

**Article 6. Continuing Requirements****87560 GOVERNING BODY****87560**

- (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.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.1, 1569.2, 1569.15, 1569.16, 1569.17, 1569.30, 1569.31 and 1569.312, Health and Safety Code.

**87561 REPORTING REQUIREMENTS****87561**

- (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 (D) 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) The use of an Automated External Defibrillator.
    - (D) 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.

**87561 REPORTING REQUIREMENTS (Continued)****87561**

- (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 facsimile 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.

NOTE: Authority cited: Section 1569.30 and 1569.616, Health and Safety Code. Reference: Sections 1569.1, 1569.2, 1569.31, 1569.312, 1569.616, and 1797.196, Health and Safety Code.

**87562 FINANCES****87562**

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 of 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.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.1, 1569.2, and 1569.15, Health and Safety Code; and Section 11006.9, Welfare and Institutions Code.

**87564 ADMINISTRATOR - QUALIFICATIONS AND DUTIES****87564**

- (a) All facilities shall have a certified administrator. The licensee and the administrator may be one and the same person. The administrator shall have sufficient freedom from other responsibilities and shall be on the premises a sufficient number of hours to permit adequate attention to the management and administration of the facility as specified in this section. When the administrator is not in the facility, there shall be coverage by a designated substitute who shall have qualifications adequate to be responsible and accountable for management and administration of the facility as specified in this section. The Department may require that the administrator devote additional hours in the facility to his/her responsibilities when the need for such additional hours is substantiated by written documentation.
- (b) The administrator of a facility or facilities shall have the responsibility and authority to carry out the policies of the licensee.
- (c) Failure to comply with all licensing requirements pertaining to certified administrators may constitute cause for revocation of the license of the facility.
- (d) The administrator shall have the qualifications specified in Sections 87564(d)(1) through (7). If the licensee is also the administrator, all requirements for an administrator shall apply.
- (1) Knowledge of the requirements for providing care and supervision appropriate to the residents.
  - (2) Knowledge of and ability to conform to the applicable laws, rules and regulations.
  - (3) Ability to maintain or supervise the maintenance of financial and other records.
  - (4) When applicable, the ability to direct the work of others.
  - (5) Good character and a continuing reputation of personal integrity.
  - (6) Have a high school diploma or equivalent, such as a General Education Development (GED) certificate.
  - (7) Be at least 21 years of age.

**87564 ADMINISTRATOR - QUALIFICATIONS AND DUTIES (Continued)****87564**

- (e) The administrator of a facility licensed for sixteen (16) to forty-nine (49) residents shall have completed, with a passing grade, at least fifteen (15) college or continuing education semester or equivalent quarter units; and shall have at least one year's experience providing residential care to the elderly; or equivalent education and experience as approved by the Department.
- (f) The administrator in facilities licensed for fifty (50) or more shall have two years of college; at least three years experience providing residential care to the elderly; or equivalent education and experience as approved by the licensing agency.
- (g) All administrators shall be required to complete at least 20 clock hours of continuing education per year in areas related to aging and/or administration.
- (h) Administrators employed/licensed prior to July 1, 1982, shall not be required to comply with the college and continuing education requirements in Section 87564(e) or the college requirements in Section 87564(f) provided that they have no break in employment as an RCFE administrator exceeding three (3) consecutive years.
- (i) The administrator shall have the responsibility to:
  - (1) Administer the facility in accordance with these regulations and established policy, program and budget.
  - (2) Where applicable, report to the licensee on the operation of the facility, and provide the licensee with necessary interpretations of recognized standards of care and supervision.
  - (3) Develop an administrative plan and procedures to ensure clear definition of lines of responsibility, equitable workloads, and adequate supervision.
  - (4) Recruit, employ and train qualified staff, and terminate employment of staff who perform in an unsatisfactory manner.
  - (5) Provide or ensure the provision of services to the residents with appropriate regard for the residents' physical and mental well-being and needs, including those services identified in the residents' pre-admission appraisal, specified in Section 87583.
  - (6) Make special provisions for the safety and guidance of residents with visual or auditory deficiencies.

**87564 ADMINISTRATOR - QUALIFICATIONS AND DUTIES (Continued) 87564**

- (7) Make provision for the resident with unmet needs to attend available community programs, including but not limited to, arranging for transportation.
- (8) Have the personal characteristics, physical energy and competence to provide care and supervision and, where applicable, to work effectively with social agencies.
- (j) In those cases where the individual is both the licensee and the administrator of a residential care facility for the elderly, the individual shall comply with all of the licensee and certified administrator requirements.

NOTE: Authority cited: Section 1569.30 and 1569.616(j), Health and Safety Code. Reference: Sections 1569.1, 1569.2, 1569.17, 1569.30, 1569.31, 1569.312, 1569.315, 1569.613, 1569.616, and 1569.62, Health and Safety Code.

**87564.2 ADMINISTRATOR CERTIFICATION REQUIREMENTS 87564.2**

- (a) All individuals shall be certificate holders prior to being employed as an administrator, or shall have submitted to the Department the documentation required to obtain a certificate pursuant to Section 87564.2(b).
  - (1) Administrators who possess a valid Nursing Home Administrator license, issued by the California Board of Nursing Home Administrators, shall be exempt from completing an approved Initial Certification Training Program and taking a written test, provided the individual completes twelve (12) hours of classroom instruction in the following uniform Core of Knowledge areas:
    - (A) Laws, regulations, policies, and procedural standards that impact the operations of residential care facilities for the elderly.
    - (B) The use, misuse, and interaction of medication commonly used by the elderly in a residential setting.
    - (C) Resident admission, retention, and assessment procedures.
  - (2) Individuals who were both the licensee and administrator on or before July 1, 1991, shall complete an Initial Certification Training Program but shall not be required to take the written test. Individuals exempted from the written test shall be issued a conditional certification valid only for the administrator of the facility for which the exemption was granted.

**87564.2 ADMINISTRATOR CERTIFICATION REQUIREMENTS (Continued) 87564.2**

- (A) As a condition to becoming a certified administrator of another facility, a holder of a conditional certificate issued pursuant to Section 87564(a)(2) shall be required to pass the written test.
- (B) As a condition to applying for a new facility license, the holder of a conditional certificate issued pursuant to Section 87564(a)(2) shall be required to pass the written test.
- (3) An applicant for licensure shall be subject to the same application process for Initial Certification of Administrators as set forth in Section 87564.2(b).
- (b) To receive his/her certificate an applicant shall:
  - (1) Unless exempted by Section 87564.2(a)(1), successfully complete a Department-approved Initial Certification Training Program.
  - (2) Unless exempted by Section 87564.2(a)(1) or (a)(2), pass a written test administered by the Department within sixty (60) days of completion of an Initial Certification Training Program.
  - (3) Submit an application to the Department's certification section within thirty (30) days of being notified of having passed the test, or if the applicant is exempt from taking the written test, within 30 days of completing the certification training. The application shall contain the following:
    - (A) Proof that the applicant has successfully completed a Department-approved Initial Certification Training Program or, in the case of a Nursing Home Administrator, proof of completion of 12 hours of classroom instruction as specified in Section 87564.2(a)(1).
    - (B) Documentation of passing the written test or qualifying for an exemption pursuant to Section 87564.2(a)(1) or (a)(2).
    - (C) A statement certifying that the applicant is at least twenty-one (21) years of age.
    - (D) Fingerprint cards, or evidence that the applicant has submitted fingerprints to the Department of Justice at a livescan facility, or a statement that the applicant has a current criminal record clearance on file with the Department.
    - (E) A one hundred dollar (\$100) processing fee.
    - (F) A copy of the front and back of his/her current nursing home wallet license, or equivalent, if the applicant is a current Nursing Home Administrator.

**87564.2 ADMINISTRATOR CERTIFICATION REQUIREMENTS (Continued) 87564.2**

- (c) The Department shall not issue a certificate until it receives notification from the Department of Justice that the applicant has a criminal record clearance pursuant to Health and Safety Code Section 1569.17 or is able to transfer a current criminal record clearance pursuant to Health and Safety Code Section 1569.17(g)(1).
- (d) It shall be unlawful for any person not certified under this section to hold himself or herself out as a certified administrator. Any person willfully making any false representation as being a certified administrator is guilty of a misdemeanor.
- (e) Certificates issued under this section shall be renewed every two (2) years provided the certificate holder has complied with all renewal requirements.
- (f) Certificates shall be valid for a period of two (2) years and expire on either the anniversary date of initial issuance or on the individual's birthday during the second calendar year following certification.
  - (1) The certificate holder shall make an irrevocable election to have his or her recertification date for any subsequent recertification either on the date two (2) years from the date of issuance of the certificate or on the individual's birthday during the second calendar year following certification.
- (g) Time deadlines specified in Sections 87564.2(b)(2) and (3) may be extended for good cause as determined by the Department. Any request for an extension of time shall be in writing and shall contain a statement of all facts the applicant believes constitute good cause to extend a time deadline.

NOTE: Authority cited: Sections 1569.23(d), 1569.30 and 1569.616(j), Health and Safety Code. Reference: Sections 1569.17, 1569.171, 1569.23, 1569.30, 1569.315, 1569.613, and 1569.616, Health and Safety Code.

**87564.3 ADMINISTRATOR RECERTIFICATION REQUIREMENTS 87564.3**

- (a) Administrators shall complete at least forty (40) classroom hours of continuing education during each two (2)-year certification period.
  - (1) Administrators who renew their administrator certification on or after January 1, 2003, shall submit proof of having completed at least eight (8) hours of the 40 hour continuing education requirement in subjects related to serving residents with Alzheimer's Disease and other dementias, including, but not limited to, instruction related to direct care, physical environment, and admissions procedures and assessment.

**87564.3 ADMINISTRATOR RECERTIFICATION REQUIREMENTS (Continued) 87564.3**

- (A) This instruction may be taken as a single eight (8)-hour class or in smaller increments that total at least eight (8) hours within each two (2)-year renewal period.
- (2) Courses provided by vendors approved by the Department, or
- (3) Accredited educational institutions offering courses that are consistent with the requirements of this section, or

---

**HANDBOOK BEGINS HERE**

- (A) Examples of accredited educational institutions are community colleges and state colleges.

---

**HANDBOOK ENDS HERE**

---

- (4) Courses offered by vendors approved by other California State agencies provided that:
  - (A) The approval and enforcement procedures of the state agency are comparable to the approval and enforcement procedures of the Department, and
  - (B) The course relates to the Core of Knowledge as specified in Sections 87730(h)(1)(A) through (I).

---

**HANDBOOK BEGINS HERE**

- (C) Prior to taking a course from one of the entities specified in Sections 87564.3(a)(2) or (3), the certificate holder should study the course description carefully to ensure that it fits within the Core of Knowledge as specified in Sections 87730(h)(1)(A) through (I). If the course does not fit within the Core of Knowledge, it may not be credited toward the recertification requirement.
- (D) Examples of other California State agencies that meet the requirements specified in Section 84064.3(a)(3) are the Department of Developmental Services, Department of Rehabilitation, Board of Behavioral Science Examiners and Board of Psychology.

---

**HANDBOOK ENDS HERE**

---

- (b) Continuing education hours must be related to the Core of Knowledge and be completed through any combination of the following:



**87564.3 ADMINISTRATOR RECERTIFICATION REQUIREMENTS (Continued) 87564.3**

- | (c) Courses approved for continuing education credit shall require the physical presence of the certificate holder in a classroom setting, except that:
  - (1) The Department may approve courses where technology permits the simultaneous and interactive participation of the certificate holder, provided such participation is verifiable.
  
- | (d) To apply for recertification prior to the expiration date of the certificate, the certificate holder shall submit:
  - (1) A written request to recertify post-marked on or before the certificate expiration date.
  - (2) Evidence of completion of forty (40) continuing education hours as specified in Section 87564.3(a).
  - (3) Payment of a one hundred dollar (\$100) processing fee.

**This page is intentionally left blank.**

**87564.3 ADMINISTRATOR RECERTIFICATION REQUIREMENTS (Continued) 87564.3**

- (e) To apply for recertification after the expiration date of the certificate, but within four (4) years of the certificate expiration date, the certificate holder shall submit:
  - (1) A written request to recertify.
  - (2) Evidence of completion of the required continuing education hours as specified in Section 87564.3(a). The total number of hours required for recertification shall be determined by computing the number of continuing education hours the certificate holder would have been required to complete if they had remained certified. The date of computation shall be the date the written request for recertification is received by the Department.
  - (3) Payment of a delinquency fee equal to three times the renewal fee, or three hundred dollars (\$300).
- (f) Certificates not renewed within four (4) years of their expiration date shall not be renewed, restored, reissued or reinstated.
  - (1) Holders of certificates not renewed within four (4) years of their expiration date shall complete an Initial Certification Training Program as specified in Section 87564.2(b).
- (g) Certificate holders who possess a valid Nursing Home Administrator license shall be required to complete only twenty (20) of the required forty (40) hours of continuing education.
- (h) Certificate holders, as a condition of recertification, shall have a current criminal record clearance.
- (i) A processing fee of twenty-five dollars (\$25) shall be paid for the replacement of a lost certificate.
- (j) A certificate holder shall report any change of mailing address within thirty (30) days of the change to the Department's administrator certification section.
- (k) Whenever a certified administrator assumes or relinquishes responsibility for administering a residential care facility for the elderly, he or she shall provide written notice, within thirty (30) days, to:
  - (1) The licensing District Office responsible for receiving information regarding personnel changes at the licensed facility with whom the certificate holder is or was associated, and
  - (2) The Department's administrator certification section.

NOTE: Authority cited: Sections 1569.30 and 1569.616(j), Health and Safety Code. Reference: Sections 1569.17, 1569.171, 1569.613 and 1569.616, Health and Safety Code.

**87564.4 DENIAL OR REVOCATION OF A CERTIFICATE****87564.4**

- (a) The Department may deny or revoke any administrator certificate for violation of licensing regulations or for any of the following grounds:
- (1) The certificate holder procured a certificate by fraud or misrepresentation.
  - (2) The certificate holder knowingly made or gave a false statement or information in conjunction with the application for a certificate.
  - (3) The Department has issued an exclusion order against the certificate holder pursuant to Health and Safety Code Sections 1558, 1568.092, 1569.58 or 1596.8897 after the Department issued the certificate, and;
    - (A) The certificate holder did not appeal the exclusion order, or
    - (B) After the appeal, the Department issued a decision and order that upheld the exclusion order.
  - (4) The certificate holder does not have a current criminal record clearance.
  - (5) The certificate holder fails to comply with certificate renewal requirements.
    - (A) The Department may reinstate a certificate that has been revoked for failure to comply with certificate renewal requirements provided all conditions for recertification have been satisfied, including payment of all appropriate renewal and delinquency fees.
  - (6) The certificate holder engaged in conduct which is inimical to the health, morals, welfare, or safety of either an individual in or receiving services from the facility or the people of the State of California.
- (b) Any denial or revocation of an administrator certificate may be appealed as provided by Health and Safety Code Section 1569.51.
- (c) Unless otherwise ordered by the Department, any application for an administrator certificate submitted after a denial or revocation action shall be processed in accordance with the provisions of Health and Safety Code Section 1569.16.

**87564.4 DENIAL OR REVOCATION OF A CERTIFICATE (Continued)****87564.4****HANDBOOK BEGINS HERE**

Health and Safety Code Section 1569.16, in pertinent part, provides that:

(a)(1) If an applicant 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), Chapter 2 (commencing with Section 1250), Chapter 3 (commencing with Section 1500), Chapter 3.01 (commencing with Section 1568.01), Chapter 3.4 (commencing with Section 1596.70), Chapter 3.5 (commencing with Section 1596.90), or Chapter 3.6 (commencing with Section 1597.30) and the prior license was revoked within the preceding two years, the department shall cease any further review of the application until two years have elapsed from the date of the revocation.

(a)(3) If an application for a license or special permit indicates, or the department determines during the application review process, that the applicant was excluded from a facility licensed by the department pursuant to Section 1558, 1568.092, 1569.58, or 1596.8897, the department shall cease any further review of the application unless the excluded individual has been reinstated pursuant to Section 11522 of the Government Code by the department.

(b) If an application for a license or special permit indicates, or the department determines during the application review process, that the applicant had previously applied for a license under any of the chapters listed in paragraph (1) of subdivision (a) 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**

NOTE: Authority cited: Sections 1569.30 and 1569.616(j), Health and Safety Code. Reference: Sections 1569.16, 1569.51, 1569.613, and 1569.616, Health and Safety Code.

**87564.5 FORFEITURE OF A CERTIFICATE****87564.5**

- (a) Unless otherwise ordered by the Department, the certificate shall be considered forfeited under any of the following conditions:
- (1) The Department has revoked any license held by the certificate holder after the Department issued the certificate.
  - (2) The Department has issued an exclusion order against the certificate holder pursuant to Health and Safety Code Sections 1558, 1568.092, 1569.58, or 1596.8897 after the Department issued the certificate, and;
    - (A) The certificate holder did not appeal the exclusion order or,
    - (B) After the appeal, the Department issued a decision and order that upheld the exclusion order.
- (b) Unless otherwise ordered by the Department, any application for an administrator certificate submitted after a certificate has been forfeited shall be processed in accordance with the provisions of Health and Safety Code Sections 1569.16 and/or 1569.58(h).

---

**HANDBOOK BEGINS HERE**

---

Health and Safety Code Section 1569.16, in pertinent part, provides that:

(a)(1) If an applicant 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), Chapter 2 (commencing with Section 1250), Chapter 3 (commencing with Section 1500), Chapter 3.01 (commencing with Section 1568.01), Chapter 3.4 (commencing with Section 1596.70), Chapter 3.5 (commencing with Section 1596.90), or Chapter 3.6 (commencing with Section 1597.30) and the prior license was revoked within the preceding two years, the department shall cease any further review of the application until two years have elapsed from the date of the revocation.

(a)(3) If an application for a license or special permit indicates, or the department determines during the application review process, that the applicant was excluded from a facility licensed by the department pursuant to Section 1558, 1568.092, 1569.58, or 1596.8897, the department shall cease any further review of the application unless the excluded individual has been reinstated pursuant to Section 11522 of the Government Code by the department.

---

**HANDBOOK CONTINUES**

---

## 87564.5 FORFEITURE OF A CERTIFICATE (Continued)

87564.5

---

**HANDBOOK CONTINUES**

---

(b) If an application for a license or special permit indicates, or the department determines during the application review process, that the applicant had previously applied for a license under any of the chapters listed in paragraph (1) of subdivision (a) 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.

Health and Safety Code Section 1569.58(h), in pertinent part, provides that:

(1)(A) In cases where the excluded person appealed the exclusion order and there is a decision and order of the department upholding the exclusion order, the person shall be prohibited from working in any facility or being licensed to operate any facility licensed by the department or from being a certified foster parent for the remainder of the excluded person's life, unless otherwise ordered by the department.

(1)(B) The excluded individual may petition for reinstatement one year after the effective date of the decision and order of the department upholding the exclusion order pursuant to Section 11522 of the Government Code. The department shall provide the excluded person with a copy of Section 11522 of the Government Code with the decision and order.

(2)(A) In cases where the department informed the excluded person of his or her right to appeal the exclusion order and the excluded person did not appeal the exclusion order, the person shall be prohibited from working in any facility or being licensed to operate any facility licensed by the department or a certified foster parent for the remainder of the excluded person's life, unless otherwise ordered by the department.

(2)(B) The excluded individual may petition for reinstatement after one year has elapsed from the date of the notification of the exclusion order pursuant to Section 11522 of the Government Code. The department shall provide the excluded person with a copy of Section 11522 of the Government Code with the exclusion order.

---

**HANDBOOK ENDS HERE**

---

NOTE: Authority cited: Sections 1569.30 and 1569.616(j), Health and Safety Code. Reference: Sections 1558, 1568.092, 1569.16, 1569.58, 1569.616 and 1569.8897, Health and Safety Code.

**87565 PERSONNEL REQUIREMENTS - GENERAL****87565**

- (a) Facility personnel shall at all times be sufficient in numbers, and competent to provide the services necessary to meet resident needs. In facilities licensed for sixteen or more, sufficient support staff shall be employed to ensure provision of personal assistance and care as required in Section 87578. Additional staff shall be employed as necessary to perform office work, cooking, house cleaning, laundering, and maintenance of buildings, equipment and grounds. The licensing agency may require any facility to provide additional staff whenever it determines through documentation that the needs of the particular residents, the extent of services provided, or the physical arrangements of the facility require such additional staff for the provision of adequate services.
- (b) All persons who supervise employees or who supervise or care for residents shall be at least eighteen (18) years of age.
- (c) All RCFE staff who assist residents with personal activities of daily living shall receive at least ten hours of initial training within the first four weeks of employment and at least four hours annually thereafter.
- (1) This training shall be administered on the job, in a classroom setting, or any combination of the two.
  - (2) The training shall include, but not be limited to, the following:
    - (A) The aging process and physical limitations and special needs of the elderly. At least two (2) of the required ten (10) hours shall cover this subject.
    - (B) Importance and techniques of personal care services, including but not limited to, bathing, grooming, dressing, feeding, toileting, and universal precautions. At least three (3) of the required ten (10) hours shall cover this subject.
    - (C) Residents' rights, as specified in Section 87572.
    - (D) Policies and procedures regarding medications, including the knowledge in Section 87565(d)(4). At least two (2) of the required ten (10) hours shall cover this subject. Any on-the-job training provided for the requirements in Section 87565(d)(4) may also count towards the requirement in this subsection.
    - (E) Psychosocial needs of the elderly, such as recreation, companionship, independence, etc.
    - (F) Recognizing signs and symptoms of dementia in individuals.



**87565 PERSONNEL REQUIREMENTS - GENERAL (Continued)****87565**

- (3) All training shall be conducted by a person who is knowledgeable in a subject that is relevant to the subject area in which training is to be provided, and who satisfies at least one of the following criteria related to education and experience:
- (A) Both a four-year college degree, graduate degree or professional degree, and two (2) years of experience in an area relevant to caring for the needs of the elderly, or
  - (B) License to work as a health care provider in California, or
  - (C) At least two years of experience in California as an administrator of an RCFE, within the last eight years, and with a record of administering facilities in substantial compliance, as defined in Section 87101(s).
- (4) Training may include use of books, video instruction tapes, interactive CD-ROMs and similar materials, upon the approval of that material by a trainer who satisfies the criteria of Section 87565(c)(3).
- (5) The licensee shall maintain documentation pertaining to staff training in the personnel records, as specified in Section 87566(c)(2). For on-the-job training, documentation shall consist of a statement or notation, made by the trainer, of the content covered in the training. Each item of documentation shall include a notation that indicates which of the criteria of Section 87565(c)(3) is met by the trainer.

**87565 PERSONNEL REQUIREMENTS - GENERAL (Continued)****87565**

- (d) All personnel shall be given on the job training or have related experience in the job assigned to them. This training and/or related experience shall provide knowledge of and skill in the following, as appropriate for the job assigned and as evidenced by safe and effective job performance:
- (1) Principles of good nutrition, good food preparation and storage, and menu planning.
  - (2) Housekeeping and sanitation principles.
  - (3) Skill and knowledge required to provide necessary resident care and supervision, including the ability to communicate with residents.
  - (4) Knowledge required to safely assist with prescribed medications which are self-administered.
  - (5) Knowledge necessary in order to recognize early signs of illness and the need for professional help.
  - (6) Knowledge of community services and resources.
- (e) In facilities licensed for sixteen (16) or more, the requirements of Section 87565(d) shall be met with planned on the job training program that utilizes orientation, skill training and continuing education.
- (f) All personnel, including the licensee and administrator, shall be in good health, and physically and mentally capable of performing assigned tasks. Good physical health shall be verified by a health screening, including a chest x-ray or an intradermal test, performed by a physician not more than six (6) months prior to or seven (7) days after employment or licensure. A report shall be made of each screening, signed by the examining physician. The report shall indicate whether the person is physically qualified to perform the duties to be assigned, and whether he/she has any health condition that would create a hazard to him/herself, other staff members or residents. A signed statement shall be obtained from each volunteer affirming that he/she is in good health. Personnel with evidence of physical illness or emotional instability that poses a significant threat to the well-being of residents shall be relieved of their duties.

**87565 PERSONNEL REQUIREMENTS - GENERAL (Continued)****87565**

- (g) Prior to employment or initial presence in the facility, all employees and volunteers subject to a criminal record review shall:
- (1) Obtain a California clearance or a criminal record exemption as required by law or Department regulations or
  - (2) Request a transfer of a criminal record clearance as specified in Section 87219(c) or
  - (3) Request and be approved for a transfer of a criminal record exemption, as specified in Section 87219.1(r), unless, upon request for a transfer, the Department permits the individual to be employed, reside or be present at the facility.
- (h) All services requiring specialized skills shall be performed by personnel qualified by training or experience in accordance with recognized professional standards.
- (i) Residents shall not be used as substitutes for required staff but may, as a voluntary part of their program of activities, participate in household duties and other tasks suited to the resident's needs and abilities.
- (j) Volunteers may be utilized but may not be included in the facility staffing plan. Volunteers shall be supervised.

NOTE: Authority cited: Sections 1569.30 and 1569.625, Health and Safety Code. Reference: Sections 1569.17, 1569.30, 1569.31, 1569.312, and 1569.625, Health and Safety Code; and Section 42001, Vehicle Code.

**87566 PERSONNEL RECORDS****87566**

- (a) The licensee shall ensure that personnel records are maintained on the licensee, administrator and each employee. Each personnel record shall contain the following information:
- (1) Employee's full name.
  - (2) Social Security number.
  - (3) Date of employment.
  - (4) Written verification that the employee is at least 18 years of age, including, but not necessarily limited to, a copy of his/her birth certificate or driver's license.
  - (5) Home address and telephone number.
  - (6) Educational background.
    - (A) For administrators this shall include verification that he/she meets the educational requirements in Sections 87564(b) and (c).
  - (7) Past experience, including types of employment and former employers.
  - (8) Type of position for which employed.
  - (9) Termination date if no longer employed by the facility.
  - (10) Reasons for leaving.
  - (11) A health screening as specified in Section 87565.
  - (12) Hazardous health conditions documents as specified in Section 87565.
  - (13) For employees that are required to be fingerprinted pursuant to Section 80019:
    - (A) A signed statement regarding their criminal record history as required by Section 87219(d).
    - (B) Documentation of either a criminal record clearance or a criminal record exemption as required by Section 87219(e).
      1. For Certified Administrators, a copy of their current and valid Administrative Certification meets this requirement.

**87566 PERSONNEL RECORDS (Continued)****87566**

- (b) Personnel records shall be maintained for all volunteers and shall contain the following:
- (1) A health statement as specified in Section 87565(e).
  - (2) Health screening documents as specified in Section 87565(e).
  - (3) For volunteers that are required to be fingerprinted pursuant to Section 87219:
    - (A) A signed statement regarding their criminal record history as required by Section 87219(d).
    - (B) Documentation of either a criminal record clearance or a criminal record exemption as required by Section 87219(e).
- (c) Licensees shall maintain in the personnel records verification of required staff training and orientation.
- (1) The following staff training and orientation shall be documented:
    - (A) For staff who assist with personal activities of daily living, there shall be documentation of at least ten hours of initial training within the first four weeks of employment, and at least four hours of training annually thereafter in one or more of the content areas as specified in Section 87565(c)(2).
    - (B) For staff who provide direct care to residents with dementia in a facility in which the licensee advertises dementia special care, programming, and/or environments, the licensee shall document the following:
      1. The orientation received as specified in Section 87725.1(a)(1).
      2. The in-service training received as specified in Section 87725.1(a)(2).
  - (2) Documentation of staff training shall include:
    - (A) Trainer's full name;
    - (B) Subject(s) covered in the training;
    - (C) Date(s) of attendance; and
    - (D) Number of training hours per subject.
      1. If the training is provided by a trainer in a classroom setting, documentation shall consist of notices of course completion signed by the trainer.

## 87566 PERSONNEL RECORDS (Continued)

87566

2. If the educational hours/units are obtained through an accredited educational institution, documentation shall include a copy of a transcript or official grade slip showing a passing mark.
  3. If the educational hours/units are obtained through continuing education, documentation shall include a transcript or official grade slip showing a passing mark, if applicable, or a Certificate of Completion.
- (d) The licensee shall maintain documentation that an administrator has met the certification requirements specified in Section 87564.2 or the recertification requirements in Section 87564.3.
- (e) In all cases, personnel records shall demonstrate adequate staff coverage necessary for facility operation by documenting the hours actually worked.
- (f) All personnel records shall be available to the licensing agency to inspect, audit, and copy upon demand during normal business hours. Records may be removed if necessary for copying. Removal of records shall be subject to the following requirements:
- (1) Licensing representatives shall not remove any current emergency or health-related information for current personnel unless the same information is otherwise readily available in another document or format.
  - (2) Prior to removing any records, a licensing representative shall prepare a list of the records to be removed, sign and date the list upon removal of the records, and leave a copy of the list with the administrator or designee.
  - (3) Licensing representatives shall return the records undamaged and in good order within three business days following the date the records were removed.
- (g) All personnel records shall be maintained at the facility and shall be available to the licensing agency for review.
- (1) The licensee shall be permitted to retain such records in a central administrative location provided that they are readily available to the licensing agency at the facility as specified in Section 87566(f).
- (h) All personnel records shall be retained for at least three (3) years following termination of employment.

NOTE: Authority cited: Sections 1569.30 and 1569.616, Health and Safety Code. Reference: Sections 1569.17(c), 1569.31, 1569.312, 1569.613, 1569.616, and 1569.625, Health and Safety Code.

**87567 GENERAL****87567**

- (a) Prior to accepting a resident for care and in order to evaluate his/her suitability, the facility shall, as specified in this article:
- (1) Conduct an interview with the applicant and his responsible person.
  - (2) Perform a pre-admission appraisal.
  - (3) Obtain and evaluate a recent medical assessment.
  - (4) Execute the admissions agreement.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.1, 1569.2, 1569.30, 1569.31 and 1569.312, Health and Safety Code.

**87568 ADMISSION AGREEMENTS****87568**

- (a) The licensee shall complete an individual written admission agreement with each resident and that resident's responsible person or conservator, if any.
- (b) The licensee shall complete and maintain in the resident's file a Telecommunications Device Notification form (LIC 9158, 5/97) for each resident whose pre-admission appraisal or medical assessment indicates he/she is deaf, hearing-impaired, or otherwise disabled.
- (c) Agreements shall specify the following:
- (1) Basic services to be made available.
  - (2) Optional services which are available.
  - (3) Payment provisions, including the following:
    - (A) Basic services rate, including any exempt-income-allowance, if the resident agrees to such charge.
    - (B) Optional services costs.
    - (C) Payor.
    - (D) Due date.
    - (E) Funding source, provided that the resident may refuse to disclose such source.

**87568**      **ADMISSION AGREEMENTS (Continued)****87568**

- (4) Modification conditions, including requirement for provision of at least 30 days prior written notice to the resident of any basic rate change, or for SSI/SSP rate changes, as soon as the facility is notified.
- (A) Agreements involving persons whose care is funded at government-prescribed rates may specify that operative dates of government modifications shall be considered operative dates for basic service rate modifications.
- (5) Refund conditions.
- (A) When the Department orders relocation of a resident under the provisions of Section 87701.1(a), the resident shall not be held responsible for meeting any advance notice requirement imposed by the licensee in the admission agreement. The licensee shall refund any money to which the resident would have been entitled had notice been given as required by the admission agreement.
- (6) That the Department or licensing agency has the authority to examine residents' records as a part of their evaluation of the facility.
- (7) General facility policies which are for the purpose of making it possible for residents to live together.
- (8) Those actions, circumstances, or conditions specified in Section 87589 which may result in the resident's eviction from the facility. Except for general facility policies developed pursuant to Section 87589(a)(3), the eviction provisions shall not be modified.
- (9) The facility's policy concerning family visits and other communication with residents, pursuant to Health and Safety Code Section 1569.313.

---

**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 resident and shall provide ample opportunities for family participation in activities at the facility.

---

**HANDBOOK ENDS HERE**

---



87568      **ADMISSION AGREEMENTS** (Continued)

87568

- (10) Other conditions under which the agreement may be terminated.
- (d) If additional services are available through the facility to be purchased by the residents, such as cosmetology, and these are not specified in the admission agreement, a list of these services and charges shall be posted in a location accessible to residents.
- (e) Such agreements shall be dated and signed, acknowledging the contents of the document, by the resident and the resident's responsible person or conservator and the licensee or the licensee's designated representative no later than seven days following admission. Attachments to the agreement may be utilized as long as they are also dated and signed.
- (f) The licensee shall retain in the resident's file the original of the initial admission agreement and all subsequent modifications.
- (1) The licensee shall provide a copy of the current admission agreement to the resident and the resident's responsible person or conservator, if any.
- (g) The licensee shall comply with all terms and conditions set forth in the admission agreement. No written or oral contract with any other person shall release the licensee from responsibility for provision of safe and healthful facilities, equipment, and accommodations.
- (h) The agreement shall be automatically terminated by the death of the resident, whose relatives shall not be liable for any payment beyond that due at the date of death, unless agreed to in writing or ordered by the court.
- (i) No licensee shall enter into any continuing care contract with any person without approval by the Department in accordance with Health and Safety Code, Chapter 10, Division 2.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.1, 1569.2, 1569.159, 1569.30, 1569.31, 1569.312, 1569.313, 1569.54, and 1770 et seq., Health and Safety Code.

**87569 MEDICAL ASSESSMENT****87569**

- (a) Prior to a person's acceptance as a resident, the licensee shall obtain and keep on file, documentation of a medical assessment, signed by a physician, made within the last year. The licensee shall be permitted to use the form LIC 602 (Rev. 9/89), Physician's Report, to obtain the medical assessment.
- (b) The medical assessment shall include, but not be limited to:
- (1) A physical examination of the resident indicating the physician's primary diagnosis and secondary diagnosis, if any and results of an examination for communicable tuberculosis, other contagious/infectious diseases or other medical conditions which would preclude care of the person by the facility.
  - (2) Documentation of prior medical services and history and current medical status including, but not limited to height, weight, and blood pressure.
  - (3) A record of current prescribed medications, and an indication of whether the medication should be centrally stored, pursuant to Section 87575(h)(1).
  - (4) Identification of physical limitations of the person to determine his/her capability to participate in the programs provided by the licensee, including any medically necessary diet limitations.
  - (5) The determination whether the person is ambulatory or nonambulatory as defined in Section 87101(a) or (n), or bedridden as defined in Section 87582(d). The assessment shall indicate whether nonambulatory status is based upon the resident's physical condition, mental condition or both.
  - (6) Information applicable to the pre-admission appraisal specified in Section 87583.
- (c) The licensee shall obtain an updated medical assessment when required by the Department.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.1, 1569.2, 1569.30, 1569.31, 1569.312, 1569.315, and 1569.54, Health and Safety Code.

**87570 RESIDENT RECORDS****87570**

- (a) The licensee shall ensure that a separate, complete, and current record is maintained for each resident in the facility or in a central administrative location readily available to facility staff and to licensing agency staff.
- (b) Each record shall contain at least the following information:
- (1) Resident's name and Social Security number.
  - (2) Dates of admission and discharge.
  - (3) Last known address.
  - (4) Birthdate.
  - (5) Religious preference, if any, and name and address of clergyman or religious advisor, if any.
  - (6) Names, addresses, and telephone numbers of responsible persons, as defined in Section 87101(r), to be notified in case of accident, death, or other emergency.
  - (7) Name, address and telephone number of physician and dentist to be called in an emergency.
  - (8) Reports of the medical assessment specified in Section 87569, and of any special problems or precautions.
  - (9) The documentation required by Section 87702.1(a) for residents with an allowable health condition.
  - (10) Ambulatory status.
  - (11) Continuing record of any illness, injury, or medical or dental care, when it impacts the resident's ability to function or the services he needs.
  - (12) Current centrally stored medications as specified in Section 87575.
  - (13) The admission agreement and pre-admission appraisal, specified in Sections 87568 and 87583.
  - (14) Records of resident's cash resources as specified in Section 87227.
  - (15) Documents and information required by the following:
    - (A) Section 87583, Pre-Admission Appraisal - General;
    - (B) Section 87584, Functional Capabilities;
    - (C) Section 87585, Mental Condition;

**87570 RESIDENT RECORDS (Continued)****87570**

- (D) Section 87586, Social Factors;
  - (E) Section 87587, Reappraisals; and
  - (F) Section 87588, Documentation and Support.
- (c) All information and records obtained from or regarding residents shall be confidential.
- (1) The licensee shall be responsible for storing active and inactive records and for safeguarding the confidentiality of their contents. The licensee and all employees shall reveal or make available confidential information only upon the resident's written consent or that of his designated representative.
- (d) All resident records shall be available to the licensing agency to inspect, audit, and copy upon demand during normal business hours. Records may be removed if necessary for copying. Removal of records shall be subject to the following requirements:
- (1) Licensing representatives shall not remove the following current records for current residents unless the same information is otherwise readily available in another document or format:
    - (A) Religious preference, if any, and name and address of clergyman or religious advisor, if any, as specified in Section 87570(b)(5).
    - (B) Name, address, and telephone number of responsible person(s) as specified in Section 87570(b)(6).
    - (C) Name, address, and telephone number of the resident's physician and dentist as specified in Section 87570(b)(7).
    - (D) Information relating to the resident's medical assessment and any special problems or precautions as specified in Section 87570(b)(8).
    - (E) Documentation required for residents with an allowable health condition as specified in Section 87570(b)(9).
    - (F) Information on ambulatory status as specified in Section 87570(b)(10).
    - (G) Continuing record of any illness, injury, or medical or dental care when it affects the resident's ability to function, or services needed, as specified in Section 87570(b)(11).
    - (H) Records of current medications as specified in Section 87570(b)(12).
    - (I) Any other records containing current emergency or health-related information for current residents.

**87570 RESIDENT RECORDS (Continued)****87570**

- (2) Prior to removing any records, a licensing representative shall prepare a list of the records to be removed, sign and date the list upon removal of the records, and leave a copy of the list with the administrator or designee.
- (3) Licensing representatives shall return the records undamaged and in good order within three business days following the date the records were removed.
- (e) Original records or photographic reproductions shall be retained for a minimum of three (3) years following termination of service to the resident.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.1, 1569.2, 1569.31, 1569.312, and 1569.315, Health and Safety Code; and Section 11006.9, Welfare and Institutions Code.

**This page is left intentionally blank**

**87571 REGISTER OF RESIDENTS****87571**

- (a) The licensee shall ensure that a current register of all residents in the facility is maintained and contains the following updated information:
- (1) The resident's name and ambulatory status as specified in Sections 87570(b)(1) and (b)(10).
  - (2) Information on the resident's attending physician as specified in Section 87570(b)(7).
  - (3) Information on the resident's responsible person as specified in Section 87570(b)(6).
- (b) Registers of residents shall be available to the licensing agency to inspect, audit, and copy upon demand during normal business hours. Registers may be removed if necessary for copying. Removal of registers shall be subject to the following requirements:
- (1) Licensing representatives shall not remove current registers unless the same information is otherwise readily available in another document or format.
  - (2) Prior to removing any registers, a licensing representative shall prepare a list of the registers to be removed, sign and date the list upon removal of the records, and leave a copy of the list with the administrator or designee.
  - (3) Licensing representatives shall return the registers undamaged and in good order within three business days following the date the records were removed.
- (c) The register of current residents shall be kept in a central location at the facility.
- (1) The register shall be treated as confidential information pursuant to Section 87570(c).

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Section 1569.315, Health and Safety Code.

**This page is intentionally left blank.**



**87572 PERSONAL RIGHTS****87572**

- (a) Each resident shall have personal rights which include, but are not limited to, the following:
- (1) To be accorded dignity in his/her personal relationships with staff, residents, and other persons.
  - (2) To be accorded safe, healthful and comfortable accommodations, furnishings and equipment.
  - (3) To be free from corporal or unusual punishment, humiliation, intimidation, mental abuse, or other actions of a punitive nature, such as withholding of monetary allowances or interfering with daily living functions such as eating or sleeping patterns or elimination.
  - (4) To be informed by the licensee of the provisions of law regarding complaints and of procedures to confidentially register complaints, including, but not limited to, the address and telephone number of the complaint receiving unit of the licensing agency.
  - (5) To have the freedom of attending religious services or activities of his/her choice and to have visits from the spiritual advisor of his/her choice. Attendance at religious services, either in or outside the facility, shall be on a completely voluntary basis.
  - (6) To leave or depart the facility at any time and to not be locked into any room, building, or on facility premises by day or night. This does not prohibit the establishment of house rules, such as the locking of doors at night, for the protection of residents; nor does it prohibit, with permission of the licensing agency, the barring of windows against intruders.
  - (7) To visit the facility prior to residence along with his/her family and responsible persons.
  - (8) To have his/her family or responsible persons regularly informed by the facility of activities related to his care or services including ongoing evaluations, as appropriate to the resident's needs.
  - (9) To have communications to the facility from his/her family and responsible persons answered promptly and appropriately.

## 87572 PERSONAL RIGHTS (Continued)

87572

- (10) To be informed of the facility's policy concerning family visits and other communications with residents, as specified in Health and Safety Code Section 1569.313.

---

**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 resident and shall provide ample opportunities for family participation in activities at the facility.

---

**HANDBOOK ENDS HERE**

---

- (11) To have his/her visitors, including ombudspersons and advocacy representatives permitted to visit privately during reasonable hours and without prior notice, provided that the rights of other residents are not infringed upon.
- (12) To wear his/her own clothes; to keep and use his/her own personal possessions, including his/her toilet articles; and to keep and be allowed to spend his/her own money.
- (13) To have access to individual storage space for private use.
- (14) To have reasonable access to telephones, to both make and receive confidential calls. The licensee may require reimbursement for long distance calls.
- (15) To mail and receive unopened correspondence in a prompt manner.
- (16) To receive or reject medical care, or other services.
- (17) To receive assistance in exercising the right to vote.
- (18) To move from the facility.

<b>87572</b>	<b>PERSONAL RIGHTS (Continued)</b>	<b>87572</b>
--------------	------------------------------------	--------------

- (b) At admission, a resident and the resident's responsible person or conservator shall be personally advised of and given a list of these rights. The licensee shall have each resident and the resident's responsible person or conservator sign a copy of these rights, and the signed copy shall be included in the resident's record.
- (c) Facilities licensed for seven (7) or more shall prominently post, in areas accessible to the residents and their relatives, the following:
  - (1) Procedures for filing confidential complaints.
  - (2) A copy of these rights or, in lieu of a posted copy, instructions on how to obtain additional copies of these rights.
- (d) The information in (c) above shall be posted in English, and in facilities where a significant portion of the residents cannot read English, in the language they can read.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.1, 1569.30, 1569.31, 1569.312, and 1569.313, Health and Safety Code.

<b>87573</b>	<b>TELEPHONES</b>	<b>87573</b>
--------------	-------------------	--------------

All facilities shall have telephone service on the premises. Facilities with a capacity of sixteen (16) or more persons shall be listed in the telephone directory under the name of the facility.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.2, 1569.31 and 1569.312, Health and Safety Code.

<b>87574</b>	<b>MOTOR VEHICLES USED IN TRANSPORTING RESIDENTS</b>	<b>87574</b>
--------------	--	--------------

Only drivers licensed for the type of vehicle operated shall be permitted to transport residents. The rated seating capacity of the vehicles shall not be exceeded. Any vehicle used by the facility to transport residents shall be maintained in a safe operating condition.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.2, 1569.31 and 1569.312, Health and Safety Code.

**87575 INCIDENTAL MEDICAL AND DENTAL CARE****87575**

- (a) A plan for incidental medical and dental care shall be developed by each facility. The plan shall encourage routine medical and dental care and provide for assistance in obtaining such care, by compliance with the following:
- (1) The licensee shall arrange, or assist in arranging, for medical and dental care appropriate to the conditions and needs of residents.
  - (2) The licensee shall provide assistance in meeting necessary medical and dental needs. This includes transportation which may be limited to the nearest available medical or dental facility which will meet the resident's need. In providing transportation the licensee shall do so directly or make arrangements for this service.
  - (3) There shall be arrangements for separation and care of residents whose illness requires separation from others.
  - (4) When residents require prosthetic devices, vision and hearing aids, the staff shall be familiar with the use of these devices, and shall assist such persons with their utilization as needed.
  - (5) The licensee shall assist residents with self-administered medications as needed.
  - (6) Facility staff, except those authorized by law, shall not administer injections, but staff designated by the licensee may assist persons with self-administration as needed. Assistance with self-administered medications shall be limited to the following:
    - (A) Medications usually prescribed for self-administration which have been authorized by the person's physician.
    - (B) Medications during an illness determined by a physician to be temporary and minor.
    - (C) Assistance required because of tremor, failing eyesight and similar conditions.
    - (D) Assistance with self-administration does not include forcing a resident to take medication, hiding or camouflaging medications in other substances without the resident's knowledge and consent, or otherwise infringing upon a resident's right to refuse to take a medication.
  - (7) When requested by the prescribing physician or the Department, a record of dosages of medications which are centrally stored shall be maintained by the facility.

**87575 INCIDENTAL MEDICAL AND DENTAL CARE (Continued)****87575**

- (8) There shall be adequate privacy for first aid treatment of minor injuries and for examination by a physician if required.
- (9) If a facility has no medical unit on the grounds, a complete first aid kit shall be maintained and be readily available in a specific location in the facility. The kit shall be a general type approved by the American Red Cross, or shall contain at least the following:
  - (A) A current edition of a first aid manual approved by the American Red Cross, the American Medical Association or a state or federal health agency.
  - (B) Sterile first aid dressings.
  - (C) Bandages or roller bandages.
  - (D) Scissors.
  - (E) Tweezers.
  - (F) Thermometers.
- (b) If the resident's physician has stated in writing that the resident is able to determine and communicate his/her need for a prescription or nonprescription PRN medication, facility staff shall be permitted to assist the resident with self-administration of his/her PRN medication.
- (c) If the resident's physician has stated in writing that the resident is unable to determine his/her own need for nonprescription PRN medication but can communicate his/her symptoms clearly, facility staff designated by the licensee shall be permitted to assist the resident with self-administration, provided all of the following requirements are met:
  - (1) There is written direction from a physician, on a prescription blank, specifying the name of the resident, the name of the medication, all of the information in Section 87575(e), instructions regarding a time or circumstance (if any) when it should be discontinued, and an indication when the physician should be contacted for a medication reevaluation.
  - (2) Once ordered by the physician the medication is given according to the physician's directions.

**87575 INCIDENTAL MEDICAL AND DENTAL CARE (Continued)****87575**

- (3) A record of each dose is maintained in the resident's record. The record shall include the date and time the PRN medication was taken, the dosage taken, and the resident's response.
- (d) If the resident is unable to determine his/her own need for a prescription or nonprescription PRN medication, and is unable to communicate his/her symptoms clearly, facility staff designated by the licensee, shall be permitted to assist the resident with self-administration provided all of the following requirements are met:
- (1) Facility staff shall contact the resident's physician prior to each dose, describe the resident's symptoms, and receive direction to assist the resident in self-administration of that dose of medication.
  - (2) The date and time of each contact with the physician, and the physician's directions, shall be documented and maintained in the resident's facility record.
  - (3) The date and time the PRN medication was taken, the dosage taken, and the resident's response shall be documented and maintained in the resident's facility record.
- (e) For every prescription and nonprescription PRN medication for which the licensee provides assistance there shall be a signed, dated written order from a physician, on a prescription blank, maintained in the residents file, and a label on the medication. Both the physician's order and the label shall contain at least all of the following information.
- (1) The specific symptoms which indicate the need for the use of the medication.
  - (2) The exact dosage.
  - (3) The minimum number of hours between doses.
  - (4) The maximum number of doses allowed in each 24-hour period.
- (f) Emergency care requirements shall include the following:
- (1) The name, address, and telephone number of each resident's physician and dentist shall be readily available to that resident, the licensee, and facility staff.

**87575****INCIDENTAL MEDICAL AND DENTAL CARE (Continued)****87575**

- | (2) The name, address and telephone number of each emergency agency to be called in the event of an emergency, including but not limited to the fire department, crisis center or paramedical unit or medical resource, shall be posted in a location visible to both staff and residents.
- | (3) The name and telephone number of an ambulance service shall be readily available.
- | (4) Staff providing care shall receive appropriate training in first aid from persons qualified by such agencies as the American Red Cross.

**87575 INCIDENTAL MEDICAL AND DENTAL CARE (Continued)****87575**

- (g) The licensee shall immediately telephone 9-1-1 if an injury or other circumstance has resulted in an imminent threat to a resident's health including, but not limited to, an apparent life-threatening medical crisis except as specified in Sections 87575.1(c)(2) or (c)(3).
- (h) The following requirements shall apply to medications which are centrally stored:
- (1) Medications shall be centrally stored under the following circumstances:
    - (A) The preservation of medicines requires refrigeration, if the resident has no private refrigerator.
    - (B) Any medication is determined by the physician to be hazardous if kept in the personal possession of the person for whom it was prescribed.
    - (C) Because of potential dangers related to the medication itself, or due to physical arrangements in the facility and the condition or the habits of other persons in the facility, the medications are determined by either a physician, the administrator, or Department to be a safety hazard to others.
  - (2) Centrally stored medicines shall be kept in a safe and locked place that is not accessible to persons other than employees responsible for the supervision of the centrally stored medication.
  - (3) Each container shall carry all of the information specified in (6)(A) through (E) below plus expiration date and number of refills.
  - (4) All centrally stored medications shall be labeled and maintained in compliance with state and federal laws. No persons other than the dispensing pharmacist shall alter a prescription label.
  - (5) Each resident's medication shall be stored in its originally received container. No medications shall be transferred between containers.
  - (6) The licensee shall be responsible for assuring that a record of centrally stored prescription medications for each resident is maintained for at least one year and includes:
    - (A) The name of the resident for whom prescribed.
    - (B) The name of the prescribing physician.
    - (C) The drug name, strength and quantity.



**87575 INCIDENTAL MEDICAL AND DENTAL CARE (Continued) 87575**

- (D) The date filled.
  - (E) The prescription number and the name of the issuing pharmacy.
  - (F) Instructions, if any, regarding control and custody of the medication.
- (i) Prescription medications which are not taken with the resident upon termination of services, not returned to the issuing pharmacy, nor retained in the facility as ordered by the resident's physician and documented in the resident's record nor disposed of according to the hospice's established procedures or which are otherwise to be disposed of shall be destroyed in the facility by the facility administrator and one other adult who is not a resident. Both shall sign a record, to be retained for at least three years, which lists the following:
- (1) Name of the resident.
  - (2) The prescription number and the name of the pharmacy.
  - (3) The drug name, strength and quantity destroyed.
  - (4) The date of destruction.
- (j) In all facilities licensed for sixteen (16) persons or more, one or more employees shall be designated as having primary responsibility for assuring that each resident receives needed first aid and needed emergency medical services and for assisting residents as needed with self-administration of medications. The names of the staff employees so responsible and the designated procedures shall be documented and made known to all residents and staff.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1250, 1569.1, 1569.2, 1569.30, 1569.31, 1569.312, and 1569.73, Health and Safety Code.

**87575.1 ADVANCE HEALTH CARE DIRECTIVES, REQUESTS TO FOREGO RESUSCITATIVE MEASURES, AND DO-NOT-RESUSCITATE FORMS 87575.1**

- (a) Upon admission, a facility shall provide each resident, and representative or responsible person of each resident, with written information about the right to make decisions concerning medical care. This information shall include, but not be limited to, the department's approved brochure entitled "Your Right To Make Decisions About Medical Treatment," PUB 325, (3/99) and a copy of Sections 87575.1(b) and (c) of the regulations.
- (b) Residents shall be permitted to have a Request to Forego Resuscitative Measures, an Advance Health Care Directive and/or a Do-Not-Resuscitate (DNR) Form in their facility file.
- (c) If a resident who has a Request to Forego Resuscitative Measures, and/or an Advance Health Care Directive and/or a DNR form on file experiences a medical emergency, facility staff shall do one of the following:

**87575.1 ADVANCE HEALTH CARE DIRECTIVES, REQUESTS TO FOREGO RESUSCITATIVE MEASURES, AND DO-NOT RESUSCITATE FORMS (Continued) 87575.1**

- (1) Immediately telephone 9-1-1, present the Request to Forego Resuscitative Measures, Advance Health Care Directive and/or DNR form to the responding emergency medical personnel and identify the resident as the person to whom the order refers.
- (2) Immediately give the Request to Forego Resuscitative Measures, and/or Advance Health Care Directive and/or DNR form to a physician, registered nurse or licensed vocational nurse if the physician or nurse is in the resident's presence at the time of the emergency and assumes responsibility.
- (3) Facilities that employ health care providers, other than Home Health Agencies or Hospice Agencies, may comply with Health and Safety Code Section 1569.74.

---

**HANDBOOK BEGINS HERE**

---

Health and Safety Code Section 1569.74 states in relevant part:

- "(a) Licensed residential care facilities for the elderly that employ health care providers may establish policies to honor a request to forego resuscitative measures as defined in subdivision (b) of Section 4753 of the Probate Code.
- "(b) Any policy established pursuant to subdivision (a) shall meet all of the following conditions:
- (1) The policy shall be in writing and specify procedures to be followed in implementing the policy.
  - (2) The policy and procedures shall, at all times, be available in the facility for review by the department.
  - (3) The licensee shall ensure that all staff are aware of the policy as well as the procedures to be followed in implementing the policy.
  - (4) A copy of the policy shall be given to each resident who makes a request to forego resuscitative measures, and the resident's primary physician.
  - (5) A copy of the resident's request to forego resuscitative measures shall be maintained in the facility and shall be immediately available for review by facility staff, the licensed health care provider, and the department.

---

**HANDBOOK CONTINUES**

---

**87575.1 ADVANCE HEALTH CARE DIRECTIVES, REQUESTS TO FOREGO RESUSCITATIVE MEASURES, AND DO-NOT RESUSCITATE FORMS (Continued) 87575.1**

---

**HANDBOOK CONTINUES**

---

- (6) Facility staff are prohibited, on behalf of any resident, from signing any directive document as a witness or from being the legally recognized surrogate decision maker.
  - (7) The facility shall provide the resident's physician with a copy of the resident's request to forego resuscitative measures form.
- "(c) Any action by a facility that has established policies pursuant to subdivision (a), to honor a resident's request to forego resuscitative measures as provided for in subdivision (a) may only be taken by a licensed health care provider who is employed by the facility and on the premises at the time of the life threatening emergency."

---

**HANDBOOK ENDS HERE**

---

- (d) After following the procedure in Section 87575.1(c)(1), (2), or (3), facility staff shall notify the resident's hospice agency and health care surrogate decision maker, if applicable.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.74, and 1569.156, Health and Safety Code; and Section 4753, Probate Code.

**87575.2 AUTOMATED EXTERNAL DEFIBRILLATORS (AEDS) 87575.2**

- (a) A licensee is permitted to maintain and operate an AED at the facility if all of the following requirements are met:
  - (1) The licensee shall notify the licensing agency in writing that an AED is in the facility and will be used in accordance with all applicable federal and other state requirements.
  - (2) The AED shall be used in accordance with all applicable federal and other state requirements.

**This page is intentionally left blank.**

**87575.2 AUTOMATED EXTERNAL DEFIBRILLATORS (AEDS)**  
(Continued)

87575.2

- (3) The licensee shall maintain at the facility the following:
- (A) A copy of the required physician's prescription for the AED.
  - (B) A training manual from an American Heart Association- or American Red Cross-recognized AED training class.
  - (C) A log of checks of operation of the AED containing the dates checked and the name of person checking.
  - (D) A copy of a valid AED operator's certificate for any employee(s) authorized by the licensee to operate the AED. The certificate shall indicate that the AED training course completed complies with the standards of the American Heart Association or the American Red Cross. If it does not, then other evidence indicating that the AED training course completed complies with the standards of the American Heart Association or the American Red Cross shall be available at the facility.
  - (E) A log of quarterly proficiency demonstrations for each holder of an AED operator's certificate who is authorized by the licensee to operate the AED. The log shall contain the dates of the demonstrations and the manner of demonstration.
- (4) A supply kit shall be maintained at the facility and be readily available for use with the AED. The kit shall contain at least the following:
- (A) A back-up battery set.
  - (B) An extra set of pads.
  - (C) A safety razor for shaving chest hair when necessary to apply the pads.
  - (D) A cardiovascular pulmonary resuscitation barrier (a face shield or mask) for protection from transmission of infectious disease.
  - (E) Two pairs of unused medical examination gloves (latex or non-latex).
- (5) Use of an AED shall be reported as specified in Section 87561.
- (6) Requests to Forego Resuscitative Measures, Advance Directives and Do-Not-Resuscitate Orders shall be observed as specified in Section 87575.1.

NOTE: Authority Cited: Section 1569.30, Health and Safety Code. Reference: Sections 1250, 1569.1, 1569.2, 1569.30, 1569.312, 1569.73, and 1797.196 Health and Safety Code.

**87576 FOOD SERVICE****87576**

- (a) The total daily diet shall be of the quality and in the quantity necessary to meet the needs of the residents and shall meet the Recommended Dietary Allowances of the Food and Nutrition Board of the National Research Council. All food shall be selected, stored, prepared and served in a safe and healthful manner.
- (b) The following food service requirements shall apply:
- (1) Where all food is provided by the facility arrangements shall be made so that each resident has available at least three meals per day. Exceptions may be allowed on weekends and holidays providing the total daily food needs are met. Not more than fifteen (15) hours shall elapse between the third and first meal.
  - (2) Where meal service within a facility is elective, arrangements shall be made to assure availability of an adequate daily food intake for all residents who, in their admission agreement, elected meal service. If a resident's condition changes so that he is no longer able to cook or purchase his own meals, the admission agreement shall be modified and the resident provided full meal service.
  - (3) Between-meal nourishment or snacks shall be made available for all residents unless limited by dietary restrictions prescribed by a physician.
  - (4) Meals on the premises shall be served in a designated dining area suitable for the purpose and residents encouraged to have meals with other residents. Tray service shall be provided in case of temporary need.
  - (5) Meals shall consist of an appropriate variety of foods and shall be planned with consideration for cultural and religious background and food habits of residents.
  - (6) In facilities for sixteen (16) persons or more, menus shall be written at least one week in advance and copies of the menus as served shall be dated and kept on file for at least 30 days. Facilities licensed for less than sixteen (16) residents shall maintain a sample menu in their file. Menus shall be made available for review by the residents or their designated representatives and the licensing agency upon request.
  - (7) Modified diets prescribed by a resident's physician as a medical necessity shall be provided.

**87576 FOOD SERVICE (Continued)****87576**

- (8) All food shall be of good quality. Commercial foods shall be approved by appropriate federal, state and local authorities. Food in damaged containers shall not be accepted, used or retained.
- (9) Procedures which protect the safety, acceptability and nutritive values of food shall be observed in food storage, preparation and service.
- (10) Where indicated, food shall be cut, chopped or ground to meet individual needs.
- (11) Powdered milk shall not be used as a beverage but may be used in cooking or baking. Raw milk shall not be used. Milk shall be pasteurized.
- (12) Except upon written approval by the licensing agency, meat, poultry and meat food products shall be inspected by state or federal authorities. Written evidence of such inspection shall be available for all products not purchased from commercial markets.
- (13) Home canned foods shall not be used.
- (14) If food is prepared off the facility premises, the preparation source shall meet all applicable requirements for commercial services. The facility shall have adequate equipment and staff to receive and serve the food and for cleanup, and shall maintain adequate equipment for in-house preparation and service of food in emergencies.
- (15) All persons engaged in food preparation and service shall observe personal hygiene and food services sanitation practices which protect the food from contamination.
- (16) In facilities licensed for sixteen (16) to forty-nine (49) residents, one person shall be designated who has primary responsibility for food planning, preparation and service. This person shall be provided with appropriate training.
- (17) In facilities licensed for fifty (50) or more, and providing three (3) meals per day, a full-time employee qualified by formal training or experience shall be responsible for the operation of the food service. If this person is not a nutritionist, a dietitian, or a home economist, provision shall be made for regular consultation from a person so qualified. The consultation services shall be provided at appropriate times, during at least one meal. A written record of the frequency, nature and duration of the consultant's visits shall be secured from the consultant and kept on file in the facility.

**87576 FOOD SERVICE (Continued)****87576**

- (18) Sufficient food service personnel shall be employed, trained and their working hours scheduled to meet the needs of residents.
- (19) There shall be one or more dining rooms or similar areas suitable for serving residents at a meal service, in shifts where appropriate. The dining areas shall be convenient to the kitchen so that food may be served quickly and easily and shall be attractive and promote socialization among the diners.
- (20) The ventilating systems in food preparation areas shall be maintained in working order and shall be operated when food is being prepared. Food preparation equipment shall be placed to provide aisles of sufficient width to permit easy movement of personnel, mobile equipment and supplies.
- (21) Freezers of adequate size shall be maintained at a temperature of 0 degrees F (-17.7 degrees C), and refrigerators of adequate size shall maintain a maximum temperature of 40 degrees F (4 degrees C). They shall be kept clean and food stored to enable adequate air circulation to maintain the above temperatures.
- (22) Adequate space shall be maintained to accommodate equipment, personnel and procedures necessary for proper cleaning and sanitizing dishes and other utensils.
- (23) All readily perishable foods or beverages capable of supporting rapid and progressive growth of micro-organisms which can cause food infections or food intoxications shall be stored in covered containers at appropriate temperatures.
- (24) Pesticides and other toxic substances shall not be stored in food storerooms, kitchen areas, or where kitchen equipment or utensils are stored.
- (25) Soaps, detergents, cleaning compounds or similar substances shall be stored in areas separate from food supplies.
- (26) Supplies of nonperishable foods for a minimum of one week and perishable foods for a minimum of two days shall be maintained on the premises.
- (27) All kitchen areas shall be kept clean and free of litter, rodents, vermin and insects.



**87576 FOOD SERVICE (Continued)****87576**

- (28) All food shall be protected against contamination. Contaminated food shall be discarded immediately upon discovery.
- (29) All equipment, fixed or mobile, and dishes, shall be kept clean and maintained in good repair and free of breaks, open seams, cracks or chips.
- (30) All utensils used for eating and drinking and in preparation of food and drink, shall be cleaned and sanitized after each usage.
- (31) Dishes and utensils shall be disinfected:
  - (A) In facilities using mechanical means, by either maintaining hot water at a minimum temperature of 170 degrees F (77 degrees C) at the final rinse cycle of diswashing machines, or by disinfecting as specified in (B) below.
  - (B) In facilities not using mechanical means, by an alternative comparable method approved by the licensing agency or by the local health department, such as the addition of a sanitation agent to the final rinse water.
- (32) Equipment of appropriate size and type shall be provided for the storage, preparation and service of food and for sanitizing utensils and tableware, and shall be well maintained.
- (33) Tableware and tables, dishes, and utensils shall be sufficient in quantity to serve the residents.
- (34) Adaptive devices shall be provided for self-help in eating as needed by residents.
- (c) The licensing agency may require the facility to provide written information as to the foods purchased and used over a given period when, based upon documentation, there is reason to believe that the food service requirements are not being met.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.1, 1569.2, 1569.30, 1569.31 and 1569.312, Health and Safety Code.

**87577 PERSONAL ACCOMMODATIONS AND SERVICES****87577**

- (a) Living accommodations and grounds shall be related to the facility's function. The facility shall be large enough to provide comfortable living accommodations and privacy for the residents, staff, and others who may reside in the facility. The following provisions shall apply:
- (1) There shall be common rooms such as living rooms, dining rooms, dens or other recreation/activity rooms. They shall be of sufficient space and/or separation to promote and facilitate the program of activities and to prevent such activities from interfering with other functions.
  - (2) Resident bedrooms shall be provided which meet, at a minimum, the following requirements:
    - (A) Bedrooms shall be large enough to allow for easy passage between and comfortable usage of beds and other required items of furniture specified below, and any resident assistant devices such as wheelchairs or walkers.
    - (B) No room commonly used for other purposes shall be used as a sleeping room for any resident. This includes any hall, stairway, unfinished attic, garage storage area, shed or similar detached building.
    - (C) No bedroom of a resident shall be used as a passageway to another room, bath or toilet.
    - (D) Not more than two residents shall sleep in a bedroom.
  - (3) Equipment and supplies necessary for personal care and maintenance of adequate hygiene practice shall be readily available to each resident. The resident may provide the following items; however, if the resident is unable or chooses not to provide them, the licensee shall assure provision of:
    - (A) A bed for each resident, except that married couples may be provided with one appropriate sized bed. Each bed shall be equipped with good springs, a clean and comfortable mattress, available pillow(s) and lightweight warm bedding. Fillings and covers for mattresses and pillows shall be flame retardant. Rubber sheeting shall be provided when necessary.

**87577 PERSONAL ACCOMMODATIONS AND SERVICES (Continued) 87577**

- (B) Bedroom furniture, which shall include, for each resident, a chair, night stand, a lamp, or lights sufficient for reading, and a chest of drawers.
  - (C) Clean linen, including blankets, bedspreads, top bed sheets, bottom bed sheets, pillow cases, mattress pads, bath towels, hand towels and wash cloths. The quantity shall be sufficient to permit changing at least once per week or more often when indicated to ensure that clean linen is in use by residents at all times. The linen shall be in good repair. The use of common wash cloths and towels shall be prohibited.
  - (D) Hygiene items of general use such as soap and toilet paper.
  - (E) Portable or permanent closets and drawer space in the bedrooms for clothing and personal belongings. A minimum of eight (8) cubic feet (.743 cubic meters) of drawer space per resident shall be provided.
  - (F) Basic laundry service (washing, drying, and ironing of personal clothing).
- (b) Toilets and bathrooms shall be conveniently located. The licensed capacity shall be established based on Section 87229 and the following:
- (1) At least one toilet and washbasin for each six (6) persons, which include residents, family and personnel.
  - (2) At least one bathtub or shower for each ten (10) persons, which includes residents, family and live-in personnel.
- (c) Individual privacy shall be provided in all toilet, bath and shower areas.
- (d) The following space and safety provisions shall apply to all facilities:
- (1) Sufficient room shall be available to accommodate persons served in comfort and safety.
  - (2) The premises shall be maintained in a state of good repair and shall provide a safe and healthful environment.

**87577 PERSONAL ACCOMMODATIONS AND SERVICES (Continued)****87577**

- (3) All persons shall be protected against hazards within the facility through provision of the following:
- (A) Protective devices such as nonslip material on rugs.
  - (B) Information and instruction regarding life protection and other appropriate subjects.
- (4) Stairways, inclines, ramps and open porches and areas of potential hazard to residents with poor balance or eyesight shall be made inaccessible to residents unless equipped with sturdy hand railings and unless well-lighted.
- (5) Night lights shall be maintained in hallways and passages to nonprivate bathrooms.
- (6) All outdoor and indoor passageways and stairways shall be kept free of obstruction.
- (7) Fireplaces and open-faced heaters shall be adequately screened.
- (e) Facilities providing services to residents who have physical or mental disabilities shall assure the inaccessibility of fishponds, wading pools, hot tubs, swimming pools, or similar bodies of water, when not in active use by residents, through fencing, covering or other means.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.1, 1569.2, 1569.31 and 1569.312, Health and Safety Code.

**87578 PERSONAL ASSISTANCE AND CARE****87578**

- (a) Based on the individual's preadmission appraisal, and subsequent changes to that appraisal, the facility shall provide assistance and care for the resident in those activities of daily living which the resident is unable to do for himself/herself. Postural supports may be used under the following conditions.
- (1) Postural supports shall be limited to appliances or devices such as braces, spring release trays, or soft ties, used to achieve proper body position and balance, to improve a resident's mobility and independent functioning, or to position rather than restrict movement including, but not limited to, preventing a resident from falling out of bed, a chair, etc.
    - (A) Physician-prescribed orthopedic devices such as braces or casts, used for support of a weakened body part or correction of body parts, are considered postural supports.
  - (2) Postural supports shall be fastened or tied in a manner that permits quick release by the resident.
  - (3) A written order from a physician indicating the need for the postural support shall be maintained in the resident's record. The licensing agency shall be authorized to require other additional documentation if needed to verify the order.
  - (4) Prior to the use of postural supports that change the ambulatory status of a resident to non-ambulatory, the licensee shall ensure that the appropriate fire clearance, as required by Section 87220, Fire Clearance has been secured.
  - (5) Under no circumstances shall postural supports include tying, depriving, or limiting the use of a resident's hands or feet.
    - (A) A bed rail that extends from the head half the length of the bed and used only for assistance with mobility shall be allowed.
    - (B) Bed rails that extend the entire length of the bed are prohibited except for residents who are currently receiving hospice care and have a hospice care plan that specifies the need for full bed rails.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.1, 1569.2, 1569.31, and 1569.312, Health and Safety Code.

**87579 PLANNED ACTIVITIES****87579**

- (a) Residents shall be encouraged to maintain and develop their fullest potential for independent living through participation in planned activities. The activities made available shall include:
- (1) Socialization, achieved through activities such as group discussion and conversation, recreation, arts, crafts, music and care of pets.
  - (2) Daily living skills/activities which foster and maintain independent functioning.
  - (3) Leisure time activities cultivating personal interests and pursuits, and encouraging leisure-time activities with other residents.
  - (4) Physical activities such as games, sports and exercise which develop and maintain strength, coordination and range of motion.
  - (5) Education, achieved through special classes or activities.
  - (6) Provision for free time so residents may engage in activities of their own choosing.
- (b) Residents served shall be encouraged to contribute to the planning, preparation, conduct, clean-up and critique of the planned activities.
- (c) The licensee shall arrange for utilization of available community resources through contact with organizations and volunteers to promote resident participation in community-centered activities which may include:
- (1) Attendance at the place of worship of the resident's choice.
  - (2) Service activities for the community.
  - (3) Community events such as concerts, tours and plays.
  - (4) Participation in community organized group activities, such as senior citizen groups, sports leagues and service clubs.
- (d) In facilities licensed for seven (7) or more persons, notices of planned activities shall be posted in a central location readily accessible to residents, relatives, and representatives of placement and referral agencies. Copies shall be retained for at least six (6) months.
- (e) In facilities licensed for sixteen (16) to forty-nine (49) persons, one staff member, designated by the administrator, shall have primary responsibility for the organization, conduct and evaluation of planned activities. This person shall have had at least six (6) months experience in providing planned activities or have completed or be enrolled in an appropriate education or training program.

**87579 PLANNED ACTIVITIES (Continued)****87579**

- (f) In facilities licensed for fifty (50) persons or more, one staff member shall have full-time responsibility to organize, conduct and evaluate planned activities, and shall be given such staff assistance as necessary in order for all residents to participate in accordance with their interests and abilities. The program of activities shall be written, planned in advance, kept up-to-date, and made available to all residents. The responsible employee shall have had at least one year of experience in conducting group activities and be knowledgeable in evaluating resident needs, supervising other employees, and in training volunteers.
- (1) An exception to this requirement may be made by the licensing agency upon the facility's presentation in writing of a satisfactory alternative plan.
  - (2) Where the facility can demonstrate that its residents are self-directed to the extent that they are able to plan, organize and conduct the facility's activity program themselves, this requirement may be reduced or waived by the licensing agency.
- (g) Participation of volunteers in planned activities shall be encouraged, and such volunteers shall be under the direction and supervision of the employees responsible for the activity program.
- (h) Facilities shall provide sufficient space to accommodate both indoor and outdoor activities. Activities shall be encouraged by provision of:
- (1) A comfortable, appropriately furnished area such as a living room, available to all residents for their relaxation and for entertaining friends and relatives.
  - (2) Outdoor activity areas which are easily accessible to residents and protected from traffic. Gardens or yards shall be sufficient in size, comfortable, and appropriately equipped for outdoor use.
- (i) Facilities shall provide sufficient equipment and supplies to meet the requirements of the activity program including access to daily newspapers, current magazines and a variety of reading materials. Special equipment and supplies necessary to accommodate physically handicapped persons or other persons with special needs shall be provided as appropriate.
- (1) When not in use, recreational equipment and supplies shall be stored where they do not create a hazard to residents.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.1, 1569.2, 1569.30, 1569.31 and 1569.312, Health and Safety Code.

**87580 PERSONNEL - OPERATIONS****87580**

- (a) In each facility:
- (1) When regular staff members are absent, there shall be coverage by personnel with qualifications adequate to perform the assigned tasks.
  - (2) Care and supervision of residents shall be provided without physical or verbal abuse, exploitation or prejudice.
  - (3) The licensee shall provide for and encourage all personnel to report observations or evidence of such abuse, exploitation or prejudice.
- (b) If the facility is licensed for sixteen (16) persons or more, there shall be a dated weekly employee time schedule displayed conveniently for employee reference. The schedule shall contain employee's name, job title, hours of work, and days off.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.1, 1569.2, 1569.30, 1569.31 and 1569.312, Health and Safety Code.

**87581 NIGHT SUPERVISION****87581**

- (a) The following persons providing night supervision from 10:00 p.m. to 6:00 a.m. shall be familiar with the facility's planned emergency procedures, shall be trained in first aid as required in Section 87575, and shall be available as indicated below to assist in caring for residents in the event of an emergency.
- (1) In facilities caring for less than sixteen (16) residents, there shall be a qualified person on call on the premises.
  - (2) In facilities caring for sixteen (16) to one hundred (100) residents at least one employee shall be on duty on the premises, and awake. Another employee shall be on call, and capable of responding within ten minutes.
  - (3) In facilities caring for one hundred one (101) to two hundred (200) residents, one employee shall be on call, on the premises; one employee shall be on duty on the premises and awake; and one employee shall be on call and capable of responding within ten minutes.



**87581 NIGHT SUPERVISION (Continued) 87581**

- (4) Every additional 100 residents, or fraction thereof, shall require an additional one (1) staff person on duty, on the premises and awake.
- (5) In facilities required to have a signal system, specified in Section 87691, at least one night staff person shall be located to enable immediate response to the signal system. If the signal system is visual only, that person shall be awake.
- (6) The requirements of this section shall not prohibit compliance with additional supervisory requirements required by the State Fire Marshal.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.1, 1569.2, 1569.30, 1569.31 and 1569.312, Health and Safety Code.

**87582 ACCEPTANCE AND RETENTION LIMITATIONS 87582**

- (a) Acceptance or retention of residents by a facility shall be in accordance with the criteria specified in this article and in the Incidental Medical Services, Section 87700, and the following.
- (b) The following persons may be accepted or retained in the facility:
  - (1) Persons capable of administering their own medications.
  - (2) Persons receiving medical care and treatment outside the facility or who are receiving needed medical care from a visiting nurse.
  - (3) Persons who because of forgetfulness or physical limitations need only be reminded or to be assisted to take medication usually prescribed for self-administration.
  - (4) Persons with problems including, but not limited to, forgetfulness, wandering, confusion, irritability, and inability to manage money.
  - (5) Persons with mild temporary emotional disturbance resulting from personal loss or change in living arrangement.
  - (6) Persons who are under 60 years of age whose needs are compatible with other residents in care, if they require the same amount of care and supervision as do the other residents in the facility.

## 87582 ACCEPTANCE AND RETENTION LIMITATIONS (Continued)

87582

- (c) No resident shall be accepted or retained if any of the following apply:
- (1) The resident has active communicable tuberculosis.
  - (2) The resident requires 24-hour, skilled nursing or intermediate care.
  - (3) The resident's primary need for care and supervision results from either:
    - (A) An ongoing behavior, caused by a mental disorder, that would upset the general resident group; or
    - (B) Dementia, unless the requirements of Section 87724, Care of Persons with Dementia, are met.
  - (4) The resident is bedridden, other than for a temporary illness or for recovery from surgery, except as otherwise provided in Section 87582(f).
- (d) For the purposes of this section, "bedridden" means any of the following:
- (1) An applicant or resident who requires assistance in turning and repositioning in bed and is unable to leave a building unassisted under emergency conditions.
  - (2) An applicant or resident who is unable to independently transfer to and from bed and is unable to leave a building unassisted under emergency conditions.
- (e) For the purposes of this section, "temporary illness" means any illness which persists for 14 days or less.
- (f) A bedridden resident may be retained in a residential care facility for the elderly in excess of 14 days if all the following requirements are satisfied:
- (1) The facility notifies the department in writing regarding the temporary illness or recovery from surgery.

**87582****ACCEPTANCE AND RETENTION LIMITATIONS (Continued)****87582**

- (2) The facility submits to the department, with the notification, a physician and surgeon's written statement to the effect that the resident's illness or recovery is of a temporary nature. The statement shall contain an estimated date upon which the illness or recovery will end or upon which the resident will no longer be confined to a bed.
- (3) The department determines that the health and safety of the resident is adequately protected in that facility and that transfer to a higher level of care is not necessary.
- (g) Notwithstanding the length of stay of a bedridden resident, every facility admitting or retaining a bedridden resident, as defined in this section, shall, within 48 hours of the resident's admission or retention in the facility, notify the local fire authority with jurisdiction in the bedridden resident's location of the estimated length of time the resident will retain his or her bedridden status in the facility.
- (h) A resident suspected of having a contagious or infectious disease shall be isolated, and a physician contacted to determine suitability of the resident's retention in the facility.
- (i) Renumbered to Section 87701.1 by Manual Letter No. CCL-93-01, effective 3/7/93.
- (j) Renumbered to Section 87342.1 by Manual Letter No. CCL-93-01, effective 3/7/93.

| NOTE: Authority cited: Sections 1569.30 and 1569.698, Health and Safety Code. Reference: Sections 1250, 1569.1, 1569.2, 1569.30, 1569.31, 1569.312, 1569.54, 1569.699, and 1569.72, Health and Safety Code.

**This page is intentionally left blank.**

**87583 PRE-ADMISSION APPRAISAL - GENERAL****87583**

- (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.

**This page is intentionally left blank.**

**87583 PRE-ADMISSION APPRAISAL - GENERAL (Continued) 87583**

- (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.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.1, 1569.2, 1569.30, 1569.31 and 1569.312, Health and Safety Code.

**87583.1 RESIDENT PARTICIPATION IN DECISIONMAKING****87583.1**

- (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.

NOTE: Authority cited: Sections 1569.30, Health and Safety Code. Reference: Sections 1569.80 and 1569.156, Health and Safety Code.

**87584****FUNCTIONAL CAPABILITIES****87584**

- (a) 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.



<b>87584</b>	<b>FUNCTIONAL CAPABILITIES (Continued)</b>	<b>87584</b>
--------------	--	--------------

- (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.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1250, 1569.1, 1569.2, 1569.30, 1569.31, 1569.312 and 1569.315, Health and Safety Code.

<b>87585</b>	<b>MENTAL CONDITION</b>	<b>87585</b>
--------------	-------------------------	--------------

- (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.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.1, 1569.2, 1569.30, 1569.31, 1569.312, and 1569.316(a), Health and Safety Code.

**87586 SOCIAL FACTORS****87586**

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.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.1, 1569.2, 1569.30, 1569.31, and 1569.312, Health and Safety Code.

**87587 REAPPRAISALS****87587**

- (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.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.1, 1569.156, 1569.2, 1569.30, 1569.31, 1569.312 and 1569.315, Health and Safety Code.

**87588 DOCUMENTATION AND SUPPORT****87588**

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.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.30 and 1569.31, Health and Safety Code.

**87589 EVICTION PROCEDURES****87589**

- (a) The licensee may, upon thirty (30) days written notice to the resident, evict the resident for one or more of the following reasons:
- (1) Nonpayment of the rate for basic services within ten days of the due date.
  - (2) Failure of the resident to comply with state or local law after receiving written notice of the alleged violation.
  - (3) Failure of the resident to comply with general policies of the facility. Said general policies must be in writing, must be for the purpose of making it possible for residents to live together and must be made part of the admission agreement.
  - (4) If, after admission, it is determined that the resident has a need not previously identified and a reappraisal has been conducted pursuant to Section 87587, and the licensee and the person who performs the reappraisal believe that the facility is not appropriate for the resident.
  - (5) Change of use of the facility.
- (b) The licensee may, upon obtaining prior written approval from the licensing agency, evict the resident upon three (3) days written notice to quit. The licensing agency may grant approval for the eviction upon a finding of good cause. Good cause exists if the resident is engaging in behavior which is a threat to the mental and/or physical health or safety of himself or to the mental and/or physical health or safety of others in the facility.
- (c) The licensee shall, in addition to either serving thirty (30) days notice or seeking approval from the Department and service three (3) days notice on the resident, notify or mail a copy of the notice to quit to the resident's responsible person.
- (d) The licensee shall set forth in the notice to quit the reasons relied upon for the eviction with specific facts to permit determination of the date, place, witnesses, and circumstances concerning those reasons.

**87589 EVICTION PROCEDURES (Continued)****87589**

- (e) Upon request of a resident, or his/her designated representative, the Department shall, pursuant to the provisions of Section 1569.35 of the Health and Safety Code, investigate the reasons given for the eviction.
- (f) A written report of any eviction shall be sent to the licensing agency within five (5) days.
- (g) This section shall not apply to a particular resident who has entered into a continuing care contract with a facility pursuant to Health and Safety Code, Chapter 10, Division 2.
- (h) Nothing in this section is intended to preclude the licensee or resident from invoking any other available remedy.
- (i) Nothing in Section 87589 precludes the licensee from initiating the urgent relocation to a licensed health facility of a terminally ill resident receiving hospice services when the resident's condition has changed and a joint determination has been made by the Department, the resident or resident's health care surrogate decision maker, the resident's hospice agency, a physician, and the licensee, that the resident's continued retention in the facility poses a health and safety risk to the resident or any other facility resident.
  - (1) The licensee shall follow the procedures specified in Section 87701.1(b)(2) to reduce the risk of transfer trauma.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.1, 1569.2, 1569.30, 1569.31, 1569.312, 1569.315, 1569.54, 1569.73, and 1770 et seq., Health and Safety Code.

**87590 BASIC SERVICES****87590**

- (a) The services provided by the facility shall be conducted so as to continue and promote, to the extent possible, independence and self-direction for all persons accepted for care. Such persons shall be encouraged to participate as fully as their conditions permit in daily living activities both in the facility and in the community.
- (b) As used in this chapter, basic services are those services required to be provided in order to obtain and maintain a license.
- (c) The admission agreement shall specify which of the basic services are desired and/or needed by, and will be provided for, each resident.
- (d) A facility need not accept a particular resident for care. However, if a facility chooses to accept a particular resident for care, the facility shall be responsible for meeting the resident's needs as identified in the pre-admission appraisal specified in Section 87583 and providing the other basic services specified below, either directly or through outside resources.

**87590 BASIC SERVICES (Continued)****87590**

- (e) If the resident is an SSI/SSP recipient, then the basic services shall be provided and/or made available at the basic rate at no additional charge to the resident.
- (1) This shall not preclude the acceptance by the facility of voluntary contributions from relatives or others on behalf of an SSI/SSP recipient.

---

---

**HANDBOOK BEGINS HERE**

- (A) The Social Security Administration has interpreted Federal Regulations (20 CFR 416.1102, 416.1103, and 416.1145) to mean that any contribution given directly to the facility on behalf of an SSI/SSP recipient will not count as income (i.e., will not reduce the recipient's SSI/SSP check) if the payment is used for items other than food, clothing or shelter (e.g., care and supervision).

---

---

**HANDBOOK ENDS HERE**

---

- (2) An extra charge to the resident shall be allowed for a private room if a double room is made available but the resident prefers a private room, provided the arrangement is documented in the admissions agreement and the charge is limited to 10% of the Board and Room portion of the SSI/SSP grant.
- (3) An extra charge to the resident shall be allowed for provision of special food services or products beyond that specified in (f)(2) below, when the resident wishes to purchase the services and agrees to the extra charge in the admission agreement.
- (f) Basic services shall at a minimum include:
- (1) Safe and healthful living accommodations and services, as specified in Section 87577.
- (2) Three nutritionally well-balanced meals and snacks made available daily, including low salt or other modified diets prescribed by a doctor as a medical necessity, as specified in Section 87576.
- (3) Personal assistance and care as needed by the resident and as indicated in the pre-admission appraisal, with those activities of daily living such as dressing, eating, bathing and assistance with taking prescribed medications, as specified in Section 87578.
- (4) Regular observation of the resident's physical and mental condition, as specified in Section 87591.

**87590 BASIC SERVICES (Continued)****87590**

- (5) Arrangements to meet health needs, including arranging transportation, as specified in Section 87575.
- (6) A planned activities program which includes social and recreational activities appropriate to the interests and capabilities of the resident, as specified in Section 87579.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.1, 1569.2, 1569.30, 1569.31, 1569.312 and 1569.313, Health and Safety Code, and Section 11006.9 and Section 12350, Welfare and Institutions Code.

**87591 OBSERVATION OF THE RESIDENT****87591**

The licensee shall ensure that residents are regularly observed for changes in physical, mental, emotional and social functioning and that appropriate assistance is provided when such observation reveals unmet needs. When changes such as unusual weight gains or losses or deterioration of mental ability or a physical health condition are observed, the licensee shall ensure that such changes are documented and brought to the attention of the resident's physician and the resident's responsible person, if any.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.1, 1569.2, 1569.30, 1569.31 and 1569.312, Health and Safety Code.

**87592 RESIDENT COUNCILS****87592**

The facility shall permit the formation of a resident council by interested residents, provide space and post notice for meetings, and provide assistance in attending meetings for those residents who request it. In order to permit a free exchange of ideas, at least part of each meeting shall be allowed to be conducted without the presence of any facility personnel. Residents shall be encouraged, but shall not be compelled to attend. The purpose of such an organization shall be to work with the administration in improving the quality of life for all residents by enriching the activity program and to discuss the services offered by the facility and make recommendations regarding identified problems.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.30, 1569.31 and 1569.312, Health and Safety Code.

**87593 REQUIREMENTS FOR EMERGENCY ADULT PROTECTIVE SERVICES PLACEMENTS 87593**

- (a) The licensee shall be permitted to accept emergency placements by an adult protective services (APS) agency, if the licensee has received approval from the Department to provide emergency shelter services.
- (1) To obtain approval, the licensee shall submit a written request to the Department. The request shall include, but not be limited to, the following:
- (A) A letter of interest from the county APS agency stating that if the request to provide emergency shelter services is approved, the APS agency may enter into an agreement with the licensee to provide such services.
1. A copy of the written agreement between the APS agency and the licensee, listing the responsibilities of each party, shall be sent to the Department within seven calendar days of signing.
- (B) A written addendum to the Plan of Operation, specified in Section 87222, that includes procedures for the intake of an APS emergency placement. The addendum shall specify how the licensee will meet the needs of a resident placed on an emergency basis, such as on-call staff, additional staff and training.
1. The procedures shall include, but not be limited to, provisions for a private room.
- a. The licensee shall provide a private room for the resident until a pre-admission appraisal of the resident's individual service needs has been completed, specified in Section 87583.
- b. The Department may approve an alternative to a private room, such as awake or additional staff, but an alternative shall not be approved if it displaces staff or other residents of the facility.
- (C) A licensee of a residential care facility for the elderly may accept an adult resident, 18 through 59 years of age, for emergency placement under the following conditions:
1. The APS agency has written a statement indicating a local need exists for the licensee to accept emergency placements of adults 18 through 59 years of age.
- a. The licensee attaches this APS statement of local need [Section 87593(a)(1)(C)1.] to the written request, specified in Section 87593(a)(1).
- b. The licensee must request a statement each year from the APS agency, indicating a local need still exists as specified in Section 87593(a)(1)(C)1., and submit the statement to the Department.

**87593 REQUIREMENTS FOR EMERGENCY ADULT PROTECTIVE SERVICES PLACEMENTS(Continued)****87593**

- (b) The Department shall provide written approval or denial of a licensee's request to provide emergency shelter services within 15 working days of its receipt.
- (c) The licensee shall comply with the regulations in Title 22, Division 6, Chapter 8 (Residential Care Facilities for the Elderly), unless otherwise stated in Section 87593. These regulations include, but are not limited to, the following:
- (1) The licensee shall not exceed the capacity limitations specified on the license and shall not allow rooms approved only for ambulatory residents to be used by nonambulatory residents, as specified in Section 87110.
  - (2) The licensee shall meet the requirements in Section 87220 on fire clearance if the licensee has accepted a nonambulatory resident, defined in Section 87101(n)(2).
- (d) The licensee shall not accept the following persons as APS emergency placements:
- (1) Individuals with prohibited health conditions [Section 87701].
  - (2) Individuals with restricted health conditions [Section 87701.1].
    - (A) The licensee may accept an APS emergency placement who is incontinent when the requirements in Section 87708 are met.
  - (3) Individuals who are receiving hospice care [Section 87716].
  - (4) Individuals who have active communicable tuberculosis [Section 87582(c)(1)].
  - (5) Individuals who require 24-hour, skilled nursing or intermediate care [Section 87582(c)(2)].
  - (6) Individuals whose primary need for care and supervision results from an ongoing behavior, caused by a mental disorder, that would upset the general resident group [Section 87582(c)(3)(A)].
  - (7) Individuals who are bedridden, as defined in Section 87582(d).
- (e) If a licensee accepts an APS emergency placement with dementia, the licensee shall meet the requirements in Section 87724, Care of Persons with Dementia.



**87593 REQUIREMENTS FOR EMERGENCY ADULT PROTECTIVE SERVICES PLACEMENTS(Continued) 87593**

- (1) Repealed by Manual Letter No. CCL-04-12, effective 7/3/04.
- (f) The licensee shall not admit an APS emergency placement unless the APS worker is present at the facility at the time of admission.
- (g) Prior to acceptance of an APS emergency placement, the licensee shall obtain and keep on file the following information received from the APS worker:
- (1) Resident's name.
  - (2) Resident's ambulatory status.
  - (3) Name(s) and telephone number(s) of the resident's physician(s).
  - (4) Name(s), business address(es), and telephone number(s) of the APS worker responsible for the resident's placement and the APS case worker, if known.
  - (5) Name, address, and telephone number of any person responsible for the care of the resident, if available.
- (h) Within seven calendar days of an APS emergency placement, the licensee shall obtain other resident information specified in Section 87570.
- (1) The resident must have a tuberculosis test [Section 87569(b)(1)] by the seventh day of placement even though the test results may not be available by the seventh day of placement.
- (i) The licensee shall contact the resident's attending physician or the person authorized to act for the physician to identify all of the resident's prescribed medications and usage instructions [Section 87569(b)(3)] by the next working day, but no later than 72 hours from the initial APS emergency placement.
- (1) The attending physician or the person acting for the physician shall have access to the resident's records to determine whether the full medication regimen is accounted for and accurate.

**87593 REQUIREMENTS FOR EMERGENCY ADULT PROTECTIVE SERVICES PLACEMENTS (Continued)****87593**

- (2) If medication verification, as specified in Section 87593(i), has not been obtained within 72 hours from the resident's initial placement, the licensee shall contact the APS worker to request that the resident be relocated, as specified in Section 87593(j).
- (j) The licensee shall contact the APS worker to request that the resident be relocated immediately when the licensee identifies that needs cannot be met or that the resident has a condition specified in Section 87593(d).
- (1) A licensee cannot retain a resident under age 60 beyond 30 calendar days from initial placement by the APS agency, unless the acceptance and retention requirement provided in Section 87582(b)(6) is met.
- (k) Within seven calendar days of the licensee making any changes to an agreement with an APS agency, the licensee shall notify the Department in writing of these changes, which may include a renewed agreement, amended language and/or notification of a terminated agreement.
- (l) All emergency placements are subject to the same record requirements as set forth in Section 87570(d).

NOTE: Authority cited: Sections 1569.30 and 1569.31, Health and Safety Code; and Senate Bill 2199 (Chapter 946, Statutes of 1998), Section 14 uncodified. Reference: Sections 15610.13 and 15763, Welfare and Institutions Code; and Sections 1569.1, 1569.2, 1569.312, 1569.315, 1569.316, 1569.47, 1569.54, 1569.698, 1569.699, 1569.71, 1569.72, and 1569.73, Health and Safety Code.