Relocation Order</td>
</tr>
<tr>
<td>87702</td>
<td>Allowable Health Conditions and the Use of Home Health Agencies</td>
</tr>
<tr>
<td>87702.1</td>
<td>General Requirements for Allowable Health Conditions</td>
</tr>
<tr>
<td>87703</td>
<td>Oxygen Administration</td>
</tr>
<tr>
<td>87704</td>
<td>Intermittent Positive Pressure Breathing Machine (IPPB)</td>
</tr>
<tr>
<td>87705</td>
<td>Colostomy/Ileostomy</td>
</tr>
<tr>
<td>87706</td>
<td>Enema and/or Suppository and Fecal Impaction Removal</td>
</tr>
<tr>
<td>87707</td>
<td>Indwelling Urinary Catheter/Catheter Procedure</td>
</tr>
<tr>
<td>87708</td>
<td>Managed Bowel and Bladder Incontinence</td>
</tr>
<tr>
<td>87709</td>
<td>Contractures</td>
</tr>
<tr>
<td>87710</td>
<td>Diabetes</td>
</tr>
<tr>
<td>87711</td>
<td>Injections</td>
</tr>
<tr>
<td>87712</td>
<td>Renumbered to Section 87724 by Manual Letter No. CCL-95-12, effective 11/16/95</td>
</tr>
<tr>
<td>87713</td>
<td>Healing Wounds</td>
</tr>
<tr>
<td>87714</td>
<td>Repealed by Manual Letter No. CCL-92-10, effective 7/21/92</td>
</tr>
<tr>
<td>87715</td>
<td>Repealed by Manual Letter No. CCL-97-14, effective 6/15/97</td>
</tr>
<tr>
<td>87716</td>
<td>Hospice Care for Terminally Ill Residents</td>
</tr>
<tr>
<td>87716.1</td>
<td>Facility Hospice Care Waiver</td>
</tr>
<tr>
<td>87720</td>
<td>Administrative Review - Incidental Medical Services</td>
</tr>
<tr>
<td>87721</td>
<td>Incidental Medical Related Services Exceptions</td>
</tr>
<tr>
<td>87722</td>
<td>Department Review</td>
</tr>
<tr>
<td>87724</td>
<td>Care of Persons with Dementia</td>
</tr>
</tbody>
</table>

## Article 9. Administrator Certification Training Programs

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>87730</td>
<td>Initial Certification Training Program Approval Requirements</td>
</tr>
<tr>
<td>87730.1</td>
<td>Denial of Request for Approval of an Initial Certification Training Program</td>
</tr>
<tr>
<td>87730.2</td>
<td>Revocation of an Initial Certification Training Program</td>
</tr>
<tr>
<td>87731</td>
<td>Continuing Education Training Program Vendor Requirements</td>
</tr>
<tr>
<td>87731.1</td>
<td>Continuing Education Training Program Course Approval Requirements</td>
</tr>
<tr>
<td>87731.2</td>
<td>Administrative Review of Denial or Revocation of a Request for Approval of a Continuing Education Course</td>
</tr>
<tr>
<td>87731.3</td>
<td>Denial of a Request for Approval of a Continuing Education Training Program</td>
</tr>
<tr>
<td>87731.4</td>
<td>Revocation of a Continuing Education Training Program</td>
</tr>
</tbody>
</table>
(3) Request to Forego Resuscitative Measures. A "Request to Forego Resuscitative Measures" is defined in Probate Code Section 4753(b).

HANDBOOK BEGINS HERE

(A) Probate Code Section 4753(b) reads:

A "request to forego resuscitative measures" shall be a written document, signed by the individual, or a legally recognized surrogate health care decisionmaker and a physician and surgeon, that directs a health care provider to forego resuscitative measures. For the purpose of this section, a "request to forego resuscitative measures" shall include a prehospital "do not resuscitate" form as developed by the Emergency Medical Services Authority or other substantially similar form. A request to forego resuscitative measures may also be evidenced by a medallion engraved with the words "do not resuscitate" or the letters "DNR", a patient identification number, and a 24-hour toll-free telephone number, issued by a person pursuant to an agreement with the Emergency Medical Services Authority.

HANDBOOK ENDS HERE

(4) Residential Care Facility for the Elderly. "Residential Care Facility for the Elderly" means a housing arrangement chosen voluntarily by the resident, the resident's guardian, conservator or other responsible person; where 75 percent of the residents are sixty years of age or older and where varying levels of care and supervision are provided, as agreed to at time of admission or as determined necessary at subsequent times of reappraisal. Any younger residents must have needs compatible with other residents.

(5) Responsible Person. "Responsible Person" means that individual or individuals, including a relative, health care surrogate decision maker, or placement agency, who assist the resident in placement or assume varying degrees of responsibility for the resident's well-being.

(6) Room and Board. "Room and Board" means a living arrangement where care and supervision is neither provided nor available.

(s) (1) Serious Deficiency. "Serious Deficiency" means any deficiency that presents an immediate or substantial threat to the physical health, mental health, or safety of the residents or clients of a community care facility.

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“Significant Other” means a person, including a person of the same gender, with whom a resident was sharing a partnership prior to his/her placement in a Residential Care Facility for the Elderly (RCFE). The partnership involves two adults who have chosen to share one another’s lives in an intimate and committed relationship of mutual caring.

Singular-Plural. Whenever in these regulations the singular is used, it can include the plural.

Social Worker. "Social Worker" means a person who has a graduate degree from an accredited school of social work or who has equivalent qualifications as determined by the Department.

SSI/SSP. "SSI/SSP" means the Supplemental Security Income/State Supplemental Program.

Substantial Compliance. "Substantial Compliance" means the absence of any deficiencies which would threaten the physical health, mental health, safety or welfare of the residents. Such deficiencies include, but are not limited to, those deficiencies referred to in Section 87451 and the presence of any uncorrected serious deficiencies for which civil penalties could be assessed.

Supervision: Means to oversee or direct the work of an individual or subordinate but does not necessarily require the immediate presence of the supervisor.
(t) (1) Terminally Ill Resident. "Terminally Ill Resident" means that the resident has a prognosis by his/her attending physician that the resident's life expectancy is six months or less if his/her illness or condition runs its normal course.

(2) Transfer trauma. "Transfer trauma" means the consequences of the stress and emotional shock caused by an abrupt, involuntary relocation of a resident from one facility to another.

(u) (1) "Unlicensed Residential Facility for the Elderly" means a facility as defined in Health and Safety Code Section 1569.44.

HANDBOOK BEGINS HERE

(A) Health and Safety Code Section 1569.44 provides in part:

A facility shall be deemed to be an "unlicensed residential care facility for the elderly" and "maintained and operated to provide residential 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 and 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 and 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 and supervision, as defined by this chapter or the rules and regulations adopted pursuant to this chapter.

(4) The facility represents itself as a licensed residential facility for the elderly.

HANDBOOK ENDS HERE
87101 DEFINITIONS (Continued)

(B) A facility which is "providing care and supervision" as defined in Section 87101c.(2) includes, but is not limited to, one in which individual has been placed by a placement agency or family members.

(C) A facility which is "held out as or represented as providing care and 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 change of ownership has occurred and the same clients are retained.

3. A licensed facility that moves to a new location.

4. A facility which advertises as providing care and supervision.

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

1. A facility with residents requiring care and 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 supervision are being provided by virtue of the client's needs being met.

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

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

3. Voluntary. "Voluntary" means resulting from free will.

(w) Waiver. "Waiver" means a variance to a specific regulation based on a facility-wide need or circumstance which is not typically tied to a specific resident or staff person. Requests for waivers are made to the licensing agency, in advance, by an applicant or licensee.
87101 DEFINITIONS (Continued)

(x) (Reserved)

(y) (Reserved)

(z) (Reserved)

NOTE: Authority cited: Sections 1569.23(d), 1569.30, 1569.616(j), and 1569.698(c), Health and Safety Code. Reference: 42 CFR 418.3; Sections 1569.1, 1569.2, 1569.5, 1569.10, 1569.145, 1569.15, 1569.153, 1569.157, 1569.158, 1569.17, 1569.19, 1569.191(e), 1569.193(a) and (d), 1569.20, 1569.21, 1569.23, 1569.30, 1569.31, 1569.312, 1569.38, 1569.44, 1569.47, 1569.54, 1569.616, 1569.699(a), 1569.73, 1569.74, and 1569.82, Health and Safety Code; Section 15610.13, Welfare and Institutions Code; and Sections 1800, 4615, 4650, and 4753, Probate Code.

87102 DEFINITIONS - FORMS

The following forms, which are incorporated by reference, apply to the regulations in Title 22, Division 6, Chapter 8 (Residential Care Facilities for the Elderly).

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

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

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

(d) PUB 325 (3/99) – Your Right To Make Decisions About Medical Treatment.

(e) Core of Knowledge Guidelines (6/01/01) - RCFE 40-Hour Initial Certification.

The following shall be allowed to operate without being licensed as a residential care facility for the elderly:

1. Any health facility, as defined by Health and Safety Code Section 1250.

2. Any clinic, as defined by Health and Safety Code Section 1202.

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 on prayer or spiritual means for healing in the practice of the religion of such church or denomination. Such facilities shall be limited to those facilities or portions thereof which substitute prayer for medical/nursing services which would otherwise be provided for or required by residents in a health facility, as defined by Section 1200 or 1250 of the Health and Safety Code.

4. Any house, institution, hotel or other similar place that supplies board and room only, or room only, or board only, if no element of care and/or supervision, as defined by this chapter, is provided, made available, or contractually promised, such as in a life care agreement or program agreement with a facility. However, this shall not preclude care and/or supervision provided for brief and irregular periods of time for reasons such as temporary illnesses or emergencies provided that such is determined to be minor and temporary and does not require twenty-four (24) hours supervision of the resident(s).

5. Recovery houses or other similar facilities providing group living arrangements for persons recovering from alcoholism or drug addiction where the facility provides no care and supervision.
(6) Any alcoholism recovery facility as defined by Section 11834.11 of the Health and Safety Code relating to alcohol programs.

HANDBOOK BEGINS HERE

Health and Safety Code Section 11834.11 provides in part:

(A) An "alcoholism recovery facility" means any facility place or building which is maintained and operated to provide 24-hour residential nonmedical alcoholism recovery services exclusively for individuals whose involvement in services is related primarily to an alcohol problem.

HANDBOOK ENDS HERE

(7) Any care and supervision of persons by a family member. For purposes of this section “family member” means any spouse, by marriage or otherwise, child or stepchild, by natural birth or by adoption, parent, brother, sister, half-brother, half-sister, parent-in-law, brother-in-law, sister-in-law, nephew, niece, aunt, uncle, first cousin, or any person denoted by the prefix “grand” or “great”, or the spouse of any of these persons, even if the marriage has been terminated by death or dissolution.

(8) Any arrangement for the care and supervision of a person or persons 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 conditions 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.
(9) Any housing project for elderly or disabled individuals that meets federal requirements as specified in Health and Safety Code Section 1569.145(g).

HANDBOOK BEGINS HERE

(A) Health and Safety Code Section 1569.145(g) provides:

“Any housing for elderly or disabled persons, or both, that is approved and operated pursuant to Section 202 of Public Law 86-372 (12 U.S.C.A. Sec. 1701q), or Section 811 of Public Law 101-625 (42 U.S.C.A. Sec 8013), or whose mortgage is insured pursuant to Section 236 of Public Law 90-448 (12 U.S.C.A. Sec. 1715z), or that receives mortgage assistance pursuant to Section 221d(3) of Public Law 87-70 (12 U.S.C.A. Sec.17151), 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. The project owner or operator may coordinate, or help residents gain access to, the supportive services, either directly, or through a service coordinator.”

HANDBOOK ENDS HERE

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

(1) Health and Safety Code, Section 1569.681 provides:

   (a) Each residential care facility for the elderly 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) referred to herein 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.

(2) Health and Safety Code, Section 1569.68 provides:

All residential care facilities shall be required to include their current license number in any public advertisement or correspondence.

(b) Licensees who 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 Sections 1569.681 and 1569.68.


87112 FALSE CLAIMS

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.

87113 TRANSFERABILITY

(a) The license shall not be transferable.

(b) The licensee shall notify the licensing agency and all residents receiving services, or their responsible persons, in writing as soon as possible and in all cases at least sixty (60) days prior to the effective date that any change in ownership of the facility occurs as required by Health and Safety Code Section 1569.191(a)(1).

(c) In all other instances, including a change in licensee, type of license, or location of the facility, the licensee shall notify the licensing agency and all residents receiving services, or their responsible persons, in writing as soon as possible and in all cases at least thirty (30) days prior to the effective date of that change.

(d) In the case of change of ownership or licensee a new application for license shall be submitted by the prospective new licensee.


87114 CONTINUATION OF LICENSE UNDER EMERGENCY CONDITIONS/SALE OF PROPERTY

(a) The licensing agency may consent to a change of location and continuation of the existing license of any facility for a reasonable period of time when the change is requested because of the accidental destruction of the licensed premises or similar emergency conditions, so long as the new location or place of performance conforms to building, fire and life safety standards.

(b) In the event of a licensee's death, an adult who has control of the property, and had been designated by the licensee as the party responsible to continue operation of the facility upon a licensee’s death shall:
CONINUATION OF LICENSE UNDER EMERGENCY CONDITIONS/SALE OF PROPERTY (Continued)

(1) notify the Department by the next working day of the licensee’s death;

(2) inform the Department within 5 working days if the designee decides not to apply for licensure.

(A) If the designee decides not to apply, the Department will help the designee develop and implement a relocation plan for facility residents.

(c) The Department may permit a designee to continue operation of a previously licensed facility, and grant an Emergency Approval to Operate (EAO) to a facility for up to 60 days pending issuance or denial of a license, provided the following requirements of Section 1569.193 of the Health and Safety Code are met:

(1) The designee notifies the Department during the next working day following the death of the licensee, that he/she will continue to operate the facility.

(2) A notarized designation of the adult, authorized by the licensee, to continue operation of the facility in the event of the licensee’s death, was filed by the licensee with the Department.

(A) The notarized statement was signed by the designee, and indicated acceptance of the designation.

(B) The notarized statement contains, or is accompanied by a declaration under penalty of perjury, regarding any criminal convictions of the designee.

(3) The designee is able to operate the facility to the satisfaction of the Department.

(4) The designee files an application for licensure, and provides a copy of the licensee’s death certificate, obituary notice, certification of death from the decedent’s mortuary, or a letter from the attending physician or coroner’s office verifying the death of the licensee, within 20 calendar days of the licensee’s death.

(5) The applicant who is issued an EAO shall perform all the duties, functions, and responsibilities required of a licensee.

(A) Failure to comply with licensing laws and regulations under Section 87114(b) as determined by the licensing agency, shall result in the denial of the application for license. This denial shall also constitute termination of the EAO.

(B) The licensing agency shall provide written notification of the denial and this notice shall be effective immediately upon receipt.
(d) The Department shall determine, within 60 days, after receipt of the completed application, whether a license will be issued.

(e) Following receipt of a completed application, the designee shall not be considered to be operating an unlicensed facility while the Department decides whether to grant the license.

(f) In the event of the sale and transfer of property and business, the applicant (buyer) shall be issued an EAO if the applicant (buyer) complies with Section 1569.191 of the Health and Safety Code.

HANDBOOK BEGINS HERE

(1) Health and Safety Code, Section 1569.191 provides in part:

   (a) Notwithstanding Section 1569.19, in the event of a sale of a licensed facility where the sale will result in a new license being issued, the sale and transfer of property and business shall be subject to both of the following:

       (1) The licensee shall provide written notice to the department and to each resident or his or her legal representative of the licensee's intent to sell the facility at least 60 days prior to the transfer of property or business, or at the time that a bona-fide offer is made, whichever period is longer.

HANDBOOK CONTINUES
(2) The licensee shall, prior to entering into an admission agreement, inform all residents, or their legal representatives, admitted to the facility after notification to the department, of the licensee's intent to sell the property or business.

(b) Except as provided in subdivision (e), the property and business shall not be transferred until the buyer qualifies for a license or provisional license within the appropriate provisions of this chapter.

(1) The seller shall notify, in writing, a prospective buyer of the necessity to obtain a license, as required by this chapter, if the buyer's intent is to continue operating the facility as a residential care facility for the elderly. The seller shall send a copy of this written notice to the licensing agency.

(2) The prospective buyer shall submit an application for a license, as specified in Section 1569.15, within five days of the acceptance of the offer by the seller.

(c) No sale of the facility shall be permitted until 60 days have elapsed from the date upon which notice has been provided pursuant to paragraphs (1) and (2) of subdivision (a).

(d) The department shall give priority to applications for licensure which are submitted pursuant to this section in order to ensure timely transfer of the property and business. The department shall make a decision within 60 days after a complete application is submitted on whether to issue a license pursuant to Section 1569.15.

(e) If the parties involved in the transfer of the property and business fully comply with this section then the transfer may be completed and the buyer shall not be considered to be operating an unlicensed facility while the department makes final determination on the application for licensure.
87114 (Cont.) CONTINUATION OF LICENSE UNDER EMERGENCY CONDITIONS/SALE OF PROPERTY (Continued)

(g) "A bona-fide offer", as specified in Health and Safety Code Section 1569.191(a)(1), shall mean a proposal by the buyer to purchase the facility with definite terms in writing communicated to the seller and accompanied by a cash deposit.


87115 POSTING OF LICENSE

The license shall be posted in a prominent location in the licensed facility accessible to public view.

(a) The use of alternate concepts, programs, services, procedures, techniques, equipment, space, personnel qualifications or staffing ratios, or the conduct of experimental or demonstration projects shall not be prohibited by these regulations provided that:

1. Such alternatives shall be carried out with provisions for safe and adequate services.

2. A written request for a waiver or exception and substantiating evidence supporting the request shall be submitted in advance to the licensing agency by the applicant or licensee.

3. Prior written approval of the licensing agency shall be received.

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

   (B) The licensing agency shall provide written approval or denial.

(b) Unless prior written approval of the licensing agency is received, all community care facilities shall maintain continuous compliance with the licensing regulations.

The applicant or licensee shall file his/her mailing address, in writing, with the licensing agency and shall notify the agency, in writing, of any change within 10 calendar days.


(a) All licensed facilities shall receive persons on a nondiscriminatory basis according equal treatment and services without regard to race, color, religion, national origin, actual or perceived sexual orientation or ancestry.

(b) An exception shall be made in the case of any bona fide nonprofit religious, fraternal or charitable organization which can demonstrate to the satisfaction of the Department or the licensing agency that its primary or substantial purpose is not to evade this section.

(1) It may establish reception policies limiting or giving preference to its own members or adherents, provided, however, such membership is nondiscriminatory and such policies shall not be construed as a violation of this section.

(2) Any reception of nonmembers or nonadherents shall be subject to the requirements of this section.

87220 FIRE CLEARANCE

(a) All facilities shall maintain a fire clearance approved by the city or county fire department, the district providing fire protection services, or the State Fire Marshal. Prior to accepting any of the following types of persons, the applicant or licensee shall notify the licensing agency and obtain an appropriate fire clearance, approved by the city or county fire department, the district providing fire protection services, or the State Fire Marshal, through the licensing agency:

(1) Persons over 65 years of age.
(2) Nonambulatory persons.


87222 PLAN OF OPERATION

(a) Each facility shall have and maintain a current, written definitive plan of operation. The plan and related materials shall be on file in the facility and shall be submitted to the licensing agency with the license application. Any significant changes in the plan of operation which would affect the services to residents shall be submitted to the licensing agency for approval. The plan and related materials shall contain the following:

(1) Statement of purposes and program goals.
(2) A copy of the Admission Agreement, containing basic and optional services.
(3) Statement of admission policies and procedures regarding acceptance of persons for services.
(4) Administrative organization.
(5) Staffing plan, qualifications and duties.
(6) Plan for training of staff, as required by Section 87565(e).
(7) A sketch of the building(s) to be occupied, including a floor plan which describes the capacities of the buildings for the uses intended, a designation of the rooms to be used for nonambulatory residents, and a sketch of the grounds showing buildings, driveways, fences, storage areas, pools, gardens, recreation area and other space used by the residents. All sketches shall show dimensions.

(8) Transportation arrangements for persons served who do not have independent arrangements.

(9) A statement whether or not the applicant will handle residents' money and/or valuables. If money and/or valuables will be handled, the method for safeguarding pursuant to Sections 87225, 87226 and 87227.

(10) A statement of the facility's policy concerning family visits and other communication with clients, as specified in Health and Safety Code Section 1569.313.

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**HANDBOOK BEGINS HERE**

(A) Section 1569.313 of the Health and Safety Code provides that:

This 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.

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**HANDBOOK ENDS HERE**

(11) If the licensee intends to admit and/or specialize in care for one or more residents who have a documented history of behaviors that may result in harm to self or others, the facility plan of operation shall include a description of precautions that will be taken to protect that resident and all other residents.

(2) shall provide the licensing agency an accounting of all residents' cash resources, personal property and valuables entrusted to his/her care. Such accounting shall be made on a form provided or approved by the Department.

(l) When the licensing agency approves the application for the new licensee, the form specified in (2) above shall be updated, signed by both parties, and forwarded to the licensing agency.

(m) All monetary gifts, and any gift exceeding an estimated value of $100, which are given to a licensee by or on behalf of a resident shall be recorded. The record shall be attached to the account specified in (f) above. This shall not include monetary gifts or valuables given by the friends or relatives of a deceased resident.


87227.1 THEFT AND LOSS

(a) The licensee shall ensure an adequate theft and loss program as specified in Health and Safety Code Section 1569.153.

(1) The initial personal property inventory shall be completed by the licensee, and the resident, or the resident’s representative.

(2) A licensee who fails to make reasonable efforts to safeguard resident property, shall reimburse a resident for or replace stolen or lost resident property at its current value. The licensee shall be presumed to have made reasonable efforts to safeguard resident property if there is clear and convincing evidence of efforts to meet each requirement specified in Section 1569.153.

(A) A civil penalty shall be levied if the licensee or facility staff have not implemented the theft and loss program, or if the licensee has not shown clear and convincing evidence of its efforts to meet all of the requirements set forth in Section 1569.153.

(3) The facility contract of admission, including all documents a resident or his or her representative must sign as a condition of admission, shall not require or suggest a lesser standard of responsibility for the personal property of residents than the law requires.
Section 1569.153 of the Health and Safety Code provides in part:

“A theft and loss program shall be implemented by the residential care facilities for the elderly within 90 days after January 1, 1989. The program shall include all of the following:

“(a) Establishment and posting of the facility's policy regarding theft and investigative procedures.

“(b) Orientation to the policies and procedures for all employees within 90 days of employment.

“(c) Documentation of lost and stolen resident property with a value of twenty-five dollars ($25) or more within 72 hours of the discovery of the loss or theft and, upon request, the documented theft and loss record for the past 12 months shall be made available to the State Department of Social Services, law enforcement agencies and to the office of the State Long-Term Care Ombudsman in response to a specific complaint. The documentation shall include, but not be limited to, the following:

“(1) A description of the article.

“(2) Its estimated value.

“(3) The date and time the theft or loss was discovered.

“(4) If determinable, the date and time the loss or theft occurred.

“(5) The action taken.

“(d) A written resident personal property inventory is established upon admission and retained during the resident's stay in the residential care facility for the elderly. Inventories shall be written in ink, witnessed by the facility and the resident or resident's representative, and dated. A copy of the written inventory shall be provided to the resident or the person acting on the resident's behalf. All additions to an inventory shall be made in ink, and shall be witnessed by the facility and the resident or resident's representative, and dated. Subsequent items brought into or removed from the facility shall be added to or deleted from the personal property inventory by the facility at the written request of the resident, the resident's family, a responsible party, or a person acting on behalf of a resident. The facility shall not be liable for items which have not been requested to be included in the inventory or for items which have been deleted from the inventory. A copy of a current inventory shall be made available upon request to the resident, responsible party, or other authorized representative....
“(e) Inventory and surrender of the resident's personal effects and valuables upon discharge to
the resident or authorized representative in exchange for a signed receipt.

“(f) Inventory and surrender of personal effects and valuables following the death of a
resident to the authorized representative in exchange for a signed receipt. Immediate written
notice to the public administrator of the county upon the death of a resident whose heirs are
unable or unwilling to claim the property as specified in Chapter 20 (commencing with
Section 1140) of Division 3 of the Probate Code.

“(g) Documentation, at least semiannually, of the facility's efforts to control theft and loss,
including the review of theft and loss documentation and investigative procedures and results
of the investigation by the administrator and, when feasible, the resident council.

“(h) Establishment of a method of marking, to the extent feasible, personal property items for
identification purposes upon admission and, as added to the property inventory list, including
engraving of dentures and tagging of other prosthetic devices.

“(i) Reports to the local law enforcement agency within 36 hours when the administrator of
the facility has reason to believe resident property with a then current value of one hundred
dollars ($100) or more has been stolen. Copies of those reports for the preceding 12 months
shall be made available to the State Department of Social Services and law enforcement
agencies.

“(j) Maintenance of a secured area for residents' property which is available for safekeeping
of resident property upon the request of the resident or the resident's responsible party.
Provide a lock for the resident's bedside drawer or cabinet upon request of and at the expense
of the resident, the resident's family, or authorized representative. The facility administrator
shall have access to the locked areas upon request.

“(k) A copy of this section and Sections 1569.152 and 1569.154 is provided by a facility to
all of the residents and their responsible parties, and available upon request, to all of the
facility's prospective residents and their responsible parties.

“(l) Notification to all current residents and all new residents, upon admission, of the facility's
policies and procedures relating to the facility's theft and loss prevention program.

“(m) Only those residential units in which there are no unrelated residents and where the unit
can be secured by the resident or residents are exempt from the requirements of this section.”

HANDBOOK ENDS HERE

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.152,
APPLICATION REVIEW

(a) No initial license shall be issued until the licensing agency has completed the following:

(1) A review which includes an on-site survey of the proposed premises and a determination of the qualifications of the applicant.

(2) A determination that the applicant has secured a fire clearance from the State Fire Marshal.

(3) A determination that the applicant and facility comply with the provisions of Chapter 3 (commencing with Section 1569) of Division 2 of the Health and Safety Code, and the regulations in this chapter.

(b) The licensing agency shall cease review of any application as specified in Section 1569.16 of the Health and Safety Code.

HANDBOOK BEGINS HERE

(1) Health and Safety Code Section 1569.16 provides:

(a) If an application for a license indicates, or the department determines during the application review process, that the applicant previously was issued a license under this chapter or under Chapter 1 (commencing with Section 1200), 2 (commencing with Section 1250), 3 (commencing with Section 1500), 3.4 (commencing with Section 1596.70), 3.5 (commencing with Section 1596.90), or 3.6 (commencing with Section 1597.30) and the prior license was revoked within the preceding two years, the department shall cease any further review of the application until two years shall have elapsed from the date of revocation. The cessation of review shall not constitute a denial of the application for purposes of Section 1569.22 or any other provision of law. All residential care facilities for the elderly are exempt from the health planning requirements contained in Part 1.5 (commencing with Section 437) of Division 1.

(b) If an application for a license or special permit indicates, or the department determines during the application review process, that the applicant had previously applied for a license under any of the chapters listed in subdivision (a) and the application was denied within the last year, the department shall, except as provided in Section 1569.22, cease further review of the application until one year has elapsed from the date of the denial letter. In those circumstances where denials are appealed and upheld at an administrative hearing, review of the application shall cease for one year from the date of the decision and order being rendered by the department. The cessation of review shall not constitute a denial of the application.

HANDBOOK ENDS HERE
Article 6. Continuing Requirements

87560 GOVERNING BODY

(a) The licensee, whether an individual or other entity, shall exercise general supervision over the affairs of the licensed facility and establish policies concerning its operation in conformance with these regulations and the welfare of the individuals it serves.

(b) If the licensee is a corporation or an association, the governing body shall be active, and functioning in order to assure accountability.

(c) Any change in the chief corporate officer of an organization, corporation or association shall be reported to the Department or licensing agency in writing within fifteen (15) working days following such change. Such notification shall include the name, address and the fingerprint card of the new chief executive officer as required by Section 87219.


87561 REPORTING REQUIREMENTS

(a) Each licensee shall furnish to the licensing agency such reports as the Department may require, including, but not limited to, the following:

(1) A written report shall be submitted to the licensing agency and to the person responsible for the resident within seven days of the occurrence of any of the events specified in (A) through (C) below. This report shall include the resident's name, age, sex and date of admission; date and nature of event; attending physician's name, findings, and treatment, if any; and disposition of the case.

(A) Death of any resident from any cause regardless of where the death occurred, including but not limited to a day program, a hospital, en route to or from a hospital, or visiting away from the facility.

(B) Any serious injury as determined by the attending physician and occurring while the resident is under facility supervision.

(C) Any incident which threatens the welfare, safety or health of any resident, such as physical or psychological abuse of a resident by staff or other residents, or unexplained absence of any resident.

(2) Occurrences, such as epidemic outbreaks, poisonings, catastrophes or major accidents which threaten the welfare, safety or health of residents, personnel or visitors, shall be reported within 24 hours either by telephone or telegraph to the licensing agency and to the local health officer when appropriate.
(3) Fires or explosions which occur in or on the premises shall be reported immediately to the local fire authority; in areas not having organized fire services, within 24 hours to the State Fire Marshal; and no later than the next working day to the licensing agency.

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

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

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

   (3) Description of his/her background and qualifications, including documentation of required education and administrator certification.

   (A) A photocopy of the documentation is acceptable.


FINANCES

The licensee shall have a financial plan which conforms to the requirements of Section 87218, and which assures sufficient resources to meet operating costs for care of residents; shall maintain adequate financial records; and shall submit such financial reports as may be required upon the written request of the Department or licensing agency. Such request shall explain the need for disclosure. The Department or licensing agency reserves the right to reject any financial report and to request additional information or examination including interim financial statements.

(a) Prior to admission, the prospective resident and his/her responsible person, if any, shall be interviewed by the licensee or the employee responsible for facility admissions.

(1) Sufficient information about the facility and its services shall be provided to enable all persons involved in the placement to make an informed decision regarding admission.

(2) The prospective resident's desires regarding admission, and his/her background, including any specific service needs, medical background and functional limitations shall be discussed.

(b) No person shall be admitted without his/her consent and agreement, or that of his/her responsible person, if any.

(c) Prior to admission a determination of the prospective resident's suitability for admission shall be completed and shall include an appraisal of his/her individual service needs in comparison with the admission criteria specified in Section 87582.

(1) The appraisal shall include, at a minimum, an evaluation of the prospective resident's functional capabilities, mental condition and an evaluation of social factors as specified in Sections 87584 through 87586.

(A) The licensee shall be permitted to use the form LIC 603 (Rev. 6/87), Preplacement Appraisal Information, to document the appraisal.

(2) Except as provided in Section 87701.5(g)(3), if an initial appraisal or any reappraisal identifies an individual resident service need which is not being met by the general program of facility services, advice shall then be obtained from a physician, social worker, or other appropriate consultant to determine if the needs can be met by the facility. If so, the licensee and the consultant shall develop a plan of action which shall include:

(A) Objectives, within a time frame, which relate to the resident's problems and/or unmet needs.

(B) Plans for meeting the objectives.

(C) Identification of any individuals or agencies responsible for implementing each part of the plan.

(D) Method of evaluating progress.
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(3) The prospective resident, or his/her responsible person, if any, shall be involved in the development of the appraisal.

(A) The licensee shall be permitted to use the form LIC 9027 (Rev. 1/89), Resident's Health Status - Summary, to summarize all findings of the appraisal, but the LIC 9027 shall not be used as a substitute for the detailed information required by this section and Section 87569.

(4) If a needs assessment has already been completed by a placement agency or consultant, this shall be obtained and included in the facility's appraisal.


(a) Prior to, or within two weeks of the resident’s admission, the licensee shall arrange a meeting with the resident, the resident’s representative, if any, appropriate facility staff, and a representative of the resident’s home health agency, if any, and any other appropriate parties, to prepare a written record of the care the resident will receive in the facility, and the resident’s preferences regarding the services provided at the facility.

(1) At a minimum the written record shall include the date of the meeting, name of individuals who participated and their relationship to the resident, and the agreed-upon services to be provided to the resident.

(2) If the resident has a regular physician, the licensee shall send a copy of the record to the physician.

(3) The licensee shall arrange a meeting with the resident and appropriate individuals identified in Section 87583.1(a)(1) to review and revise the written record as specified, when there is a significant change in the resident’s condition, or once every 12 months, whichever occurs first. Significant changes shall include, but not be limited to occurrences specified in Section 87587.

(4) The meeting and documentation described in this section may be used to satisfy the reappraisal requirements of Section 87587.

The facility shall assess the person's need for personal assistance and care by determining his/her ability to perform specified activities of daily living. Such activities shall include, but not be limited to:

1. Bathing, including need for assistance:
   (A) In getting in and out of the bath.
   (B) In bathing one or more parts of the body.
   (C) Through use of grab bars.

2. Dressing and grooming, including the need for partial or complete assistance.

3. Toileting, including the need for:
   (A) Assistance equipment.
   (B) Assistance of another person.

4. Transferring, including the need for assistance in moving in and out of a bed or chair.

5. Continence, including:
   (A) Bowel and bladder control.
   (B) Whether assistive devices such as a catheter are used.

6. Eating, including the need for:
   (A) Adaptive devices.
   (B) Assistance from another person.
FUNCTIONAL CAPABILITIES (Continued)

(7) Physical condition, including:

(A) Vision.

(B) Hearing.

(C) Speech.

(D) Walking with or without equipment or other assistance.

(E) Dietary limitations.

(F) Medical history and problems.

(G) Need for prescribed medications.


MENTAL CONDITION

(a) The facility shall determine the amount of supervision necessary by assessing the mental status of the prospective resident to determine if the individual:

(1) tends to wander;

(2) is confused or forgetful;

(3) is capable of managing his/her own cash resources;

(4) actively participates in social activities or is withdrawn;

(5) has a documented history of behaviors which may result in harm to self or others.

SOCIAL FACTORS

The facility shall obtain sufficient information about each person's likes and dislikes and interests and activities, to determine if the living arrangements in the facility will be satisfactory, and to suggest the program of activities in which the individual may wish to participate.


REAPPRAISALS

(a) The pre-admission appraisal shall be updated, in writing as frequently as necessary to note significant changes and to keep the appraisal accurate. The reappraisals shall document changes in the resident's physical, medical, mental, and social condition. Significant changes shall include but not be limited to:

(1) A physical trauma such as a heart attack or stroke.

(2) A mental/social trauma such as the loss of a loved one.

(3) Any illness, injury, trauma, or change in the health care needs of the resident that results in a circumstance or condition specified in Sections 87582(c) or 87701.

(b) The licensee shall immediately bring any such changes to the attention of the resident's physician and his family or responsible person.

(c) The licensee shall arrange a meeting with the resident, the resident’s representative, if any, appropriate facility staff, and a representative of the resident’s home health agency, if any, when there is significant change in the resident’s condition, or once every 12 months, whichever occurs first, as specified in Section 87583.1.


DOCUMENTATION AND SUPPORT

Each facility shall document in writing the findings of the pre-admission appraisal and any reappraisal or assessment which was necessary in accordance with Sections 87583 and 87587. If supporting documentation from a physician is required, this input shall also be obtained and may be the same assessment as required in Section 87569.

Article 8. Incidental Medical Services

87700 HEALTH AND SAFETY PROTECTION

(a) Acceptance by the licensee of residents with incidental medical needs shall be in accordance with the conditions specified in this article.

(b) The provisions of this article shall be applicable and in conjunction with Articles 1 through 7 of this chapter.

(c) Licensees who employ or permit health care practitioners to provide care to residents shall post a visible notice in a prominent location that states, “Section 680 of the Business and Professions Code requires health care practitioners to disclose their name and license status on a name tag in at least 18-point type while working in this facility.”

NOTE: Authority cited: Section 1569.30(a), Health and Safety Code. Reference: Sections 1569.2; 1569.30; and 1569.312; Health and Safety Code; and Section 680, Business and Professions Code.

87701 PROHIBITED HEALTH CONDITIONS

(a) In addition to Section 87582(c), persons who require health services or have a health condition including but not limited to those specified below shall not be admitted or retained in a residential care facility for the elderly:

(1) Stage 3 and 4 dermal ulcers.

(2) Gastrostomy care.

(3) Use of liquid oxygen.

(4) Naso-gastric tubes

(5) Staph infection or other serious infection.

(6) Residents who depend on others to perform all activities of daily living for them as set forth in Section 87584.

(7) Tracheostomies.

NOTE: Authority cited: Sections 1569.30 and 1569.698(c), Health and Safety Code. Reference: Sections 1569.2(a), (e), and (j), 1569.30, 1569.312, and 1569.72; Health and Safety Code.
87701.1  RESTRICTED HEALTH CONDITIONS

(a) Care for the following health conditions may be provided by the licensee, only as specified in Sections 87703 through 87713.

   (1) Administration of oxygen as specified in Section 87703.
   (2) Catheter care as specified in Section 87707.
   (3) Colostomy/ileostomy care as specified in Section 87705.
   (4) Contractures as specified in Section 87709.
   (5) Diabetes as specified in Section 87710.
   (6) Enemas, suppositories, and/or fecal impaction removal as specified in Section 87706.
   (7) Incontinence of bowel and/or bladder as specified in Section 87708.
   (8) Injections as specified in Section 87711.
   (9) Intermittent Positive Pressure Breathing Machine use as specified in Section 87704.
   (10) Stage 1 and 2 dermal ulcers as specified in Section 87713(a)(3).
   (11) Wound care as specified in Section 87713.

NOTE: Authority cited: Sections 1569.30, Health and Safety Code. Reference: Sections 1569.2(a), (e), and (j), 1569.30, 1569.312, and 1569.72, Health and Safety Code.

87701.2  HEALTH CONDITION RELOCATION ORDER

(a) If a resident has a health condition which cannot be cared for within the limits of the license, requires inpatient care in a health facility, or has a health condition prohibited by Section 87582(c) or Section 87701, the Department shall order the licensee to relocate the resident.

(b) When the Department orders the relocation of a resident, the following shall apply:
(a) A licensee shall be permitted to accept or retain in a Residential Care Facility for the Elderly persons who have a health condition(s) which requires incidental medical services including, but not limited to, the restricted health conditions specified in 87701.1.

(b) Incidental medical care may be provided to residents through a licensed home health agency provided the following conditions are met:

1. The licensee remains in substantial compliance with the requirements of Chapter 3.2, Division 2, of the California Health and Safety Code, Sections 1569-1569.87, and of Chapter 8, Division 6, of Title 22, of the California Code of Regulations governing RCFEs.

2. The licensee provides the supporting care and supervision needed to meet the needs of the resident receiving home health care.

3. The licensee informs the home health agency of any duties the regulations prohibit facility staff from performing, and of any regulations that address the resident’s specific condition(s).

4. The licensee and home health agency agree in writing on the responsibilities of the home health agency, and those of the licensee in caring for the resident’s medical condition(s).

   (A) The written agreement shall reflect the services, frequency and duration of care.

   (B) The written agreement shall include day and evening contacts for the resident at the facility, and the home health agency, and the method of communication between both parties, which may include verbal contact, electronic mail, logbook, or specific page in the clinical record.

   (C) The written agreement shall be signed by the licensee or licensee representative, and representative of the home health agency, and placed in the resident’s file.

(c) The use of home health agencies to care for a resident’s medical condition(s) does not expand the scope of care and supervision the licensee is required to provide in Chapter 8, Division 6, of Title 22 of the California Code of Regulations governing RCFEs.

NOTE: Authority cited: Section 1569.30(a), Health and Safety Code. Reference: Sections 1569.2; 1569.30; 1569.312; and 1569.725; Health and Safety Code.
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